



**PSYCHOLOGICAL SERVICES RENDERED TO ADOPTING FAMILIES AFTER
POST- ADOPTION PLACEMENT: EXPERIENCES FROM BETHANY CHRISTIAN
SERVICE, ADDIS ABABA**

BY

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Abstract

This study attempted to investigate the psychosocial services provided to adoptive families and children after adoption placement by Bethany Christian Services Addis Ababa. It specifically attempted to identify the reasons for adoption, psychosocial difficulties that adoptive parents encountered, their coping mechanisms, and the formal and informal services that were provided to assist these parents. The study employed a qualitative research methodology. Twenty-five participants were purposefully chosen for the interview. The adoption document including training modules, assessment tools with different age ranges, observation and reporting tools and standardized implementation guideline and the required criteria for adoption are reviewed. Besides, the researcher observed orientation sessions in which families and social workers discuss about the reason of adoption and the details of the process in which families are supposed to go. Thematic analysis of the interview data was conducted with results showing that after placement, adoptive parents encounter various social and psychological difficulties. Adoptive parents encountered lack of knowledge regarding adoption and the psychological difficulties that come with it. They also encountered lack of acceptance from others by the time they disclose their adoption plan. As a result of drawn-out procedures, they also experienced unexpected results. The stigma and prejudice that adoptive parents most encountered from the community were a result of the adoption. Post-placement support for adopting families can be greatly aided by psychological services. Through the services offered, families can navigate the difficulties of adoption and deal with psychological challenges they can face because of the adoption.

CHAPTER ONE: INTRODUCTION

1.1. Background of the Study

Adoption can relate to a social service, a legal procedure, or an individual act (Cole & Donely, 1990). Adoption is a private act that involves three parties known as the adoption triad: the adoptee, the birth family, and the adoptive family. It is currently understood to be a continuous process rather than a singular act (Brodzinsky et al., 1998; Smith & Howard, 1999; Silin, 1996; Rosenberg, 1992). Adoption is a legal procedure that creates a legal relationship between a parent and child between individuals who are not related by birth (Child Welfare League of America, 1978). Through actions like locating and legally releasing children for adoption, choosing and preparing adoptive families, readying, and placing children in adoptive homes, and offering post-placement services and after adoption, adoption as a social service addresses the needs of members of the adoptive triad (Cole, 1985).

Scholars and professionals in a wide range of disciplines, including social work, psychiatry, anthropology, and law, have become interested in adoption due to its lengthy and rich history as well as its incredibly varied and occasionally contentious modern practice (Brodzinsky, Smith & Brodzinsky, 1998). One could argue that meeting members' mental health needs is hampered by psychologists' training and practice not giving adoption issues enough consideration.

It may be argued that meeting the mental health needs of members of the adoption triad is hampered by psychologists' neglect of adoption issues in training and practice (Sass & Henderson, 2000), and that understanding of adaptation specific to adoption is hampered by psychology's relative lack of involvement in adoption research (Brodzinsky et al.1998).

Adoption is process that unites families and children through a shared experience of joy, hope, love, and security. Adoptive families, like any other family undergoing a transition, may, nevertheless, encounter difficulties as a result of internal changes. Developmental disorders in children can present difficulties for adoptive families. Adopted children may have trouble establishing the stable foundation necessary to create healthy relationships and a sense of security during play, learning, and discovery if their attachment process was disturbed in their early years. Children with disturbed attachment processes may display fears, delayed development, or younger-child traits.

The originator of attachment theory, Bowlby (1973), argued that early experiences with primary caregivers help children develop an internal working model. Youngsters who have their needs met on a regular basis feel competent and worthy, and they are seen as belonging to a secure connection. Among the things that lead to insecure attachment are inconsistent, uncaring, or abusive nurturing. According to Roufe (2000), children who have insecure attachments may display controlling, avoidant, or aggressive behaviors, become easily frustrated, lack coping mechanisms in stressful situations, and/or struggle to later form meaningful attachments with others. Adopted children might also be affected socially and emotionally by their adoption. In addition, they might be curious about their biological siblings, the circumstances surrounding their adoption, or the fate of their biological parents.

