

**Dissertation Volume 2**

Literature Review

Empirical Research Project

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## **DECLARATION**

I declare that the material submitted for examination is my own work. The ideas and findings of others have been referenced in accordance with the guidelines provided and any work by others has been acknowledged.

I understand that anti-plagiarism software may be used to check for appropriate use of referencing.

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## Table of Contents

Acknowledgements	5
Impact Statement	6
Part 1: Literature Review	7
Exploring the motivations of Adoptive parents and the Impact on the Adoption Adjustment and Outcome	7
Abstract	8
Section I	9
Introduction	9
Methodology	13
Section II: Child-Centred Motivations	14
Section III: Parent-Centred Motivations	18
Section IV: Influencing Adoption Outcomes	22
Transitioning from Infertility to Adoption	26
In Summary	31
Section V: Concluding Thoughts	32
References	36
Part 2: Empirical Research Project	44
Exploring Patterns and Outcomes of ‘Moral’ and ‘Biological’ Motivations in UK-Based Adoptive Parents.	44
Abstract	45
Child-Centred motivations	47
Parent-centred Motivations	48
Characteristics of the Adopted Child	50
Adoption Challenges and Outcomes	52
This study	53
Research Questions (RQ)	54
Methods	55
Results	59
Section I	59
RQ1: Characteristics of Adoptive Parents	59
RQ2: Motivational Profile and Preference to Adopt a Child with Particular Needs	62
RQ3: Motivational Profile and Characteristics of their Adopted Child	65
Section II:	70
Adoption Outcomes	70
RQ4: Motivational Profile and Social Worker’s Confidence Rating	70
RQ5: Motivational Profile and Outcome	71
Discussion	72
RQ1: Motivational Profile, Adoptive Parent Demographics and Characteristics	72

RQ2: Motivational Profile and Preference to Adopt a Child with Particular Needs	74
RQ3: Motivational Profile and Characteristics of the Adopted Child	76
Section II	79
Adoption Outcome	79
RQ 4: Motivational Profile and Social Workers' Confidence Rating	79
RQ5: Motivational Profile and Outcome of the Adoption Placement.	80
Concluding Thoughts	82
<i>Future Research and Policy Implications</i>	83
<i>Clinical Implications</i>	84
<i>Final Thoughts</i>	85
Appendix I - Adoption Forms	86
Appendix II - Variables for Part 1	87
Appendix III - Variables for Part 2	88
References	89

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## **Impact Statement**

This research highlights the critical role of adoptive parents' motivations in shaping adoption choices, adjustment and outcomes, providing valuable insights into an underexplored area of adoption studies. By examining adoption motivations such as altruism and biological constraints, this work identifies key factors that may influence the success of adoptive placements, particularly in relation to the child's age at placement, as well as understanding how motivation impacts on the adoption process.

The findings have significant implications for adoption practice and policy. They emphasise the need for tailored pre- and post-adoption support that addresses the unique motivations and challenges adoptive parents face, especially when adopting older children who may experience attachment difficulties.

Beyond immediate practical applications, this research advances academic understanding of the interplay between parent-centred and child-centred factors in adoption choices and adjustment. It lays the groundwork for future longitudinal and culturally inclusive studies, informing adoption services worldwide and fostering better outcomes for adoptive families and children. This work contributes to the development of evidence-based training and support frameworks that enhance the well-being of adoptive families, ultimately influencing adoption systems and practices globally.

## **Part 1: Literature Review**

**Exploring the motivations of Adoptive parents and the Impact on the Adoption**

**Adjustment and Outcome**

**Word Count: 7847 words**

## **Abstract**

**Context:** Adoptive parents' motivations are crucial in shaping adoption adjustment and outcomes. While motivations such as altruism, religious beliefs, and responses to infertility are well-recognized, limited research addresses how these motivations impact the adoption process and outcomes for both parents and children.

**Aims:** This review aims to explore the range of motivations for adoption and their influence on adoption adjustment, focusing on parent-centred and child-centred factors, including altruism, infertility, and biological constraints.

**Methods:** A comprehensive literature search was conducted across academic databases, reviewing studies from the UK, the US, Canada, and Australia. The review considered various family structures, including heterosexual and LGBTQI+ couples, and examined how motivations affect four key areas: transition from infertility, parental expectations, child's age at placement, and attachment outcomes.

**Results:** Findings suggest that adoptive parents' motivations, particularly those related to infertility and altruism, significantly impact post-adoption adjustment. The child's age at adoption and parental expectations were identified as critical factors influencing the success of the adoption, especially in cases where older children face attachment challenges.

**Conclusion:** The review highlights the importance of understanding adoptive parents' motivations in shaping adoption outcomes. Further research is needed to explore these dynamics longitudinally and across different cultural contexts, particularly for LGBTQI+ parents. These insights are essential for improving adoption support and ensuring successful family outcomes.



## **Section I**

### **Introduction**

Bartholet (1990, as cited in Goodman & Kim, 1999) emphasises the dual nature of human needs, suggesting that while there is an inherent drive to procreate, there is also a natural need to nurture. This is particularly relevant in the current context of Looked After Children (LAC) and adoption in the UK, where ongoing challenges, exacerbated by the Covid-19 pandemic, have led to increased placement breakdowns, leaving many children without stable homes.

As of March 31, 2023, there were 82,170 children in the care of local authorities in England, representing a 2% increase from the previous year and continuing a steady rise in the number of children entering care (Department for Education [DoE], 2023). In 2023, 3,890 children left care through adoption, with 87% adopted by couples and 13% by single adopters (DoE, 2023). The average age of children at the time of adoption was 3 years and 3 months. Additionally, the number of same-sex couples adopting has risen, with 15% of adoptions now involving same-sex couples, reflecting a gradual shift in adoption demographics (Coram, 2023).

Despite these trends, the number of families approved for adoption has decreased, contributing to a growing gap between children awaiting adoption and available adopters. In 2023, there was a 3% decline in approvals for adoptive families despite increased interest in adoption registrations (Coram, 2023). This may be due to the impact of Covid-19 delaying processes and the increasing focus on Special Guardianship Orders (SGOs). However, the discrepancy between the amount of families seeking adoption and children waiting highlights complex and diverse motivations among prospective adopters, though research in this area, particularly within the UK, still needs to be conducted.

## *Understanding the Adoption Framework in the UK and Internationally*

The adoption framework in the UK is shaped by a combination of legal, policy, and social considerations aimed at promoting the welfare of children while supporting adoptive families. Governed primarily by the Adoption and Children Act 2002, which emphasises the child's best interests, the framework ensures that all adoption decisions prioritise the child's safety, well-being, and long-term stability (Adoption and Children Act, 2002). The increasing focus on SGOs reflects an approach to provide permanency for children while maintaining a connection to their birth families. SGOs, which have seen a rise in recent years, offer an alternative pathway for children unable to reunite with their birth families, providing a stable, long-term arrangement without fully severing ties. This approach addresses the needs of children who might benefit from a structured family environment without the complete legal transition of adoption, highlighting a nuanced shift in the UK's approach to permanency planning. However, the rise in SGOs also intersects with traditional adoption pathways, often limiting the pool of children eligible for adoption and adding complexity to the motivations of prospective adoptive parents. Many adoptive parents must now navigate this changing landscape, balancing their motivations with the realities of limited options, often influenced by complex legal and social frameworks.

Local authorities play a central role in assessing prospective adoptive parents through a rigorous approval process that includes background checks, home assessments, and training (Gov.uk, 2023). There has been a growing focus on SGOs and adoption for older children and those with complex needs, reflecting the UK's commitment to finding permanent homes for vulnerable children in care (CoramBAAF, 2023). Additionally, adoption in the UK has become more inclusive, welcoming applications from a broader range of prospective parents, including LGBTQI+ individuals and couples, single people, and those from diverse cultural backgrounds (New Family Social, 2023). Same-sex couples now constitute 15% of adoptive parents, marking

a significant shift in the demographic composition of adopters (Coram, 2023). This inclusivity has expanded opportunities for children to find secure, loving homes while also raising questions about the specific motivations and experiences of these adoptive parents, many of whom adopt from a mix of parent-centred and child-centred motivations. These changes reflect broader societal shifts but underscore the need for tailored research and support. Understanding the impact of changing demographics, such as those driven by LGBTQI+ individuals, is critical for ensuring that all adoptive parents feel supported and understood, particularly regarding motivations and potential challenges unique to their experiences. Recent initiatives like the Adoption Support Fund provide post-adoption services like therapy and counselling to help adoptive families navigate challenges (First4Adoption, 2023). However, challenges remain, such as delays in the matching process and the need for more research on the outcomes of adoptions involving children with high levels of trauma or special needs. Further, it is imperative that research reflects the changing landscape of adoption with an emphasis on understanding how parental motivations may shape the process itself, and adoption outcomes.

#### *Rationale, Adoptive Parent Motivation*

Costa and Tasker (2018) argue that understanding adoptive parents' motivations is crucial for improving the recruitment of prospective adoptive parents, both in the UK and internationally. They highlight the need for more research on LGBTQI+ prospective parents' motivations for adoption, especially since the implementation of the Adoption and Children Act 2002. Similarly, Malm and Welti (2010) emphasise that motivations can significantly impact adoption outcomes, including the well-being of parents and children. Howell-Mulroney (2014) explores how religious motivations and faith-based initiatives, particularly within local faith communities, contribute to the adoption process in the U.S. This finding may also have implications for UK practices.

As this literature review will highlight, exploring adoptive parent motivation is particularly important in regards to the recruitment of adoptive parents, governmental policies aimed at safeguarding adoptive children, and crucially, understanding outcome and resilience factors in adoptive placements. This literature review synthesises domestic and international research on adoptive parents' motivations, examining how these motivations influence the adoption process and the subsequent adjustment and outcomes for both children and parents.

**Section II** will explore child-centred motivations, beginning with altruistic and humanitarian concerns, followed by religious and spiritual motivations, and concluding with a focus on LGBTQI+ adoptive parents' experiences. **Section III** will shift to parent-centred motivations, including biological constraints in having biogenetic children, LGBTQI+ considerations, and proximity to prospective adoptive children. **Section IV** will address adoption outcomes in relation to motivations, starting with the transition from infertility to adoption and the impact of parental expectations on adjustment. The review will then explore parental motivations regarding the child's age at placement, concluding with a discussion of attachment theory and its relevance to adoption motivations and outcomes. Finally, **Section V** will summarise the essential findings and arguments presented throughout the review before leading into the empirical research project.

## **Methodology**

A comprehensive search of academic databases in psychology and social care was conducted to examine adoption and the motivations surrounding it, particularly in relation to infertility and the decision to adopt. The databases searched included PsychINFO, MEDLINE, Psychoanalytic Electronic Publishing (PEP), and Social Care Online, accessed via platforms available to University College London (UCL), such as EBSCO, Wiley Online Library, and OvidSP. Key search terms included variations of 'adoption,' 'adoption motivation,' 'infertility and adoption,' and 'motivation to adopt,' as these terms are central to understanding the factors influencing adoption decisions. Other key terms included 'adoption outcomes', 'adoption and attachment' and 'adoption and age at placement'. After identifying some relevant papers, consulting their reference lists proved helpful in locating additional related studies and papers.

The search included a review of UK and International adoption statistics, guidance related to adoption practices from government-funded initiatives such as Coram, and peer-reviewed research articles. Both quantitative and qualitative studies were screened for relevance, focusing on the motivations of adoptive parents (including prospective), particularly in cases of infertility. While the search primarily centred on the UK context, relevant international literature was also considered, when applicable, to include Europe and the United States of America. Only articles, surveys and studies in English were used.

In this review, like preexisting research (Costa and Tasker, 2018), adoptive parent motivations have been operationalised into two categories. Child-centred motivations focus on the child, such as the altruistic desire to provide a home and a family for those children in desperate need (Hollingsworth, 2000). Some of these motivations can be considered underscored by religious and spiritual considerations and will be included here. Parent-centred motivations relate to the 'perceived benefits prospective parents anticipate from having children' (Costa and Tasker,

2018, p. 4158) and focus primarily on a parental desire to have a child. This area is mainly concentrated around biological constraints to having biogenetic children.

## **Section II: Child-Centred Motivations**

The exploration of child-centred motivations will begin with altruistic and humanitarian concerns, proceed to religious and spiritual motivations, and conclude by focusing on the experiences of LGBTQI+ adoptive parents.

### *Altruistic and Humanitarian Considerations*

Child-centred motivations for adoption are primarily driven by altruistic desires to provide homes for needy children (Hollingsworth, 2000). Wallis (2006), in her study of 245 prospective adoptive parents in England, found that a quarter were motivated by these desires, often influenced by religious and spiritual considerations. This pattern is mirrored in the U.S., where several studies have explored adoption attitudes. For instance, the National Foster Care Awareness Project (1998) surveyed 1,000 U.S. households, while the Princeton Survey Research Associates (1997) surveyed 1,554 households on behalf of the Evan B. Donaldson Adoption Institute. These studies confirmed that altruism, often driven by a desire to help needy children, is a dominant motivator for adoption.

The Dave Thomas Foundation (DTF), an adoption charity in the U.S., conducts research every five years to assess public attitudes and beliefs about adoption. Their most recent study, conducted in 2017, revealed that those considering adoption were primarily motivated by altruistic reasons, with the majority aiming to help a needy child (DTF, 2017). Similarly, Tybejee (2003) conducted a survey comparing prospective foster and adoptive parents' attitudes, willingness, and motivations. The findings showed that most motivations were child-centred, with 94% of respondents driven by a desire to positively impact a child's life or provide a stable

family environment for children in need (Tybejee, 2003). Whilst this is helpful, international studies often rely on surveys of the general population, which raises questions about their applicability to actual adoptive parents. For instance, while DTF's research included those considering adoption, it remains unclear if such consideration was active or hypothetical. More rigorous studies involving adoptive parents themselves offer deeper insights into genuine motivations.

Goodman and Kim's (1999) study of 340 children adopted from Mother Teresa's Indian orphanages into the U.S. (1973-1987) found that 53% of adoptive parents were primarily motivated to provide a home for a needy child. The study concluded that these parents adopted out of a genuine desire to give, with little focus on personal gain. Similarly, Malm and Welti's (2010) analysis of data from the National Survey of Adoptive Parents (NSAP) showed that 81.2% of adoptive parents were motivated to offer a permanent home, with 68.5% also citing family expansion. This suggests that while altruism is prevalent, other personal motivations, such as family building, also play a significant role in adoption decisions.

Brind's (2008) U.K.-based mixed-methods study used questionnaires and semi-structured interviews to examine the perspectives of adopters and social workers, focusing on the impact of a child's age at placement on adoption motivations. The study found that no adopters identified altruism as their primary motivation, with four social workers expressing similar views. One social worker noted that "most adopters want children for highly personal reasons" (Brind, 2008, p. 323). This suggests that while altruistic motivations may be present, personal factors, such as religiosity and spirituality, often play a significant role. These personal beliefs, although contributing to an overall child-centred approach, strongly influence adoptive parents' decision-making process and motivational profile.

### *Religious and Spiritual Motivations*

Religious and spiritual motivations often play a significant role in shaping adoptive parents' decisions, particularly in relation to altruistic desires to provide a home for a child. Howell-Moroney's (2014) quantitative study in the U.S., using data from the National Survey of Current and Former Foster Parents, found that religiously motivated foster parents are more likely to have altruistic reasons for fostering than non-religious foster parents. Specifically, 79% of religiously motivated parents indicated that their primary motivation was to provide a home for a child who would otherwise be institutionalised, a rate 14% higher than non-religiously motivated parents. Additionally, 83.6% of the religious group desired to help their community or society, compared to 51.7% of the non-religious group. This suggests that religious motivation is closely linked to altruistic fostering behaviours. The study also highlights the impact of faith-based recruitment efforts, with 32 U.S. states having targeted programs to attract religious foster and adoptive parents.

While Howell-Moroney's (2014) findings support the link between religious motivations and altruism, it is essential to note that the data relied on was from 1991, which raises questions about the relevance and accuracy of the conclusions for 2014. Despite this limitation, the study offers valuable insights for understanding how religious motivations can shape fostering and adoption behaviours.

Firmin et al. (2017) conducted a smaller qualitative study with 21 Evangelical Christian families in the U.S., finding that their motivations for adoption were primarily theological or spiritual rather than purely altruistic. These families cited reasons such as a biblical mandate, ministry work, spiritual adoption, and viewing their adoption experience as God's blessing. While the study did not explicitly focus on altruism, the underlying motivations could be seen as altruistic, though more focused on religious duty than child-centred concerns. Despite the small sample



size and specific population, the study adds to the discourse on how religious and spiritual beliefs influence adoption decisions, suggesting that these motivations may translate into altruistic actions, though not always with a child-centred focus.

Helder et al. (2020) investigated the role of religious motivations in adoption, finding that more than two-thirds of the families (not selected by motivation) were driven by religious beliefs. These families were more likely to adopt older children and had larger family sizes, indicating a tendency toward altruism in this group.

Research into child-centred adoption motivations reveals that many adoptive parents, especially in U.S. studies, are driven by altruistic and humanitarian motives, such as providing stable homes for children in need. Religious beliefs also play a significant role, with studies finding that religiously motivated parents are often more inclined toward altruism and community service. However, these studies, largely based on general population surveys in the U.S., raise questions about their applicability to actual adoptive parents, particularly in the UK, where fewer studies have explored how religious and altruistic motivations impact adoption decisions.

### *LGBTQI+ Experiences and Considerations*

Since the introduction of the Adoption and Children Act (2002) in the UK, same-gender couples have been able to adopt, prompting interest in understanding the motivations and recruitment of LGBTQI+ adoptive parents. Costa and Tasker's (2018) mixed-methods study used an online survey to explore these motivations among 366 LGBTQI+ individuals, including adoptive parents, prospective adopters, and those considering adoption. Of the participants, 231 had adopted at least one child, 83 were in the adoption process, and 52 were considering it. The study found that the desire for a permanent family was a key motivator, with many parents emphasising the importance of providing their children with security and a stable family environment, particularly when adopting from social care. These motivations were interpreted as

altruistic, as participants frequently committed to offering needy children a 'forever family' (Costa & Tasker, 2018).

Similarly, Jennings et al. (2014) conducted qualitative research on 130 gay, lesbian, and heterosexual adoptive families in the UK, finding that same-sex couples often cited altruistic reasons for choosing adoption over conception. These parents expressed that it felt unnecessary to bring another child into the world when there were already so many in need of a family, contrasting with some motivations of heterosexual couples. This highlights the complex interplay of parent-centred and child-centred motivations among LGBTQI+ adoptive parents, which will be further explored in relation to biological factors in the next section.

### **Section III: Parent-Centred Motivations**

The focus will shift here to review studies on parent-centred motivations, covering infertility and barriers to having biological children, LGBTQI+ perspectives, and how the closeness to prospective adoptive children may also impact on adoption motivation.

#### *Infertile Prospective Adoptive Parents*

Infertility is defined as the inability to conceive after 12 months of regular attempts to achieve pregnancy or the inability to carry a pregnancy to term, resulting in a live birth (Zegers-Hochschild et al., 2009). Infertility is a major motivating factor for adoption in both the U.K. and the U.S., with an estimated 3.5 million people in the U.K. and 7.3 million women in the U.S. experiencing infertility (Fertility Network, 2022; Chandra, 2005; Park & Hill, 2014). As more individuals and couples delay childbirth, a trend expected to continue (Office for National Statistics, 2022), infertility rates are also projected to rise.

Infertility is a significant factor influencing adoption, particularly among heterosexual couples. Research shows that infertility is a strong predictor of the willingness to adopt, with many

couples turning to adoption as a result of infertility (Jennings et al., 2014; Cudmore, 2005; Malm & Welti, 2010). Hollingsworth (2000) also noted that women treated for infertility are five times more likely to adopt than those who do not seek such treatments. These motivations are often parent-centered, reflecting the personal desire to have a child and the perceived benefits of parenting (Costa & Tasker, 2018).

Bausch's (2006) quantitative study used data collected from a randomly selected sample of married individuals (n = 185) and a non-random sample of applicants from a public adoption agency (n = 47) in a medium-sized city in the Midwest U.S. The study supported the idea that infertility is the strongest predictor of adoption interest. Similarly, Malm and Welti (2010), using data from the National Survey of Adoptive Parents, found that over 78% of children were adopted by parents for whom infertility was a significant factor.

In Australia, Young's (2012) qualitative study of 32 families pursuing intercountry adoption revealed that infertility was a primary motivation for 24 families. Parents emphasised that children bring meaning to their lives and relationships, and infertility was often the reason for choosing adoption. Zhang and Lee (2011) found similar results, with most participants citing infertility as a reason for adopting, though some also highlighted humanitarian motivations, particularly in cases of international adoption. Park and Hill (2014) also explored adoption motivations in a sample of 876 childless women, finding that infertility, particularly subfecundity and seeking medical help for infertility, was strongly associated with adoption consideration.

Hanlon and Quade's (2022) U.S.-based Profiles in Adoption survey found that approximately 17% of individuals who completed intercountry adoptions and about 16% of those who adopted from foster care cited infertility as their primary motivation. This underscores the significant role that biological constraints play in the decision to adopt.

Overall, infertility remains a key driver of adoption, with research consistently showing that infertile individuals are more likely to consider and pursue adoption than others. While advances in infertility treatments exist, the association between infertility and adoption remains significant. However, for prospective LGBTQ parents, the situation differs, and their motivations will be discussed separately.

### *Biological Motivations for LGBTQI+ Prospective Adoptive Parents*

LGBTQI+ prospective adoptive parents face unique biological challenges in pursuing parenthood, often influencing their motivations to adopt. Research suggests that for many LGBTQI+ individuals, difficulties in achieving biological parenthood can encourage adoption (Costa & Tasker, 2018). For men, surrogacy presents significant financial, legal, and emotional challenges, creating substantial reproductive barriers compared to women (Costa & Tasker, 2018; Berkowitz & Marsiglio, 2007; Patterson, 2009; Riskind et al., 2013).

Lesbian women, on the other hand, have more reproductive options, such as donor insemination or co-parenting arrangements, but may still turn to adoption due to personal preferences or infertility issues (Jennings et al., 2014). Some lesbians pursue adoption after experiencing similar fertility challenges as heterosexual couples (Goldberg et al., 2009). However, research also indicates that many lesbian individuals may not prioritise biological parenthood, opting for adoption instead (Goldberg et al., 2009).

Although it remains unclear whether LGBTQI+ individuals adopt primarily for parent-centred or child-centred reasons, research suggests that both motivations are prevalent and may overlap. Moreover, despite legislative advancements in some countries, LGBTQI+ prospective adopters often encounter additional legal and societal challenges. In countries where same-sex adoption is still not widely accepted, such as certain Eastern European and African nations, LGBTQI+ couples may face significant barriers to adopting or may pursue adoption internationally in more

inclusive legal environments. This area of study is lacking and requires further exploration better to understand the distinct motivations of LGBTQI+ prospective adoptive parents.

#### *Other Motivations: Proximity and Life Experiences*

In addition to altruistic and biological motivations, proximity to adoption seems to play a role in the decision to adopt. Research has shown a positive correlation between prior exposure to adoption and favourable attitudes toward it (Princeton Survey Research Associates, 1997). For instance, the Dave Thomas Foundation for Adoption (2017) found that having a friend or family member who had adopted increased the likelihood of considering adoption (Costa & Tasker, 2018). Similarly, Berry et al. (1996) found that knowing a child before adoption or being related to the child significantly influenced adoption decisions in 13% and 9% of cases, respectively.

Bausch (2006) and Tyjeebee (2003) also reported that individuals who had been adopted themselves or knew someone who had fostered or adopted were more likely to have positive attitudes toward adoption. Malm and Welti (2010) further suggested that prior exposure to adoption increases the likelihood of considering adoption, even without infertility issues. While proximity to adoption may be a secondary factor compared to altruistic and biological motivations, it remains a significant influence in many adoption decisions.

Studies on adoption attitudes have also examined how personal experiences influence adoption motivations. Gibbons and Brown (2012) found that individuals who recalled their own mothers as warm were more likely to have positive attitudes toward adoption. However, the desire to be a parent was inversely related to these attitudes. However, their sample, consisting of undergraduate students without children, was not representative of prospective adoptive parents

### *Reflections on Child and Parent-Centred Motivations*

Bringing these two factors, child-centred and parent-centred motivations, together highlights the complex interplay between altruism, personal desires, and broader social considerations in the decision to adopt. While child-centred motivations, such as the altruistic desire to provide a stable home for children in need, are often influenced by religious or spiritual beliefs (Hollingsworth, 2000; Howell-Moroney, 2014), parent-centred motivations, particularly in cases of infertility, reflect a personal need to nurture and fulfil parental aspirations (Jennings et al., 2014; Costa & Tasker, 2018). In both cases, the decision to adopt is shaped by a combination of selfless concern for the child's welfare and the parents' desire to create or expand a family. These overlapping motivations demonstrate that a single factor rarely drives adoption decisions but rather by a blend of altruistic, personal, and practical considerations, ultimately shaping the adoption process and its outcomes. Understanding this complex dynamic is crucial for researchers and practitioners working with adoptive families. These sections also emphasise the limited number of studies conducted in the UK, with most research originating from the U.S., highlighting the need for further exploration of the UK adoption landscape.

### **Section IV: Influencing Adoption Outcomes**

Exploring the motivations behind adoption reveals that both parent-centred factors, such as infertility, and child-centred motivations, including humanitarian considerations, significantly drive the decision to adopt. Research indicates that families facing biological constraints are more likely to adopt, although altruistic motivations also play an essential role, particularly in older children or international adoption (Jennings et al., 2014; Malm & Welti, 2010). Given the significance of these motivations, it is crucial to examine how they influence the adoption process, adjustment, and long-term outcomes. This section discusses these outcomes from various perspectives, beginning with attachment-related difficulties and then examines other

factors that can impact both attachment and adoption success, including the psychological transition from infertility to adoption, parental expectations, and child characteristics, particularly age at adoption. Ultimately, the interrelationship between these factors sheds light on the complexity of adoption experiences and the various influences that shape both parent and child outcomes.