Adopted children might have experienced trauma in the past, which could have an impact on their development and health. Parental abuse, neglect, drug addiction, mental illness, and being cut off from loved ones are examples of traumatic events. It's possible that children who have gone through one or more traumatic events have developed coping mechanisms that have helped them survive, but these coping mechanisms now pose problems for them in their new homes.

Adverse pre-adoption experiences raise the possibility of psychosocial maladjustment following adoption, especially when externalizing issues are present (Brooks & Barth, 2010). Parental stress and the quality of the parent-child bond determine how bad pre-adoption experiences affect the adoptee's mental health, psychological distress, externalizing issues, and even academic performance (Harwood, et al. 2013). It can be challenging to raise a child who has experienced trauma, and there may be unintended consequences that traumatize both the parents and the child. For individuals and couples considering adoption, the adoption process itself can be a source of stress and challenging emotions. Numerous consequential and transformative choices are made. Within a few weeks of the adoption being finalized, some parents may experience post-adoption depression after the adoption process is completed and families are reunited with their children (Brodzinsky & Huffman, 1989).

Some people and couples might find it difficult to acclimate to their new roles as parents and wonder if they will be able to raise their new child. Concerns or queries concerning the biological parents or lineage of their child are also common among parents. Parents might worry about whether their child will comprehend the adoption procedure and the distinction between their biological and adoptive parents. Concerns about their child wanting to get in touch with their birth family can also arise from parents, particularly if the child has experienced abuse or neglect at the hands of the birth family.

Examining the psychological services, difficulties, coping strategies, and reasons of adoption of adopting parents in Bethany Christian Services was the goal of this study. In order to provide the foundation for appropriate interventions, this study attempted to investigate the psychological difficulties, relevant services, and coping mechanisms faced by adopting parents.

1.2. Statement of the Problem

The decision to adopt, the adoption process, and the post-adoption period present a variety of challenges for adoptive parents. Rushton (2012) lists the following difficulties faced by adoptive parents: emotional and behavioral disorders, attachment problems, cognitive difficulties, history of sexual abuse, problems related to personal and racial identity, shifts in the family dynamic, and reunions with biological parents. Foster children are characterized by severe emotional and behavioral issues, low academic performance, cognitive issues, rocking, self-harm, peculiar sensory interests, and eating disorders. Maladaptive behaviors, including episodes of anger and unprovoked acting out (often diagnosed as attachment disorder) may be severe and can be detrimental to a child's integration into a new family.

Family-based care, or FBC, ensures children's healthy physical, psychological, and social development while preserving their survival. In-country FBC is a relatively new development in Ethiopia's child welfare system.

Bethany Global has been at the forefront of introducing these care options in Ethiopia with extensive involvement of the local government, faith-based community and childcare institutions since 2009. Bethany's involvement has centered around deinstitutionalizing (DI) the care of children - moving children from institutions to FBC. Family-based care offers a proven solution to protect vulnerable children. While orphanages may provide for a child's basic needs, they're not intended to protect and care for children long-term. Only a family best supports a child's physical, psychological, emotional, and spiritual needs. There are traditional system of caring adopted children like gudiffecha, yadera leje and other related ones; however, FBC is for those children who didn't get the chance to grow in a family setting like the ones mentioned above but happened to grow in institutional care where providing the basic need is the only service

available and difficult for the children to have a full picture of a family and the roles and interactions that they would have entertain.

While working in organizations that facilitate adoption, the researcher was able to testify disruption of adoption process and when it gets worst there were some terminated adoptions. Besides, the number of psychological challenge reports after post placement is getting higher and frustration of adopting families to continue in the adoption process become significantly growing. Therefore, the research was interested to identify the major challenges that the families are facing starting from identifying their reasons for adoption for there were times that families came for adoption with ill intentions.

This study aimed at examining the post placement services provided by Bethany Christian Service as a way of enhancing bonding and attachment between the foster/adoptive families and their children. It has tried to identify the major psychological contributions and challenges the families and children are facing and how these challenges affect the families' general relationship; and be able to identify the proper responses to the challenges faced by both the families and children.

1.3. Objective of the study

1.3.1 General Objectives

The general objective of the study is to explore the psychological challenges and gaps of psychological services rendered to adopting families by Bethany Christian Service.