### *Attachment Difficulties in Adoption*

A child's attachment profile is also likely to impact on their adoption experience and outcome and links indirectly to adoption motivation. Attachment theory, first developed by Bowlby (1969, 1983), explains the emotional bonds between children and their primary caregivers and how these bonds impact future relationships. According to Bowlby's theory, early interactions between a caregiver and an infant are crucial in shaping the child's attachment style, which manifests in increasingly visible behaviours as the child grows. This framework was expanded by Ainsworth (1978), who identified distinct attachment styles—secure, avoidant, ambivalent, and disorganised—through her research on infant-caregiver interactions. Secure attachment develops when caregivers consistently respond to an infant's needs, fostering trust and emotional security. In contrast, inconsistent or neglectful caregiving can lead to insecure attachment patterns, where children may suppress their distress or exhibit anxious behaviours in response to caregivers' unavailability.

For adopted children, early childhood trauma, such as neglect, abuse or parental substance misuse, can profoundly disrupt the formation of secure attachments. These early adversities, combined with the removal from their primary caregivers, often result in insecure attachment styles that children carry into their adoptive homes (Barone & Lionetti, 2012). Insecure attachment behaviours, such as withdrawal or aggression, are common among adopted children and can be challenging for adoptive parents to manage.

Prospective adoptive parents frequently express concerns about their ability to establish secure attachments with their adopted children, particularly when adopting older children or those with traumatic backgrounds (Brodzinsky, 1998). Research indicates that the age at which a child is adopted plays a significant role in attachment outcomes. Children adopted after six months of age, especially those adopted at preschool age or older, face more significant risks of attachment-related challenges (Van den Dries et al., 2009). These children may have experienced multiple placements or neglect, which complicates their ability to form secure bonds with adoptive caregivers (Dozier et al., 2001).

In addition to focusing on the child's attachment style, more recent studies have examined the influence of adoptive parents' attachment styles on adoption outcomes. Dozier and colleagues (2001) found that foster carers with secure attachment styles were more likely to foster secure attachments in their foster children, even when the children had experienced significant disruptions in care. This research highlights the importance of the caregiver's attachment state of mind in shaping the child's capacity to form secure emotional bonds in a new family. Steele et al. (2006) expanded on this by demonstrating that adoptive parents' unresolved trauma or attachment issues can negatively affect their adopted children, resulting in role-reversed or controlling behaviours within the parent-child dynamic. This aligns with Winnicott's (1960) view that the caregiver must provide a reliable emotional "holding" function, especially when the child brings early trauma. A breakdown in this function can hinder the child's ability to develop a cohesive self, increasing the risk of disorganised attachment and behavioural challenges.

Recent research further suggests that attachment patterns are not biologically fixed but can be reshaped through positive caregiving experiences. Steele (2006) argued that adoption offers an unparalleled opportunity for intervention in the lives of children who have experienced early trauma. When children are placed with adoptive parents who provide consistent, nurturing care, their attachment styles can shift from insecure to secure, significantly improving their long-term



emotional development. This is especially crucial in adoption, where the family's ability to form a secure attachment with the child can mitigate some of the developmental setbacks associated with early trauma (Zeanah et al., 2011).

The role of age at placement remains central to understanding attachment outcomes in adoption (as will be discussed further). Research consistently shows that older children are more likely to exhibit attachment difficulties and emotional or behavioural challenges (van den Dries, Juffer, van IJzendoorn, & Bakermans-Kranenburg, 2009). Rutter et al., 2010). Older children may struggle with forming secure attachments due to the cumulative effects of multiple placements or prolonged exposure to adverse conditions prior to adoption (Van den Dries et al., 2009). A study by Rutter et al. (2010) of children adopted from Romanian orphanages found that those adopted after six months of age were more likely to develop disorganised attachment patterns and experience emotional and behavioural difficulties than those adopted earlier.

Adoption motivations also play a role in attachment outcomes. Parents adopting due to infertility may carry unresolved grief, which can complicate their ability to fully support the emotional needs of their adopted child (Brodzinsky, 1998). This unresolved grief may lead to difficulties in forming secure attachments with their child, particularly if the child exhibits behaviours that do not align with the parents' expectations. Additionally, the age at which children are adopted, often influenced by parents' motivations, can exacerbate these challenges. Malm and Welti's (2010) research demonstrated that families who adopt older children, particularly those motivated by altruistic desires to help children in need, will likely need to manage the attachment difficulties and behavioural challenges that are more likely to arise with later adoption.

Indeed, attachment difficulties are a critical factor in determining adoption outcomes. Both the child's early experiences and the adoptive parents' attachment styles significantly impact the

success of the adoption. While children with insecure attachment patterns may face greater challenges, consistent and nurturing care from adoptive parents can positively transform these attachment styles over time. Understanding the complexities of attachment, including the interplay between the child's age at placement, the parents' motivations, and their attachment state of mind, is essential for understanding adoption outcomes.

### *Transitioning from Infertility to Adoption*

The psychological transition from pursuing biological parenthood to embracing adoption can have a significant impact on the outcome of the adoption itself. For many prospective adoptive parents, especially those who have struggled with infertility, this shift involves a process of mourning the loss of biological parenthood and redefining their identity as parents. The emotional toll of infertility, including anxiety, guilt, and depression, can influence how fully adoptive parents embrace the adoption and their ability to build a strong bond with the adopted child (Brodzinsky, 1998). Psychological distress is expected during this transition, with research showing that many individuals experience grief over the loss of the ability to have a biological child, which can influence their approach to adoption (Goldberg et al., 2009).

Goldberg et al. (2009) conducted a qualitative study of lesbian and heterosexual couples transitioning from infertility to adoption and found that the emotional experience of this shift was deeply individual. While many participants described the mourning process as difficult and ongoing, some reported that the decision to adopt brought relief and healing, as it provided closure to the pursuit of biological parenthood. In particular, participants felt that adoption offered a way to move forward and build a family, ending the emotional cycle of infertility treatments. This finding is echoed by Lasker and Borg (1987), who noted that many couples found the biological connection to a child less significant after adopting, with some even losing interest in further infertility treatments once they had bonded with their adopted child.

However, for some, the transition from infertility to adoption can be fraught with unresolved grief, which may impact the adoptive family dynamic. Brodzinsky (1998) emphasised that adoptive parents who fail to resolve their feelings of loss associated with infertility may struggle to develop a full sense of entitlement to their adopted child, which could hinder their ability to form secure, healthy relationships. This unresolved grief can resurface during significant milestones in the adopted child's life, such as when the child begins exploring their birth family history or reaches puberty. In these moments, parents may be reminded of their infertility, which can complicate the parent-child bond.

From a psychoanalytic perspective, unresolved grief around infertility may limit a parent's capacity to offer what Winnicott (1960) called a "holding environment"—a psychological space in which the child's anxieties and developmental needs can be safely contained. Without this emotional availability, parents may struggle to attune to the adopted child's distress, potentially disrupting the formation of secure attachments.

Further complicating this transition is society's perception of adoption, which can sometimes reinforce the notion that it is a 'second-best' option to biological parenthood (Fisher, 2003). Research by Miall (1987) highlights how social stigma and cultural narratives around adoption as a 'backup plan' can influence adoptive parents' feelings of legitimacy. Brodzinsky (1998) noted that societal attitudes, which often privilege biological parenthood, may cause adoptive parents to feel that their connection to their child is undervalued. This societal bias may contribute to adoptive parents questioning their ability to provide a loving, secure relationship with their child. However, as Daniluk and Hurtig-Mitchell (2003) argue, many adoptive parents undergo a process of resocialisation, shifting their identity from biological to adoptive parents, which can help resolve feelings of inadequacy and create a stable family environment.

### *Parental Expectations*

Parental expectations are critical in shaping adoption outcomes, particularly when unresolved expectations lead to dissatisfaction. This is often the case for parents transitioning from infertility, as they may enter the adoption process with preconceived notions about the child and the parenting experience. Brodzinsky (1998) highlights how adoptive parents may harbour fantasies of a 'perfect child' or expect that adopting will resolve their emotional needs tied to infertility. When these expectations are unmet, parents may experience frustration or disappointment, negatively impacting the parent-child bond and the child's sense of security and self-esteem.

Unrealistic expectations, especially regarding a child's characteristics or behaviour, can be particularly problematic. Parents may underestimate the challenges of raising an adopted child, particularly if the child has experienced trauma, neglect, abuse, or frequent placement disruptions. Brodzinsky (1998) also found that some adoptive parents, particularly those from middle or upper-middle-class backgrounds, had high academic or behavioural expectations for their children, which often clashed with the reality of the child's needs, particularly those with significant trauma or developmental delays. This mismatch can lead to heightened stress within the family and potentially undermine the adoption's success.

Welsh, Viana, Petrill, and Mathias (2008) also examined the expectations of pre-adoptive parents and found that these expectations were more closely linked to child characteristics than family variables. Parents adopting older children or those with special needs tended to anticipate more significant challenges, yet mismatches between expectations and reality still led to considerable stress. This was particularly true for those who had underestimated the emotional or behavioural difficulties the child might present.

### *Age at Placement*

As mentioned earlier, the age of a child at the time of adoption is a critical factor influencing both attachment and adoption outcomes. Research consistently demonstrates that younger children tend to adjust more efficiently, while older children, particularly those adopted after the age of three, face a higher risk of behavioural and emotional challenges (Berry, 1992; Sharma, McGue, & Benson, 1996b). These difficulties often arise from early experiences of trauma, neglect, or instability, which can disrupt the child's ability to form secure attachments with new caregivers.

Berry (1992) found that children adopted at age three or older were more likely to exhibit behaviours such as aggression and hyperactivity, potentially straining family dynamics. These behaviours are frequently linked to attachment difficulties, where children struggle to establish trust and emotional bonds due to prior disruptions in care. Further supporting this, Sharma et al. (1996b) examined a large sample of adopted children and found that those adopted after the age of 10 experienced the most severe adjustment difficulties, including higher rates of substance abuse and behavioural problems. Fisher (2003) similarly argues that the older the child is at adoption, the higher the risk of adoption disruption, as unresolved psychological or emotional trauma may complicate the adjustment process and challenge family stability.

More recent research shows that children adopted at an older age are more likely to experience a range of psychological and behavioural difficulties compared to those adopted at a younger age. Van den Dries et al. (2009) conducted a meta-analysis that revealed older children adopted internationally exhibit higher rates of behavioural problems and are more frequently referred for mental health support. This is often attributed to the adverse experiences and instability many of these children face before adoption, such as neglect or multiple foster placements, which can impair their ability to form secure attachments. Barone and Lionetti (2012) further explored this in their study of late-adopted preschoolers, finding that older children often struggle with

attachment and emotional understanding, challenges that stem from disrupted early caregiving relationships. These findings emphasise that children adopted at an older age may carry the effects of earlier trauma and instability, which can heighten the risk of behavioural and emotional difficulties post-adoption.

Malm and Welti (2010) offer additional insight into how motivations for adoption influence the age of the child adopted. Their research shows that families motivated by infertility are more likely to adopt infants, seeking to experience early parenthood from the beginning. In contrast, families driven by altruistic reasons, such as the desire to care for needy children, are more inclined to adopt older children (Brind, 2008; Helder, 2020). While the motivation of altruism plays a significant role, adopting older children presents unique challenges due to the higher likelihood of previous trauma, abuse, or neglect, which can impede emotional and behavioural adjustment.

### *Adopting a Child with Additional Needs*

The motivations of adoptive parents play a critical role in shaping the outcomes for children with additional needs. Research indicates that parents motivated by altruism, particularly those driven by religious or humanitarian beliefs, are more likely to adopt children with special needs (Glidden, 1985; Belanger et al., 2012). These altruistic motivations can positively influence the adoption process, as parents with a strong desire to provide care for vulnerable children may be better prepared to handle the challenges associated with raising a child with complex needs. Glidden (1985) found that parents who adopted children with developmental disabilities were often motivated by a desire to help, which contributed to their resilience in coping with the child's long-term needs.

However, motivations solely centred on altruism without adequate preparation or understanding of the challenges can sometimes lead to stress and unrealistic expectations. Belanger et al.

(2012) highlighted that while religious motivations can foster a deep commitment to the child's wellbeing, they can also lead to emotional strain if parents are unprepared for the long-term demands of caregiving. These findings suggest that while altruistic motivations can provide a strong foundation for adoption, success often depends on the preparedness and support available to parents adopting children with special needs.

### *In Summary*

The motivations driving adoption, whether parent-centred or child-centred, significantly impact adoption outcomes. Infertility as a motivator often leads prospective parents to adopt younger children, aiming to replicate the experience of early parenthood. The research suggests that children who are adopted younger have better outcomes compared to older children. Child-centred, altruistic motivations, such as providing a home for a child, bring different challenges related to the child's age and prior past experiences of trauma and adverse early experiences (ACES). Understanding the interplay between these motivations and the characteristics of both the parent and the child adopted seems crucial for predicting adoption success and identifying the support needed to foster a stable family environment.