1.3.2. Specific objectives

1. To explore why do adopting parents opt to adopt: Reasons for Adoption
2. To understand the psychological challenges of adoptive families after placement

3. To understand the contribution of the psychological services in the placement process.
4. To examine the strategies that are needed to be put in place to overcome the psychological challenges.

1.4. Significance of the study

The study on psychological services for adopting families after post placement is significant for several reasons. Firstly, adoption can be a challenging and stressful experience for both parents and children, and psychological services can help alleviate some of the difficulties associated with the transition. Secondly, post-placement psychological services can support parents and children in coping with the changes that come with adoption, including changes in family dynamics, relationships, and roles. This support can help reduce stress and promote healthy adjustment and wellbeing. Thirdly, adoption is a complex process that involves legal, social, and emotional issues. Psychological services can help parents and children navigate these complexities and address any emotional challenges they may encounter. Fourthly, providing psychological services to adopting families can help prevent adoption disruptions and improve the chances of successful adoption outcomes. Finally, the study can also help identify gaps in current psychological services for adopting families and provide recommendations for improving these services to better meet the needs of families and promote positive outcomes for both parents and children.

1.5. The scope of the study

The study focused on researching the different types of psychological services like counseling, referral, therapeutic services, social group support, psychoeducation child development and related ones are available to adopting families after post placement. The study also focused on

the reasons of adoption in which why families opt to go for adoption. The research also examined the effectiveness of psychological services in supporting adopting families and its contribution as the families try developing new attachment with the adopted children. Additionally, the study has tried to explore the psychological challenges that the adopting families face after post placement. Finally, the research tried to consider the potential strategies that families have applied while trying to overcome the challenges they faced during the postplacement.

CHAPTER TWO: LITERATURE REVIEW

2.1. Historical Background of Adoption

Adoption has roots dating all the way back to ancient Rome. When the patriarch of the family was about to pass away without a male heir, adoption was a legal option under Codex Justinianus, a sixth-century AD Roman code. Many-son families frequently "adopted" their sons to other aristocratic families in an effort to establish a desired family bond. A family's wealth would be dispersed too widely if they had an excessive number of sons. If there are insufficient sons, the wealth could return to the state. The Roman nobles made sure that wealth would remain in a select few well-to-do families and that the sons of those families would all inherit well by adopting each other's sons. Daughters were rarely adopted because paternal lineage accounted for inheritance of wealth and power (Jennifer S., 2019).

Simultaneously, the custom of "oblation" emerged, whereby infants were abandoned at a convent or monastery and subsequently "adopted" by that particular religious community. The child would receive care from the convent or monastery and grow up to serve that order. As the number of abandoned children increased, the church started to control the practice, which resulted in the establishment of the first orphanages in Europe. Orphanages swiftly grew outside of the church and into the public and private spheres. Before long, there were too many kids in these facilities and no means of providing for them. This gave rise to the concept of "indentured servitude" or "foster-servitude," which was designed to place kids from overcrowded orphanages with families so they could acquire a skill or trade that would help them in life. Children under foster care were moved from institutional care into apprenticeships, which were typically just used as a cheap labor source.

Under the pretense of adoption, this kind of indentured servitude persisted until the middle of the 19th century, when society started to consider the importance of the group in an individual's life. The notion that the welfare of orphaned children should be taken into account arose from this new ideological context. It was argued that adoption ought to be more than a means of establishing an heir or a bond of servitude. The goal of adoption should be to advance the child's best interests under the most favorable conditions. Shortly after World War II, the history of international adoption got underway. Germany provided orphaned children to families in Greece, Japan, and even the U.S, which means "proxy adoptions,". In order to complete the adoption in the child's home country, citizens would send a proxy agent to court. Throughout the 1950s, this proxy adoption process persisted. More "war orphans" were created as a result of the Korean and Vietnam Wars, and in 1955 Harry and Bertha Holt persuaded Congress to adopt these waiting kids. The Holts went on to create Holt International Children's Services, the first adoption agency operating internationally, which is still in operation today.

Agencies started designating children in foster care homes as "waiting" in the 1960s. Because of their age, race, sibling group membership, or a documented disability, these waiting children were classified as special needs. Adoption of children with special needs is becoming more common as a result of increased awareness of how to support these children. For waiting families, special needs adoption has become—and continues to be—a quicker path to adoption.