It is also essential to recognise that adoptive parents' expectations and motivations influence not only the adoption process but also the long-term success of the adoption. Parents who enter adoption with unresolved grief from infertility or unrealistic expectations about the child's behaviour and development may face greater challenges in adjusting to their new roles. Conversely, parents who approach adoption with a clear understanding of the child's needs and the potential complexities of the adoption process are more likely to achieve a successful outcome.

## **Section V: Concluding Thoughts**

### *Strengths, Limitations and Implications for Future Research*

This review draws on a broad range of international research, providing a comprehensive perspective on the motivations driving adoption and their impact on adoption outcomes. By examining studies from multiple countries, the review highlights both universal themes—such as the influence of infertility on adoption decisions—and context-specific findings, such as the role of religious motivations in the U.S. and the rising prevalence of LGBTQI+ adoptive parents in the UK. The inclusion of research focusing on various demographic groups, including heterosexual and LGBTQI+ couples, provides a nuanced understanding of how motivations vary across different populations and affect adoption outcomes in distinct ways.

The review also integrates both parent-centred and child-centred motivations, acknowledging that most adoption decisions are shaped by a combination of factors. This holistic approach helps to illustrate the complex interplay between personal desires for parenthood and altruistic concerns for children's welfare, offering valuable insights for adoption professionals in recruitment and support processes.

Despite its breadth, the review has several limitations. Firstly, much of the research on adoption motivations is based on self-reported data, which can introduce bias, particularly when adoptive parents retrospectively reflect on their motivations. The reliance on qualitative studies, while providing depth, can also limit the generalizability of findings, particularly in smaller sample sizes such as Firmin et al.'s (2017) study on Evangelical Christian families.

One of the most significant gaps identified in this review is the lack of longitudinal research that explores how adoptive parents' motivations influence adoption outcomes over time. Most studies focus on short-term outcomes or rely on retrospective accounts, but few track how



motivations evolve as adoptive parents navigate the challenges of raising an adopted child. This is particularly crucial for parents adopting older children or those with special needs, as their initial motivations may not fully align with the realities they face. Additionally, there is a need for more UK-specific research to account for cultural, policy, and legal differences in adoption practices. Moreover, LGBTQI+ adoption is an emerging area where motivations and outcomes are still not fully understood despite its growing prevalence.

Psychoanalytic and psychotherapeutic research offers another dimension that is underexplored in the current literature. The emotional and unconscious processes driving adoptive parents' motivations, as well as their potential impacts on family dynamics, attachment, and child development, have not been thoroughly examined. Psychoanalytic theory, with its focus on the unconscious mind and the internalisation of early relational experiences, could provide valuable insights into how unresolved emotional conflicts—such as those stemming from infertility or early loss—might manifest in the adoption process. In particular, Winnicott's (1960, 1965) concept of the 'good enough parent' is highly relevant, emphasising the importance of a caregiver who can tolerate the child's emotional demands without becoming overwhelmed. This tolerance enables the parent to provide a 'holding environment'—a space, both physical and emotional, in which the child's anxieties, stemming from earlier disruptions or trauma, can be safely contained and gradually integrated. When adoptive parents enter the process burdened by unresolved grief or driven by idealised motives, they may struggle to create this necessary holding space, potentially impacting the child's capacity to develop secure attachments. Future research that integrates psychoanalytic frameworks could help deepen the understanding of how inner emotional states—both conscious and unconscious—shape adoption outcomes, particularly in complex placements. Incorporating Winnicottian ideas such as the "good enough parent" and the "holding environment" could enhance future research by illuminating how unconscious parental conflicts shape the relational field of adoption (Winnicott, 1960, 1965).

## *Key Findings and Conclusions*

This review demonstrates that adoptive parents' motivations have a substantial influence on various factors affecting adoption outcomes. Motivations impact key decisions, such as the age and needs of the child adopted, as well as the adoptive parents' expectations and preparedness. For example, parents adopting due to infertility often seek to experience early parenthood by adopting younger children, who typically have better attachment outcomes and fewer behavioural challenges (Berry, 1992; Sharma et al., 1996b). In contrast, parents motivated by altruism, such as helping vulnerable children, may adopt older children or those with special needs, who may carry greater emotional and behavioural challenges due to past traumas (Rutter et al., 2010). This emphasises the importance of aligning parents' motivations with the specific needs of children in the adoption process to foster secure, stable family environments.

The review further highlights how motivations shape adoptive parents' ability to support attachment formation, which is crucial for adoption success. Attachment theory suggests that children's early experiences with caregivers influence their capacity to form bonds later in life. Children with disrupted early attachments or trauma may face greater challenges, requiring adoptive parents who are secure, resilient, and prepared for the complexities of these dynamics (Dozier et al., 2001; Steele, 2006). When adoptive parents bring unresolved grief from infertility into the adoption, attachment challenges can increase, especially if expectations do not match the realities of the child's behaviour or needs (Brodzinsky, 1998).

Parental expectations, influenced by initial motivations, also play a crucial role in shaping adoption success. Parents adopting older children or children with complex needs often face more intense demands, and those with realistic expectations and appropriate support tend to achieve better outcomes. Conversely, unrealistic expectations, especially when adopting children with behavioural or attachment difficulties, can lead to frustration, stress, and

challenges in bonding, underscoring the need for pre- and post-adoption support (Welsh et al., 2008).

The age at placement consistently emerges as a vital factor linked to motivation. Younger children generally adjust better, while older children, especially those adopted after age three, face increased risks of attachment and behavioural issues (van den Dries et al., 2009; Rutter et al., 2010). Understanding the implications of age and trauma history in relation to parental motivation can help adoption agencies make better matching decisions and provide targeted support to families.

In conclusion, adoptive parents' motivations significantly shape adoption outcomes by influencing decisions around the child's age, needs, and characteristics, as well as the support systems necessary for success. This review highlights areas for future research, such as longitudinal studies on motivation and outcomes over time, the impact of LGBTQI+ motivations, and UK-specific studies. A deeper understanding of motivation can enhance adoption practices, enabling professionals to better support adoptive families and improve outcomes for adopted children in the long term.

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## **Part 2: Empirical Research Project**

### **Exploring Patterns and Outcomes of 'Moral' and 'Biological' Motivations in UK-Based Adoptive Parents.**

**Word Count: 8841**

## **Abstract**

**Background and Aim:** This study explores the influence of adoptive parents' motivations, categorised as biological (infertility-driven) or moral (altruistic or ethical commitments), on various adoption-related factors, including preferences for child characteristics, social workers' confidence ratings, and placement outcomes. Understanding these motivations provides insights into the dynamics of adoption in the UK and their implications for adoptive families and policy development.

**Methods:** Using a quantitative, retrospective, longitudinal design, the study analysed data from 110 adoptive parent-child dyads within a UK local authority. Variables included adoptive parents' demographics, preferences, and motivational profiles, alongside child characteristics, social worker confidence ratings, and adoption outcomes at six- and fifteen-years post-placement. Statistical analyses, including chi-square tests, Fisher's exact tests, and Monte Carlo simulations, were employed.

**Findings:** Results indicated that biologically motivated parents were more likely to adopt younger children and had higher social worker confidence ratings, whereas morally motivated parents adopted older children and those with greater emotional or behavioural challenges. No statistically significant relationship was found between motivational profiles and long-term adoption success, though moral motivations were associated with slightly better outcomes.

**Discussion:** The findings highlight the nuanced relationship between adoptive motivations, preferences, and adoption dynamics, emphasising the need for tailored support and policies that address the specific challenges faced by different adopter profiles. Future research should explore underrepresented groups, such as LGBTQI+ adopters, and the evolving trends in adoptive motivations.

**Keywords:** adoption motivations, adoptive parents, biological motivations, moral motivations, adoption outcomes, child welfare.

## **Introduction**

In England, the number of looked-after children (LAC) continues to rise, reaching 83,840 as of March 31, 2023, representing a 2% increase compared to the previous year (Department for Education, 2023). This growth reflects the ongoing pressures on the care system, including an increase in unaccompanied asylum-seeking children. A significant shift has occurred in the number of LAC being adopted, with a 16% decrease in 2023. 3,890 children were adopted from care, a reduction from previous years, likely influenced by factors such as court backlogs and wider societal impacts from the Covid-19 pandemic.

Despite this reduction, there has been a 14% increase in registered adopters and a 21% increase in the number of adoptive families compared to 2018/19 (Coram, 2023). Adoption continues to be viewed as a primary route to family formation, with 30% of prospective adopters indicating that adoption was their first choice for starting a family (Adoption Barometer, 2023). Of those adopted in 2023, 87% were adopted by couples, while 13% were adopted by single individuals. Additionally, 15% of adoptions involved same-sex couples, further reflecting the changing demographics of adoptive parents in the UK (Coram, 2023).

Adoption is a complex and multifaceted process, often driven by deeply personal motivations that vary among individuals and couples. Understanding these motivations is crucial, as they not only shape the decision to adopt but can also influence the experiences and outcomes for both parents and children throughout the adoption journey. In adoption literature, motivations are generally divided into two main categories: child-centred and parent-centered. Child-centred motivations are often altruistic, stemming from a desire to provide a loving and stable home for a child in need, while parent-centred motivations are frequently linked to biological factors, such as infertility, which can lead individuals to view adoption as a path to parenthood (Costa & Tasker, 2018).

In the context of England's adoption landscape, where the number of looked-after children (LAC) and adoptive families are both changing, understanding the motivations behind adoption is essential for addressing the needs of these families. Although data on adoption in the UK is regularly collected (Coram, 2023), research on the interrelationship between adoptive motivations, child and parent characteristics, and their impact on adoption outcomes remains limited. More comprehensive studies are needed to explore these dynamics both within the UK and internationally.

### **Child-Centred motivations**

Recent studies continue to underscore the altruistic motivations at the core of child-centred adoption decisions, particularly the desire to provide a home for a child in need. The theme of "rescuing" or offering a safe and permanent home remains a key driver, as highlighted by contemporary research. Malm and Welti (2010), in their analysis of the National Survey of Adoptive Parents, found that almost 90% of adoptive parents reported that offering a permanent home for a child was one of their primary motivations. This aligns with earlier findings, such as Tyebjee (2003), where 94% of participants were motivated by a desire to positively impact a child's life. More recently, Hanlon and Quade's (2022) Profiles in Adoption survey found that 37% of those adopting from foster care were primarily motivated by the need to provide a home, highlighting the ongoing importance of altruistic motivations in adoption decisions.

Goodman and Kim's (1999) earlier research on American families adopting from India, while insightful, had a limited sample and focused on a specific cross-border context. Recent large-scale studies, such as Hanlon and Quade (2022), provide a more comprehensive view across different types of adoptions, demonstrating that motivations can vary based on adoption type. In their study, providing a home was the primary motivation for 23% of adoptive parents overall, suggesting that the degree of altruism varies among adoption contexts.

### *Religious and Spiritual Motivations*

Religious and spiritual motivations continue to significantly influence child-centred adoption decisions. Hanlon and Quade (2022) found that 11% of their sample indicated religious beliefs as a primary motivation for adoption. This reflects a trend also noted in previous studies. Firmin et al. (2017) revealed that for Evangelical Christian families, adoption was seen as part of fulfilling spiritual duties, with many families emphasising their desire to help children in need as part of a religious mission. Similarly, Howell-Mulroney (2014) found that religiously motivated individuals were more likely to foster or adopt children for altruistic reasons, a connection also noted in the fostering context.

Further insights into religious motivations are provided by Helder et al. (2020), who noted that over two-thirds of families in their study were driven by religious beliefs, with more religious families often adopting older children and having larger families. This finding highlights the ongoing role of religion in shaping adoption patterns, particularly among families with strong religious affiliations.

However, the role of religion in adoption is not without complexity. Helder et al. (2020) noted that while religious motivations were common, positive adoption outcomes were more closely linked to family dynamics rather than religious motivation itself. This finding aligns with the broader adoption literature, suggesting that while religious and altruistic motivations are often intertwined, successful outcomes rely on practical factors like family support and resources.

### **Parent-centred Motivations**

Parent-centred motivations for adoption are primarily driven by the prospective parents' desire to parent and the anticipated benefits of having children, as highlighted by Wallis (2006, in Brind 2008) and Costa and Tasker (2018). These motivations often stem from infertility, but they can



also include personal experiences with adoption, such as having been adopted themselves or knowing others who were adopted or have adopted children (Bausch, 2006; Tybjee, 2003). Infertility, in particular, stands out as a significant motivating factor in both the UK and the U.S, where an estimated 3.5 million people in the UK and 7.3 million women in the U.S experience infertility (Fertility Network, 2022; Chandra, 2005; Park & Hill, 2014). Park and Hill (2014) found that women with infertility issues were five times more likely to pursue adoption, underscoring the central role of infertility in driving adoption decisions. With many women and couples delaying childbirth and that shift increasing over time (Office for National Statistics, 2022), the rate of infertility is also likely to increase.

Several studies further corroborate the centrality of infertility in parent-centred motivations for adoption. Hanlon and Quade's (2022) survey found that 25% of adoptive parents cited infertility as a catalyst for adoption, with 37.3% from the private domestic adoption category. Young's (2012) research on intercountry adoption in Australia demonstrated that infertility was the primary reason for adoption among 24 out of 32 participants, particularly in couples. Similarly, Malm and Welti's (2010) study in the US found that 78.3% of adoptive parents cited infertility as motivation, although many also reported additional reasons, such as the desire to expand their family or provide a permanent home. Hanlon and Quade's (2022) survey was similar, although the primary reason was ultimately cited. The multiplicity of motivations highlights the complexity of adoption decisions, making it challenging to pinpoint a single primary reason for adoption in these cases, even when asked to specify amongst many interlinking motivations.

Despite the shared emphasis on infertility as a key motivation, there are notable limitations across the studies. Young's (2012) qualitative nature of the research, particularly the use of interviews, may have led to less candid disclosures of adoption motivations, indicating a potential limitation. Malm and Welti's (2010) study was limited in identifying primary motivations due to the allowance for multiple reasons in their survey. Furthermore, Costa and Tasker (2018)

highlight that infertility as a precursor to adoption is less prevalent among lesbian and gay individuals and same-gender couples compared to heterosexual and different-gender couples, adding another layer of complexity to understanding parent-centred motivations. These underscore the multifaceted nature of adoption motivations and the various factors that influence the decision to adopt.

### *LGBTQI+*

There appears to be a greater prevalence of child-centred motivations among LGBTQI+ individuals, though some overlap exists with other motivations. Jennings et al. (2014) found that same-sex couples are more likely to prefer adoption over other routes to parenthood, often citing a moral argument against conceiving when many children need homes. While some lesbian adopters, like heterosexual couples, turn to adoption after facing infertility (Jennings et al., 2014; Goldberg et al., 2009; Letherby, 1999). Hanlon and Quade's (2022) survey examined 6545 parents and determined that 361 (5.5%) were LGBTQI+. Nonetheless, there remains limited research on the motivations of the LGBTQI+ community.

### **Characteristics of the Adopted Child**

While significant research has explored adoption motivations, there is limited and inconclusive evidence on how these motivations influence preferred characteristics of adopted children, such as age, or health needs, amongst other considerations such as the child's history. Some studies have briefly addressed the child's age at adoption, but comprehensive insights are lacking. The Dave Thomas Foundation (2017) found that those motivated by infertility were less likely to adopt older children, a preference echoed in Brind's (2008) study of seventeen UK couples facing infertility. In contrast, Helder et al. (2020) identified a correlation between strong religious motivations and a preference for adopting older children.

Although research exists on how children's characteristics at placement, such as behavioural and developmental difficulties (Lansford et al., 2007) and health issues (Selwyn et al., 2014), affect adoption outcomes, these studies do not fully consider the influence of adoptive parents' motivations. Hanlon and Quade's (2022) U.S.-based adoption survey found that the majority of adopted children who had a diagnosis (such as ADHD or Attachment Disorder or received Mental Health Care) were adopted from foster care rather than private domestic adoptions or intercountry adoption. The survey does not draw conclusions, although further exploration demonstrates that in this category, parents are more likely to be over the age of 40 and are more likely to adopt older children. Studies show that parents motivated by altruism—especially those influenced by religious or humanitarian values—are more inclined to adopt children with additional needs (Glidden, 1985; Belanger et al., 2012). Such altruistic motivations can positively impact the adoption journey, as parents with a deep commitment to caring for vulnerable children may be better equipped to face the challenges of raising a child with complex needs. Glidden (1985) found that parents who adopted children with developmental disabilities were often driven by a desire to provide help, which supported their resilience in meeting the child's ongoing needs.

The significance of a child's age at adoption for placement success is well-documented, with Brodzinsky (1998) and others (Barth & Berry, 1988; Berry, 1992; Howe, 1998) noting that older age at placement increases the risk of adoption disruption. Fisher (2003) similarly highlighted the challenges of later-life adoptions.

The impact of adoptive parents' motivations on other child characteristics, such as gender or mental health, remains an understudied area. Understanding these connections is crucial for improving the matching process, refining recruitment strategies, and enhancing our understanding of adoption's effects on both parents and children.

## **Adoption Challenges and Outcomes**

As will be seen, studies on adoption outcomes have delved into various factors influencing parent and child satisfaction (Malm and Welti, 2010) as well as the stability of placements (Groothues et al., 2009; Steele, 2006; Fisher, 2003; Berry, 1996). The study by Groothues et al (2009) of adoptive parents of 165 Romanian children and 52 adopted children in the UK found that adoption satisfaction reached a high level once the child was aged 11. The key predictors of parental satisfaction in the study by Groothues et al (2009) included conduct problems, inattention, and four traits related to institutional deprivation: cognitive impairment, quasi-autistic patterns, inattention or overactivity, and disinhibited attachment. Berry's (1996) exploration of 1000 adoptive dyads saw that by the fourth year of adoption, most parents are satisfied with the adoption, with minor discrepancies between adoption types, such as agency or independent adoption.

While the specific impact of motivation on adoption outcomes has been less frequently addressed, there appears to be a notable focus on the effects of infertility. Brodzinsky (1998) has considered that the insufficient psychological resolution of infertility challenges can 'adversely affect the creation of a supportive post-adoption child-rearing environment' (Brodzinsky, 1998, p. 91). Wang et al. (2021) examine the long-term impact of infertility on child-rearing stress on parents who have adopted. Malm and Welti (2010), in considering adoptive parental satisfaction, noted the positive and statistically significant association between those adopting due to infertility and 'parents' reporting that having the child in their life is better than ever expected', and go on to conclude that this group of adoptive parents' seem 'more satisfied with the adoption than those who do not report infertility' (Malm & Walti, 2010, p. 205). Yet, there seems to be a gap in research specifically examining the link between the motivations of adoptive parents and the stability or success of the adoption placement itself.

### **This study**

Research into adoption motivation is important in relation to the recruitment of potential adopters (Costa & Tasker, 2018). Motivations for adoption may impact on the characteristics of the adopted child, and also may indirectly and directly relate to adoption outcome, impacting 'the success of adoptions' as well as 'parent and child wellbeing' (Malm & Welti, 2010, p. 185). It is important to consider how motivation relates to public policy, including laws concerning sexual orientation and adoption by same-sex couples, particularly following the implementation of the Adoption and Children Act 2002 (Costa & Tasker, 2018).

Whilst there have been some studies that specifically look to examine the relationship between adoption motivation and corresponding child characteristics (Helder et al., 2020), Brind (2008) helpfully notes that there has been no recent research in the UK that looks to establish a connection between 'infertility and altruism as motivation and willingness to adopt older children' (Brind, 2008, p. 320). Indeed, there are limited studies that explore this area of interest in the UK.

This research, utilising data from a UK-based audit, seeks to explore the connection between adoptive parents' demographic profiles (such as age and employment) and their motivations for adopting, focusing specifically on whether biological or moral motivations influence their inclination or preference or lack thereof, for adopting children with distinct emotional, social, and practical needs. Additionally, it will assess if there are any correlations between the parents' motivational profiles and the characteristics of the children they ultimately adopt, such as age and backgrounds marked by high risk or adversity. The second part of the study will explore the potential relationship between the adoptive parents' motivational profiles and social workers' confidence levels in the adoptive matches. Moreover, the study will examine the success of the adoption placements at two separate time intervals—six and fifteen years after the adoption

order (2011 & 2020)—to discern any impact of the adoptive parents' motivational profiles on the outcomes. The research aims to address the following key questions:

## **Research Questions (RQ)**

### **Part 1 - Adoption Preferences**

- 1: Is there a relationship between adoptive parents' motivational profile, and adoptive parents' demographic characteristics, such as age and employment status?
- 2: Is there a relationship between adoptive parents' motivational profile and their preference to adopt children with social, emotional, behavioural and health needs?
- 3: Is there a relationship between adoptive parents' motivational profile, and characteristics of the adopted child, such as age, emotional and behavioural difficulties, and pre-placement history?

### **Part 2 - Adoption Outcomes**

- 4: Is there a relationship between the Social Worker's Confidence Rating in the adoptive match and the adoptive parents' motivational profile?
- 5: Is there a relationship between the adoptive parents' motivational profile and the subsequent outcome of the adoption placement at both six and fifteen years later?

## Methods

### *Context*

This study is part of a larger project, *Identifying Risk and Resilience Factors in Adoptive Parents*, and uses secondary data from an audit within a permanence team for LAC and adoptive children in a UK local authority. The Principal Researcher, acting as Lead Clinical Psychologist, advised the permanence team on adoptive matches, securing funding to audit these matches over two years to identify risk and resilience factors in placements. The audit, conducted from 2003–2005, was later revisited with follow-ups in 2011 (T1) and 2020 (T2) to assess additional outcomes.

### *Design*

This quantitative, retrospective, longitudinal study spans 17 years with data from three time points: 2003–2005, 2011, and 2020. Data were collected from all adoptive matches within a two-year period in the specified Local Authority, with no inclusion or exclusion criteria. All matches with data on adoption motivation were included in the final sample.

### *Data Collection and Management*

Data were initially gathered in the 2003–2005 audit by the principal researcher and two assistant psychologists, using social worker panel minutes and E and F forms (now known as the Prospective Adopters Report [PAR] and Child Permanence Report [CPR]). The E form collects demographic details about the child and their biological family, emphasising adverse childhood experiences (ACEs) such as violence, abuse, or neglect, and biological parental history, like mental health issues. The F form compiles data on prospective adoptive parents' demographics, family history, and preferences, including openness to children with health issues or differing faith backgrounds. These forms vary in format from narrative prose to scaled items.

Follow-up data collections occurred in 2011 and 2020. An assistant psychologist reviewed each dyad's case file to assess placement status and outcomes, cross-validated by the principal researcher and another assistant psychologist. Outcomes were initially categorised into four groups and later recategorised to a three-point scale: 'success (no support),' 'success (with support),' and 'disruption/breakdown'.

For Social Worker Confidence Ratings, social workers provided retrospective ratings on a Likert scale about 12 months post-match to reflect confidence in the adoptive matches.

### *Variables*

The independent variable (IV) for motivation, 'predominant reason for adoption,' has two categories: 'moral' and 'cannot conceive (includes same-sex couples)'. The categories were developed by the principal researcher, with 'moral' indicating a professional, religious, or ethical commitment and 'cannot conceive' relating to pregnancy loss, infertility, or age, precluding biological children. Motivations were categorised from the narrative in application documents, confirmed by an assistant psychologist, and then cross-validated by the principal researcher.

From the original dataset of 185 variables, 25 dependent variables (DVs) were selected by the research collaborator and supervisor. The original data included pseudonymised demographics and family histories for adoptive children, biological parents, and potential adoptive parents. The 25 selected DVs relate to child and parent demographics, resilience and risk factors, and adoption outcomes, such as the child's age at removal and whether they experienced abuse. Variables were chosen based on relevance to the research question, impact on risk/resilience, and data quality.

### *Participants*

The original study sample included 116 adoptive matches, with 6 cases removed due to missing motivation data, leaving 110 adoptive parent sets. Among these, 5 (4.6%) were single parents,



101 applied as couples (91.8% heterosexual, 3.6% same-sex), and 80% were married. More than half of the primary carers were in their thirties (54.1%), a third in their forties (33.9%), with 7.3% in their twenties, and 4.6% in their fifties. Unfortunately, ethnicity data was not collected in the initial audit.

Of the 110 adopted children analysed, 56 (50.9%) were male and 54 (49.1%) were female, aged 0–11 years at adoption ( $M = 2.8$ ,  $SD = 2.9$ ), with 27.3% under 12 months, 29.1% aged 2–5 years, and 22.7% aged 6 years or older. Biological motivations accounted for 86 (78.2%) cases, with moral motivations in 24 (21.8%). The mean age of removal from birth parents was 1.4 years ( $\min = 0$ ,  $\max = 8$ ,  $SD = 2.2$ ), with an average of 2.8 placements ( $\min = 1$ ,  $\max = 11$ ,  $SD = 2.3$ ).

#### *Data Preparation and Statistical Procedures*

Statistical analyses were performed using SPSS (Version 28.0). Twenty-seven statistical tests were conducted with a significance threshold of  $p = 0.05$ , noting variable  $n$  values due to missing data that was not recorded. A  $p$  threshold of 0.05 was selected due to the exploratory nature of the study, and to be open to possible patterns whilst also remaining cautious in their interpretation.

Chi-square tests were used for categorical variables related to adoptive parent and child characteristics and parent preferences to explore relationships with adoption motivation (IV). For some variables with more categorical levels, the frequencies were smaller and often skewed, which led to cross-tabulations that violated the rule of expected cell sizes. Furthermore, the notably smaller size of the MMP subsample resulted in certain analyses needing to report alternative statistical tests to the chi-square. With 2X2 cross-tabulations, where the rule was violated if cell sizes were too small (expected frequency  $<5$ ), Fisher's exact tests were utilised. With tables larger than 2X2, following the initial chi-square test between the categorical

variables, the Monte Carlo simulation test was used as a more reliable test of significance to counter the small sample size by performing 100,000 simulations of the specific relationships being examined with a p-value determining the proportion of those simulations which demonstrated differences.

Mann-Whitney U tests were applied for continuous DVs due to data normality violations. Chi-square tests analysed social worker confidence ratings and matched outcomes concerning adoption motivation.

### *Ethics*

For this study, an anonymised dataset of adoptive parent-child dyads was shared with the researcher. Data collection was conducted anonymously, making it impossible to identify dyads, birth parents, or social workers involved. Anonymised data was shared with the research supervisor and collaborators via password-protected files (UCL private Teams site) and stored on the UCL Drive, accessible only by research students and the supervisor.

This study received ethics approval in line with the Governance Arrangements for Research Ethics Committees (GAfREC) from the UCL Research Ethics Committee (ID Reference: 19513.006).

## **Results**

This study examined characteristics associated with adoption motivation. Variables in Appendix II were analysed to explore the relationships between adoptive parents' motivational profiles (APM) and adoptive parent characteristics (RQ1), preference for children with specific needs (RQ2), and adopted children's characteristics (RQ3). The latter part focused on the relationship between adoption parent motivation and social workers' confidence ratings (RQ4) and placement outcomes (RQ5). To contextualise the sample, adoptive parent and child demographics are provided below.

### **Section I**

#### **RQ1: Characteristics of Adoptive Parents**

##### *Age of Adoptive Parents*

The sample included 86 participants motivated by biological reasons (BMP) and 24 motivated by moral reasons (MMP). Age details were unavailable, but 60% of BMP were in their 30s and 34.1% in their 40s and 50s. MMP tended to be older, with 54.2% in their 40s and 50s. Age was not significantly related to motivation ( $p = .063$ ).

##### *Orientation*

Table 1 highlights that 82 (95.3%) adoptive parents with BMP were in heterosexual partnerships, in contrast to 19 (79.2%) of MMP. Notably, over a fifth of MMP were single individuals, a scenario absent in the biological group. Table 1 demonstrates that there was a relationship between orientation of adoptive parents and their motivation ( $p < .001$ ).

### *Employment Status*

There were 82.6% of both BMP who were employed, compared to 45.8% of MMP, and 45.8% (MMP) of parents in employment. There was a relationship between the employment status of adoptive parents and their motivation to adopt ( $p < .001$ ).

### *Length of Relationship*

The findings indicate that 60% of BMP and 76.5% of MMP have maintained a relationship for more than 10 years. There was no positive correlation between the length of the relationship and the motivation to adopt ( $p .200$ ).

### *Birth Child and/or fostered/adopted children*

The last variable examined in this category was whether adoptive parents in this sample had prior experience with adoption or fostering ( $p < .002$ ). The findings show that 83.7% of BMP had no previous involvement in adoption or fostering, compared to 45.8% of MMP who had experience in either adopting or fostering children. Additionally, it was found that 77.9% of BMP did not have biological children of their own, while 62.5% of MMP did have their own children ( $p < .001$ ).

Table 1

**Characteristics & Demographics of Adoptive Parents**

Variable	Biological n=86 (%)	Moral n=24 (%)	Chi-Square Test ( $\chi^2$ )	Fisher's Exact Test (p-value)	Monte Carlo Test (p-value)
<b>Age of Parent</b>					
20s	5 (5.9)	3 (12.5)	$\chi^2(2) = 5.528, p = .063$		
30s	51 (60.0)	8 (33.3)			
40s + 50s	29 (34.1)	13 (54.2)			
<b>Sexual Orientation</b>					
Heterosexual Couple	82(95.3)	19(79.2)	$\chi^2(2) = 19.568, p = <.001$		$p = <.001^{**}$
Same-Sex Couple	4 (4.7)	0 (0)			
Single Individual	0 (0)	5 (20.8)			
<b>Employment</b>					
Neither	1 (1.2)	2 (8.3)	$\chi^2(2) = 14.144, p = <.001$		$p = <.001^{**}$
One Parent	14 (16.3)	11 (45.8)			
Both Parents	71(82.6)	11 (45.8)			
<b>R'ship Duration</b>					
<10 years	34 (40)	4 (23.5)	$\chi^2(1) = 1.644, p = .200$		
>10 Years	51 (60)	13(76.5)			
<b>Birth Children</b>					
No	67 (77.9)	9 (37.5)	$\chi^2(1)=14.346, p = <.001$	$p= <.001^*$	
Yes	19 (22.1)	15 (62.5)			
<b>Adopted/ Fostered Children</b>					
No	72 (83.7)	13 (54.2)	$\chi^2(1)=9.332, p = <.002$		
Yes	14 (16.3)	11 (45.8)			

Note. Fisher's Exact Test and Monte-Carlo Test used as expected frequency of cell is < 5.

## **RQ2: Motivational Profile and Preference to Adopt a Child with Particular Needs**

Multiple chi-square analyses were carried out to explore the link between adoptive parents' motivational profiles and their readiness to adopt children with particular needs. These needs and their corresponding variables were organised into distinct groups titled 'Child's Characteristics', 'Emotional, Social and Health Difficulties', 'Pre-placement History', and 'Contact Needs' (Appendix II). The findings from each of these categories will be discussed sequentially.

### **I: Child's Characteristics**

#### *Culture and Gender*

Table 2 reveals a significant relationship between adoptive parents' motivation and their inclination to adopt children from a background/culture different from their own. The data shows that MMP were more open (81.8%) to this idea compared to BMP (39.0%). Additionally, a notable and statistically significant association was found between motivation and gender preference, with 91.9% of BMP exhibiting no particular gender preference in contrast to only 45.8% of MMP having no gender preference. When MMP indicated a gender preference, it was mostly for girls, with 41.7% of MMP stating a preference for adopting a female child compared to 12.5% for a male child. The Monte Carlo simulation yielded a p-value of 0.000, providing strong evidence of the relationship between the two categories.

Table 2

**Child Characteristics and Motivation**

Variable	Biological n=86 (%)	Moral n=24 (%)	Chi-Square Test ( $\chi^2$ )	Fisher's Exact Test (p-value)	Monte Carlo Test (p-value)
<b>Different Culture/ background</b>					
No	50 (61.0)*	2(18.2)**	$\chi^2(1) = .7.205, p = <.007$	$p = .010^{***}$	
Yes	32 (39.0)	9 (81.8)			
<b>Gender Preference</b>					
Male	3 (3.5)	3 (12.5)	$\chi^2(2) = .27.852, p = <.001^{**}$		$p = .000^{***}$
Female	4 (4.7)	10 (41.7)			
Either	79 (91.9)	11 (45.8)			

Note: n = 82, \*\* n = 11 due to missing data. \*\*\*Fisher's Exact Test, & \*\*\*\*Monte Carlo Test used as expected frequency of cell is < 5.

**II: Emotional, Social and Health Difficulties**

The findings in Table 3 show no statistically significant difference between the two groups regarding the willingness to adopt a child with relationship issues. Nonetheless, it was observed that 55.6% of MMP were open to it, compared to a smaller proportion of BMP at 27.2%. When it came to adopting a child with health issues, there was no significant variance in preferences among adoptive parents; 96.4% of BMP and 90% of MMP were not in favour of adopting a child with health concerns.

Table 3

**Emotional, Social and Health Difficulties**

Variable	Biological n=84 (%)	Moral n=10 (%)	Chi-Square Test ( $\chi^2$ )	Fisher's Exact Test (p-value)
<b>R'ship problems, child</b>				
No	59 (72.8)*	4 (44.4)**	$\chi^2(1) = 3.110, p = .078$	$p = .121$
Yes	22 (27.2)	5 (55.6)		
<b>Health Concerns</b>				
No	81 (96.4)	9(90.0)	$\chi^2(2)=.906, p = .341$	$p = .367$
Yes	3 (3.6)	1 (10.0)		

Note: \* n = 81, \*\* n = 9 due to missing data. Fisher's Exact Test as expected frequency of cell is < 5.

### III: Pre-Placement History

There was a significant relationship found between the motivational profiles of adoptive parents and their willingness to adopt a child from birth parents who faced major issues, with 77.8% of MMP being receptive compared to only 37.5% of BMP ( $p = .031$ ). Conversely, no significant difference was observed in the preferences of adoptive parents regarding the adoption of maltreated children, - 79.8% for BMP and 88.9% for MMP ( $p = .510$ ).

Table 4

#### *Pre-Placement History*

Variable	Biological n=84 (%)	Moral n=9 (%)	Chi-Square Test ( $\chi^2$ )	Fisher's Exact Test ( $p$ -value)
<b>Major problems, Parents*</b>				
No	50 (62.5)*	2 (22.2)	$\chi^2(1)=5.403, p = .020$	$p = .031$
Yes	30 (37.5)	7 (77.8)		
<b>Maltreated Child</b>				
No	17 (20.2)	1 (11.1)	$\chi^2(1)=.434 p = .510$	$p = .1.000$
Yes	67 (79.8)	8 (88.9)		

Note: \*  $n = 80$  due to missing data. Fisher's Exact Test used as expected frequency of cell is  $< 5$ .

### IV: Contact Needs

The final two variables in this section pertain to maintaining contact with the child's biological family. A significant relationship exists between the willingness for contact with birth parents and the adoptive parents' motivational profile, with 70% of MMP being amenable to such contact, as opposed to only 26.2% of BMP. Similarly, a notable relationship was found regarding the willingness to keep in touch with the child's biological siblings, with all MMP participants (100%) being open to it, compared to 63.1% of BMP participants, as indicated by Table 5.



Table 5

***Child's Contact Needs***

Variable	Biological n=84 (%)	Moral n=10(%)	Ch-Square Test ( $\chi^2$ )	Fisher's Exact Test ( <i>p</i> -value)
<b>Contact w Birth Parents</b>				
No	62 (73.8)*	3 (30.0)	$\chi^2(1)=8.040, p = .005$	$p = .009^{**}$
Yes	22 (26.2)	7 (70.0)		
<b>Contact w Siblings</b>				
No	31 (36.9)	0 (0)	$\chi^2(1)=5.506, p = .019$	$p = .028^{**}$
Yes	53 (63.1)	10 (100)		

Note: \*  $n = 82$  due to missing data. Fisher's Exact Test used, expected freq. of cell < 5.

**RQ3: Motivational Profile and Characteristics of their Adopted Child**

Multiple chi-square tests were conducted, along with Mann-Whitney U tests when required, to determine if there was a connection between the adoptive parents' motivational profile and specific traits of the adopted child. These characteristics, covering 11 variables, were categorised into three groups: 'emotional and behavioural difficulties'; 'social, learning, and health difficulties'; and 'pre-placement history'. The details of each group and its associated variables will be discussed after presenting the ages of the adopted children in the sample.

**I: Demographics*****Age of Adopted Children***

Table 6 shows that 41.8% of MMP chose to adopt children older than 6, in contrast to 17.5% of BMP. Conversely, over half of BMP (53.5%) adopted children younger than 2, whereas only 29.2% of MMP made the same choice. Table 6 highlights a significant relationship between the age of the adopted child and the parents' adoptive profile ( $p = .028$ ).

**Table 6**  
**Age of Adopted Child**

Variable	Biological n=86 (%)	Moral n=24 (%)	Chi-Square Test ( $\chi^2$ )
<b>Age of Child</b>			
<24m	46 (53.5)	7 (29.2)	$\chi^2(2)=7.149, p=.028$
2-5	25 (29.1)	7 (29.2)	
>6	15 (17.4)	10 (41.7)	

## **II: Emotional and Behavioural Difficulties**

All three variables within this category showed statistical significance, revealing that MMP were more likely than BMP to adopt children facing significant emotional and behavioural challenges. As Table 7 indicates, 20.8% of MMP adopted children who had experienced prior placement disruptions due to behavioural issues, in contrast to only 4.7% of BMP (Chi-square test:  $p = .011$ ; Fisher's Exact Test:  $p = .023$ ). Furthermore, 45.8% of MMP adopted children with behavioural difficulties compared to 12.8% of BMP (Chi-square test:  $p < .001$ ; Fisher's Exact Test:  $p < .001$ ). Finally, 37.5% of MMP adopted children with emotional and mental health concerns, substantially more than the 11.6% of BMP (Chi-square test:  $p = .003$ ; Fisher's Exact Test:  $p = .006$ ).

Table 7

***Emotional and Behavioural Difficulties***

Variable	Biological n=86 (%)	Moral n=24 (%)	Chi-Square Test ( $\chi^2$ )	Fisher's Exact Test (p-value)
<b>Prior placement breakdown</b>				
Yes	4 (4.7)	5 (20.8)	$\chi^2(1)=6.541, p = .011$	$p = .023$
No	82 (95.3)	19 (79.2)		
<b>Behaviour Problems</b>				
Yes	11 (12.8)	11 (45.8)	$\chi^2(1)=12.804, p = <.001$	$p = <.001$
No	75 (87.2)	13 (54.2)		
<b>Emotional problems</b>				
Yes	10 (11.6)	9 (37.5)	$\chi^2(1)= 8.790, p = .003$	$p = .006$
No	76 (88.4)	15 (62.5)		

*Note:* Fisher's Exact Test used, expected freq. of cell < 5.

**III: Social, Learning and Health Difficulties**

Table 8 shows that 14% of BMP and 25% of MMP adopted a child with developmental delays, and 86% and 75%, respectively, did not adopt a child with delays. The results demonstrate only 20.9% of BMP and 16.7% of MMP adopted a child with health concerns, as opposed to 79.1% and 83.3,% respectively, who did not.

Here, 88.4% of BMP and 70.8% of MMP reported adopting a child with appropriate social skills, indicating that 11.6 % of BMP and 29.2 % of MMP adopted a child with social communication difficulties ( $p = <.053$ ).

**Table 8**

***Social, Learning and Health Difficulties***

Variable	Biological n=86 (%)	Moral n=24 (%)	Chi-Square Test ( $\chi^2$ )	Fisher's Exact Test ( <i>p</i> -value)
<b>Developmental Delay</b>				
Yes	12 (14.0)	6 (25.0)	$\chi^2(1)=1.673, p = .196$	$p = .218^*$
No	74 (86.0)	18 (75.0)		
<b>Social Communicatio n Problems</b>				
No	76 (88.4)	17 (70.8) 7 (29.2)	$\chi^2(1)= 4.417, p = .036$	$p = .053$
Yes	10 (11.6)			
<b>Health Concerns</b>				
Yes	18 (20.9)	4 (16.7) 20 (83.3)	$\chi^2(1)= .213, p = .644$	$p = .778^*$
No	68 (79.1)			

**IV: Pre-Placement History**

Within the pre-placement history variables, a Mann-Whitney U test was conducted for two of the three variables, as indicated in Table 9a. The results for the variable 'Placements since Birth' (BMP:  $M = 2.89$ , MMP:  $M = 3.75$ ) indicate no statistically significant relationship with adoption motivation. The average age at removal analysis revealed that 70.9% of children who were removed from their biological families between the ages of 0-1 years were adopted by BMP, compared to 41.7% by MMP, a difference that was statistically significant ( $U = 774.0, p = .045$ ). Additionally, 18.6% of BMP adopted a child who had been harmed by their parents, in contrast to 33.3% of MMP ( $p = .158$ )

**Table 9*****Pre-Placement History***

<b>Variable</b>	<b>Biological n=85 (%) <i>M</i> (SD)</b>	<b>Moral n=24 (%) <i>M</i> (SD)</b>	<b>Mann W U</b>
<b>Placements since birth</b>	2.89 (2.12)	3.75 (2.99)	U = 891.50, <i>p</i> = .297
<b>Age at Removal (Mean) (Range)</b>	1.41 (2.17) [0-8]	2.21(2.28) [0-8]	U = 774.0, <i>p</i> = .045

## Section II: Adoption Outcomes

The study's final section investigates the connection between adoptive parents' motivation, social workers' confidence ratings, and the overall success of the adoption itself. The evaluation of the adoption outcomes were carried out at two distinct times, first in 2011 (T1) and then again in 2020 (T2).

### RQ4: Motivational Profile and Social Worker's Confidence Rating

Table 10 reveals a statistically significant association between the adoptive parents' motivation and the confidence rating assigned by their social workers 12 months after placement. Specifically, 71.4% of placements involving BMP received a high confidence rating, in contrast to 47.6% of placements with MMP. The Monte Carlo simulation yielded a p-value ( $<0.001$ ), providing strong evidence of this relationship.

**Table 10**

#### *Social Worker Confidence Ratings*

Variable	Biological n=84 (%)	Moral n=21(%)	Chi-Square Test ( $\chi^2$ )	Monte Carlo Test (p-value)
<b>SW Confidence Initial Rating</b>				
High	60 (71.4)	10 (47.6)	$\chi^2(3) = .23.487, p = <.001$	$p = <.001$
Average	20 (23.8)	3 (14.3)		
Low	4 (4.8)	8 (38.1)		

### RQ5: Motivational Profile and Outcome

Table 11 indicates that there is no significant relationship between the success of an adoption six years after placement (2011) and the motivational profile of adoptive parents. There were 63.5% of BMP and 83.3% of MMP adoptive parents who had a 'successful with no support' outcome. In 2011, there were breakdowns in placements for 9.4 % of BMP and 8.3% for MMP. Likewise, Table 11 also shows that there was no statistically significant relationship between the adoptive parents' motivational profile and the adoption outcome 15 years after the adoption, in 2020, with the Monte Carlo simulation providing a p-value of .219. There were 71.8% of BMP and 83.3% of MMP with 'successful with no support' outcomes and a similar percentage of breakdowns, with 16.5% of BMP and 16.7 % of MMP.

**Table 11**

#### ***Adoption Outcome***

Variable	Biological n=86 (%)	Moral n=24(%)	Chi-Square Test ( $\chi^2$ )	Monte Carlo Test ( $p$ -value)
<b>Outcome 2011</b>				
Successful NS	54 (63.5)	20 (83.3)	$\chi^2(2)= 3.966, p = .138$	
Successful WS	23 (27.1)	2 (8.3)		
Breakdown	8 (9.4)	2 (8.3)		
<b>Outcome 2020</b>				
Successful NS	61 (71.8)	20 (83.3)	$\chi^2(2)= 3.161, p = .206$	$p = .219$
Successful WS	10 (11.8)	0 (0)		
Breakdown	14 (16.5)	4 (16.7)		

## **Discussion**

The discussion focuses on the characteristics associated with adoption motivation as identified in this research. The analysis considered the relationship between the motivational profiles of adoptive parents and various factors, including their own characteristics, the child's attributes, and their preferences for adopting children with specific needs and profiles. Additionally, the discussion addresses how adoption motivation intersects with social workers' confidence ratings in the adoption match, as well as the outcomes of the adoption placements.

### **RQ1: Motivational Profile, Adoptive Parent Demographics and Characteristics**

The findings suggest a significant link between adoptive parent motivation and all five examined variables regarding adoptive parent characteristics, except the age of the adopted parent. The majority of the sample consisted of biologically motivated parents (BMP) (78.2%), who are predominantly heterosexual couples in their 30s. The drive towards adoption is strongly influenced by infertility status, as evidenced by research from Jennings et al. (2014), Cudmore (2005), and Malm & Welti (2010). Specifically, Hollingsworth (2000) found that infertile women are five times more likely to pursue adoption than those who do not undergo infertility treatments. These demographic details align with findings from previous UK-based studies. For example, Brind's (2008) research observed that the majority of adoptive parents in her study were heterosexual couples experiencing infertility challenges, a trend that continues to characterise adoptive motivations in the UK. Furthermore, recent data from the Adoption Barometer (2023) reaffirmed this trend, indicating that infertility remains the primary motivation for adoption, representing 54% of adoptions in its latest survey. This consistency underscores the particular demographic characteristics influencing adoption practices in the UK, highlighting how policy and practice variations distinctly shape adoption motivations compared to other regions.



Additionally, the findings reveal that both BMP and MMP are inclined to adopt after being in relationships for more than 10 years. This trend could be attributed to earlier research suggesting a delay in childbearing among many women; for instance, the Office for National Statistics (2022) reports that half of the women born in 1990 had not had children by the time they reached 30. Raleigh (2012) discusses this postponement in starting a family, followed by challenges with infertility, which ultimately guide women toward adoption as an alternative path to parenthood.

Interestingly, almost half of MMP were in their 40s, and two-thirds of the sample already had birth children (Table 1), perhaps delaying the pursuit of adoption until their children were older or had space in their homes later in life, as Rhodes et al., research had found (Rhodes et al., 2006). Goodman's (1999) study similarly found that 43% of those adopting children from an Indian orphanage had adopted children prior, and 47% had birth children too. In this study, MMP were also more likely to have birth children and/or have fostered than BMP before. Nonetheless, it was still more common for both categories to have not adopted or fostered before, and this was their first experience.

Merely 3.6% of the entire sample consisted of same-sex couples, a figure significantly lower than the 16% of same-sex couples adopting in the U.K. in 2022, as reported by Coram (2022), and 25% in 2023, according to the Adoption Barometer (2023). The reason for this disparity might be attributed to the timing of the data collection for this study, which occurred between 2003 and 2005, shortly after the Adoption and Children Act of 2002 came into effect. This legislation had only just permitted same-sex couples to adopt children in the U.K., which could explain the reduced presence of same-sex couples in this particular study.

## **RQ2: Motivational Profile and Preference to Adopt a Child with Particular Needs**

In the category of child characteristics, both variables assessed proved to be significant, showing that MMP participants were more open to adopting a child from a culture or background different from their own. This finding aligns with research by Raleigh (2012) and Goldberg et al., (2009), which indicated that many parents pursuing adoption for biological reasons often prefer a child of the same race to 'reduce differences within the adoptive family' (p. 450). The outcomes of this study echo these observations.

Regarding the preference for the child's gender, both BMP and MMP showed openness to adopting children of any gender. However, it was notable that almost half of the MMP expressed a preference for adopting a female child. While Zhang and Lee (2011) did not find explicit gender preferences in their study, unlike the present study's results, they highlighted that single women in earlier research showed a tendency towards adopting girls, although the reasons behind this preference were not fully understood. Female preference has been reported by Welsh et al. (2008), who also suggested that this could be attributed to parents' expectations that girls might present fewer challenges than boys. It is worth noting that MMP have a tendency toward older children, and if there's also a tendency toward females, perhaps there is an expectation that adolescent boys may pose greater challenges than females, although the researcher is not aware of any studies that examine this further.

The research further explored if MMP and BMP varied in their preferences for adopting children with identified emotional, social, and health issues. There were no statistically significant variances found, although there was a pattern that indicated MMP exhibited a marginally higher inclination towards adopting children facing relationship or attachment challenges. Research by Burge et al., (2016) could shed light on these results, suggesting that prospective adoptive

parents might be more inclined to parent children who have experienced maltreatment over those with more 'concrete and enduring' health problems.

There was no observed relationship between MMP and BMP concerning adopting a child whose parents had experienced 'major problems.' Similarly, there was no significant difference in willingness to adopt an abused child, as both MMP (88.9%) and BMP (79.9%) indicated they would adopt a child who had been maltreated. This finding is somewhat contradictory, as 62.5% of BMP were not open to adopting a child whose biological parents had experienced 'major problems.' No existing studies known to the researcher corroborate this finding, leading to speculation that BMP's stance may be influenced by the recognition that many children in the sample had likely experienced abuse, raising expectations about the presence of ACEs and the challenges associated with intergenerational and transgenerational trauma. Adoptive parents' hesitations around children whose birth parents experienced 'major problems' may stem from unconscious anxieties. In psychoanalytic terms, these concerns may reflect disavowed projections—elements of failure, dysfunction, or trauma that the adoptive parent fears or rejects within themselves (Britton, 1989). This projection may be more pronounced in BMPs, where unresolved grief over infertility might unconsciously locate negative internal states in the child's family history, creating resistance to difference and complexity. Transference dynamics may further complicate the parent-child relationship, especially when the child's difficulties mirror the parent's unresolved psychic difficulties..

The complexity of these dynamics—where adoptive parents are open to adopting children with maltreatment histories but hesitant about the implications of their parents' issues—may reflect a nuanced awareness of the multifaceted effects of trauma across generations, impacting both parenting expectations and the perceived adoptive experience.

The research also delved into the motivational profiles and the 'contact needs' according to the adoptive order, finding both aspects statistically significant. With 26.2% of BMP reporting they would want their adopted child to have contact with their birth parents, compared to 70% of MMP. With regards to being amenable to contact with siblings, 100% of MMP said they would be open to this, and BMP took a slightly different stance to birth parents, with 63.1% being open to this.

The trend suggests BMP might prefer to integrate the adoptive child as 'their own' in a biological sense, hence desiring less contact with the child's birth family to avoid potential complications (Young, 2012). Sorek (2020) explored the relationship between adoptive parents' motivations and open adoptive experiences. The study found that 'self-orientated' adoptive parents (i.e. adopting for parent-centred reasons, such as infertility) saw contact with the birth family as 'a threat', and a 'barrier to the child's developing a sense of belonging to [their] new family', and therefore seek to limit open adoption (Sorek, 2020, p. 7). There could be a risk in this trend in that these adoptive parents may, to a certain extent, 'deny' the differences or adoption itself as it happened so early, 'as if' they are the birth parents as highlighted in Brind's (2008) study, that found all the social workers interviewed thought that most adopters wanted a child as young as possible for the baby 'to be their own' (p.324). Bowlby (1983) considers that such denial may represent a 'defense against mourning' as adoptive parents may unconsciously avoid confronting the loss of a fantasized biological child or the anxieties stirred by incorporating a child with a different origin, for example.

Of the total 24 MMP in this study, only 9-10 MMP responded to the variables explored in this subsection. Consequently, these findings are not representative of the larger population, making it challenging to draw broad conclusions based on these specific factors. However, the results

still hold significance for the sampled group, indicating, even within a smaller subset, that MMP are more open and likely to adopt a child with contact needs.

### **RQ3: Motivational Profile and Characteristics of the Adopted Child**

Five of the ten variables examined concerning emotional, behavioural, social, learning, and health difficulties showed statistically significant results. The results demonstrate that the sample had few children with the specific difficulties in question. With 48.2% of the sample population under 2 years old, many of the challenges, such as developmental delay or social communication problems) are more common and likely to be diagnosed in older children.

#### *Emotional and Behavioural Difficulties*

After investigating the link between the emotional and behavioural issues of adopted children and the motivational profiles of their adoptive parents, the study found a significant relationship across the three variables analysed (prior placement breakdown, behaviour problems, and emotional problems). It was found that MMP were more inclined than BMP to adopt children experiencing these difficulties. Helder's (2020) study on the religious motivations behind adoption revealed that religious families tend to adopt children facing significant challenges. This suggests that MMP, similar to religiously motivated adopters, focus their adoption motivations on the well-being of the child, aiming to support and assist the child. Consequently, it appears that MMPs are more open to adopting children who have emotional and behavioural issues.

Regarding the likelihood of adopting children with Social, Learning, and Health difficulties based on adoptive motivation, the study found no significant statistical relationship. Welsh et al. (2008), among others such as (Zhang, 2011; Rhodes, 2006; Helder, 2020; Burge et al., 2016), observed

that most prospective adoptive parents prefer adopting healthy children and lower their expectations when health issues are present.

The study's findings on the link between adoptive parents' motivational profiles and the pre-placement experiences of the children indicate MMP are more inclined than BMP to adopt children who have suffered abuse from their parents. Nonetheless, the data suggests that the majority of the children in this sample had not experienced parental abuse. Helder's (2020) study on the role of religiosity in adoption motivation revealed that adopters with child-centred motives anticipate challenges but rely on faith in order to meet these challenges. Similarly, MMPs, with their child-focused reasons for adopting (although religiosity may be a part of this but it is unclear), may likely anticipate potential difficulties and adopt with a prepared mindset to face these challenges.

Additionally, in relation to the age of the child, the data shows that MMP tend to adopt older children, while BMP are more likely to adopt infants. This observation is consistent with previous studies (Brind, 2008; Welsh et al., 2008; Malm & Welte, 2010; Zhang & Lee, 2011), which noted that many couples, particularly first-time adopters without biological children, prefer to adopt newborns. Welsh et al. (2008) discovered that adoptive parents' positive expectations were significantly associated with the age of the adopted child, with younger children eliciting more optimistic expectations.

## **Section II**

### **Adoption Outcome**

#### **RQ 4: Motivational Profile and Social Workers' Confidence Rating**

This part of the research examined the link between Social Workers' Confidence Rating and the motivational profiles of adoptive parents, finding a significant statistical relationship between the two. The results showed that social workers involved in the initial adoption pairings expressed greater confidence in matches made with BMP. This outcome diverges from Howell-Moroney's (2014) study, which found that social workers rated those with moral motivations (to foster, not necessarily to adopt) with a higher confidence level. Brodzinsky (1998) highlighted that the child's age at placement is a critical factor for the stability and success of the placement, stating, 'the older the child at the time of placement, the greater the risk that the placement will disrupt' (p. 46). Given that MMP in this study are more inclined to adopt older children, it could explain why social workers demonstrate higher confidence in outcomes for BMP, who tend to adopt much younger children closer to infancy. In the same study, some social workers thought that adoptive parents opting to adopt older children were not making a 'positive choice'. Furthermore, in this study, MMP were more likely to adopt children with emotional, behavioural, social and health difficulties, which may also influence the view of the social workers' perspective in having a higher confidence rating for BMP dyads, in which the children may, at least outwardly, present with fewer difficulties. The views of social workers are likely highly influential to potential adopters and warrant further exploration.

#### **RQ5: Motivational Profile and Outcome of the Adoption Placement.**

The research also investigated the connection between adoptive parents' motivational profiles and the success of the adoption placements. The analysis revealed no statistically significant correlation at either evaluated time-point (2011; 2020). It is noteworthy that both groups had

successful outcomes - overall, in 2011, 90.6% of BMP had a successful outcome, with 91.6 % of MMP. Although, the results showed that MMP experienced slightly better outcomes than those with BMP at both intervals - 83.3% of MMP achieved a 'successful with no support' outcome in both 2011 and 2020, compared to 63.5% and 71.8% for BMP, respectively.

Prior research indicates that a younger age is the most significant predictor of a successful outcome (Singer et al., 1985, 1998; Fischer, 2003; Brind, 2008; Welsh, 2008; Berry, 1992). Singer et al., (1985) note that a younger child at placement (i.e. < six months old) can support a greater chance of secure attachments for adopted children, with fewer disrupted attachments thus far. Conversely, older children may struggle to adapt to an adopted family and will have a greater awareness of the loss of their birth family (Brodinsky, 1998). Given that BMP in this study are adopting much younger children than MMP, one might have expected BMP to have had more successful outcomes than MMP.

Howell-Moroney (2014), in a study focusing on the motivations behind fostering linked to religiosity rather than adoption, proposed that foster parents driven by moral reasons might show a stronger dedication to a foster placement owing to the inherent value and satisfaction it brings. Moreover, the study highlighted that individuals motivated by child-centred reasons could be more equipped to manage unavoidable challenges since their motivation is centred on the child's needs, not their personal situations.

The variation in adoptive parent expectations could serve as a key to deciphering these findings. Berry (1992) found that the alignment of parental expectations with reality significantly influences the success of a placement; overly high expectations or perceptions can create undue pressure on the child, leading to negative outcomes. From a psychoanalytic perspective, unprocessed loss may lead to idealisation or projective dynamics, in which aspects of the



parent's unresolved grief are unconsciously located in the child, distorting perception and relational attunement (Klein, 1946; Bion, 1962; Winnicott, 1965).

Welsh et al. (2008) observed that parents adopting older children were prepared for more challenges, though the effects of this anticipation were not fully examined. It's reasonable to suggest that MMP, who often adopt older children, might have a more grounded understanding of potential difficulties, equipping them better to cope with adversity. Furthermore, parents of older children might base their expectations on information gathered during the adoption process, unlike infant adopters, who might anticipate fewer issues and who might be at a higher risk of being taken aback by challenges as the child grows.

An additional factor that could influence the success of adoption placements is the difficulty BMP encounters when shifting from the desire to parent biological children to considering adoption. Research by Goldberg et al. (2009) indicates that infertility can pose a significant, stressful, and often negative ordeal for both heterosexual couples and lesbians, severely affecting their relationship. Studies have delved into the effects of infertility, highlighting narratives of 'distress' and predominantly negative experiences for those who subsequently choose adoption, alongside the inherent challenges of this transition (Wang et al., 2021; Foli et al., 2017; South et al., 2019; Daly, 1988; Holditch-Davis et al., 1998; Wallach & Mahlstedt, 1985; Hendry & Netherwood, 2010). Brodzinsky (1998) considers that unresolved infertility issues can adversely affect the nurturing environment post-adoption. He notes that the manner in which parents handle the stress of infertility and whether the decision to adopt is made jointly are crucial factors that influence how well BMP adjusts to adoption (Brodzinsky, 1998). This resonates with Winnicott's (1965) view that the parent's own internal world must be sufficiently stable to provide a 'facilitating environment'—a nurturing psychic and relational space in which the child's feelings and anxieties can be safely held, mirrored, and gradually integrated to allow

them to act as a facilitating environment—a psychic space where the child’s development can unfold. Unprocessed grief or ambivalence can intrude upon this space, making it harder for the parent to meet the child’s emotional needs.

Indeed, numerous elements can affect the success of an adoption. Within the scope of this particular study, no statistical significance was found between motivational profiles and adoption outcomes.

## **Concluding Thoughts**

### *Strengths and Limitations*

This study’s strengths and weaknesses are considered in light of its aims, methodology, and findings. By examining over 100 adoptive pairings, this study offers valuable insights into how adoptive parents’ motivations influence various aspects, including parental preferences, child characteristics, and adoption outcomes. The data collection was mostly systematic and standardised, supporting reliability, replicability, and objectivity, and it highlighted significant trends in adoption motivations, a topic with limited prior research.

Some data, however, were subjective, such as the Confidence Ratings and Outcome variable, which rely on professional judgment and thus may impact data validity despite cross-checking by the Principal Researcher. Additionally, these variables depend on case notes, where recording completeness and accuracy are uncertain.

The binary categorisation of motivations into moral and biological does not account for mixed motivations or variations within the moral category, such as religious motives or proximity to adoption. Since motivations were categorised by assistant psychologists based on written application data rather than self-reported by parents, future studies could benefit from more nuanced distinctions to improve understanding of adoption motivations.

A limitation relates to the overall size of the MMP sample within the full dataset, which was considerably smaller and resulted in lower values within some of the cells when exploring relationships between motivation status and chosen variables. When expected values were small and violated the use of chi-square, alternative methods were used, such as Fisher's exact test and Monte Carlo Test.

The absence of ethnicity data and the underrepresentation of same-sex couples (3.6%) further limit the study's generalizability. Recent data indicate that 16% of adoptions involve same-sex couples (Coram, 2022). Yet, this study's sample, from 2003–2005, likely missed LGBTQ+ adoptive parents, necessitating further research with more recent data to address this gap.

Another limitation is that the outcomes of adoptive matches were analysed without controlling for additional variables, which reduces validity. Constraints related to sample size prevented multivariate analysis, as it would violate assumptions necessary for logistic regression. Furthermore, the study's decision to keep the  $p$ -value threshold at  $<0.05$  without applying Bonferroni corrections aimed to avoid overly conservative adjustments in this exploratory context. The volume of tests (26) may lead to statistical errors, so findings should be viewed cautiously. Future studies could consider larger samples with fewer variables and explore adoptive dyads' qualitative experiences.

#### *Future Research and Policy Implications*

This study reveals critical aspects of adoption relevant to LAC, adoptive parents, and policymakers. A relationship between adoption motivation (APM) and child demographics, adoptive parents' preferences, and traits were found. These insights could assist social workers and agencies in recruiting and matching children with families. Future research could further explore the adoption of children with additional health needs, particularly since these children may face more significant placement challenges.

The study observed that MMP showed a preference for adopting girls, a finding with little current research, which further research could help understand this finding and support the adoption of all children.

While no significant relationship was found between motivation and outcome, BMP required more support than MMP (27.1% BMP vs. 8.3% MMP). These findings may inform policymakers, social workers, and adoption agencies about the support needs of each group, indicating where additional pre- and post-adoption assistance may be beneficial. Increased pre-adoptive and post-adoption support, including psychological services, could help address the needs of adoptive parents. Some local authorities fund adoption support groups to aid families post-transition, which could serve as a model for wider support for LAC.

### *Clinical Implications*

This study's findings provide a framework for Child and Adolescent Psychotherapists (CAP) working with adoptive families and children previously in care. Recognising adoptive parents' motivations (APM) is crucial in understanding their expectations and needs and their effects on the parent-child relationship. Despite successful outcomes for most placements, the breakdown rate was 9.1% in 2011 and 16.5% in 2020. CAP is valuable for supporting LAC transitions, placement stability, and addressing potential breakdowns. Understanding the motivations behind adoption can help CAP practitioners support both the child and adoptive family in navigating these challenges.

Additionally, findings suggest BMP may benefit from psychological support in managing the transition from seeking biological children to adoption, as previous studies highlight the complex grief and adjustments this process entails. Therapeutic support for both adoptive parents and children, including CAP, could be instrumental for adoptive parents facing these challenges.

### *Final Thoughts*

This study aimed to explore how adoptive parents' motivations influence adoption dynamics. The results highlight a clear relationship between APM and adoptive parents' demographics, preferences, and the characteristics of adopted children. These findings underscore the role of motivation in adoption, offering insights for policy, practice, and further research. Despite limitations, this study establishes a foundation for future research, especially regarding LGBTQ+ motivations and preferences in child gender and health.

## **Appendix I - Adoption Forms**

An overview of the **Child Permanence Form (CPF)** can be viewed here:

<https://proceduresonline.com/trixcms2/media/11833/cpr-guidance-and-appendix-tools.pdf>

The **Prospective Adoptive Report (PAR)** can be accessed here:

<https://corambaaf.org.uk/sites/default/files/Form%20PAR.pdf>

## Appendix II - Variables for Part 1

### *Characteristics of Adoptive Parents*

<b>Characteristics &amp; Demographics of Adoptive Parents</b>
Sexual Orientation
Employment
Relationship
Birth Children Prior
Adopted / Fostered Children Prior

### *Adoptive Parent Preferences*

<b>Child Characteristics</b>
Different Culture/Background
Gender Preferences
<b>Emotional, Social and Health Difficulties</b>
Relationship Problems (Child)
Health Concerns
<b>Pre-Placement History</b>
Major Problems (Parents)
Maltreated Child
<b>Contact Needs</b>
Contact with Birth Parents
Contact with Siblings

### ***Characteristics of the Adopted Child***

<b>Emotional and Behavioural Difficulties</b>
Prior Placement Breakdown
Behaviour Problems
<b>Social, Learning and Health Difficulties</b>
Developmental Delay
Social Communication Problems
Health Concerns
<b>Pre-Placement History</b>
Placements since Birth
Age at Removal
Age
Harmed by Parents

### **Appendix III - Variables for Part 2**

<b>Part 2- Outcomes</b>
Social Worker's Confidence Rating
Outcome 2011
Outcome 2020



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