In Ethiopia, domestic adoption is a relatively new organized and legal option for childrearing. The Ethiopia Civil Code of 1961, Ethiopia's first comprehensive legal document, did not mention adoption. Both the 1995 adoption of the Ethiopian Constitution and the 2000 adoption of the Revised Family Code offered the main legal framework for facilitating domestic and international adoption services. To further streamline child welfare services, guidelines were

developed. One such guideline is the Alternative Child Care Guideline of 2009 (Ministry of Women Affairs (MOWA), 2009), which outlined the operational procedures that must be adhered to during the implementation or provision of services (MOWA, 2009).

Gudifecha, which means "adopting a child into a family through customary arrangements that allow the child to become a full member of the new family and enjoy equal rights to biological children," has very strong social and cultural roots in Ethiopia (Duressa, 2002). Adopted by other local languages, gudifecha is an Afaan Oromo word (the largest language group in Ethiopia, making up one-third of the nation according to the 2007 Census (FDRE, 2007)) that encompasses all the main ideas of the traditional definition of adoption as stated in international conventions. The Oromo people are believed to have incorporated gudifecha into their cultural practices as a result of their migration to different regions of modern-day Ethiopia.

2.2. Adoption as an Alternative Childcare Program

Today, several governmental and non-governmental organizations are increasingly opting to implement integrated childcare programs with a variety of alternative care components. This can be seen as a good practice to expand the opportunities made available for the different needs of target groups, resulting in a wider scope for inclusion. The provision of services must take into account and aim to meet the multiple needs of vulnerable children and the multiple disadvantages that these children suffer. Diversification and integration of services, while increasingly adopted, are still in their infancy and need further development.

In Ethiopia, the growing adoption services are viewed as a substitute for traditional child care. An unaccompanied child can benefit from alternative and permanent family care through adoption, which is a child care and protection measure. By placing them in a suitable and

substitute family setting, adoption serves the goal of giving orphans and impoverished children the proper care and upbringing. Ethiopia has a long history of adoption; the Oromo and Amhara ethnic groups, for instance, have traditionally called it Madego or Gudiffecha. Desalegne (2006) states that the term "Guddifachaa" refers to the custom of adopting a son or daughter from another family and raising him or her as a member of the family, complete with all of the rights, obligations, and privileges that come with that position. This process is based on the Gada, which creates laws governing adopters. Additionally, he emphasized that Guddifachaa is a community-based approach that requires strict customary and contemporary legal support, along with fewer resources.

The Alternative Childcare Guideline of Ethiopia was first written in 2001 and then revised in 2009 and prioritizes in-country community-based child-care programs including foster care and adoption over institutional care. Despite the Guideline principles, Inter Country Adoption (ICA) and institutional care dominated the care for OVC in Ethiopia for over a decade. The growth in ICA resulted in the growth of institutional care where children were cared for until they transitioned to adoption. The ICA ban in 2017 was imposed despite in-country family-based care (FBC) options being limited both in size and geographic distribution. For children in institutions, the ban means that their opportunities for FBC are limited. However, the causes for institutionalization remain, hence the need for the development of comprehensive FBC options.

2.3. Domestic Adoption as Alternative Family-based Care

In Ethiopia, the local adoption trend in the country is increasing while the number of international adoptions has continued to decrease as of 2012. For example, according to the US Department of State, for 2013 adoptions from Ethiopia fell significantly from 1,568 in 2012 to

993 in 2013. On the contrary, formal domestic adoption is gaining momentum in the country, although it is still in its infancy stage.

In-country FBC is a new phenomenon in the child welfare landscape of Ethiopia. Following the adaptation of the alternative care guideline in 2009, the government of Ethiopia has encouraged active work in community-based care options such as kinship care and reunification which helped prevent unnecessary separation of children from their parents or reunified them in the unfortunate event of separation. However, lack of care options such as foster care and domestic adoption meant that children without proper parental care and in childcare institutions were devoid of the love and care of family.

Every kind of alternative care program, including foster care, adoption, institutional care, and the like, is probably going to have advantages and disadvantages. It should be acknowledged that offering an alternative care program could provide certain kids the chance to grow in unexpected ways. Conversely, for some, the very services meant to look after them might not provide enough attention to their growth and well-being and, in some cases, even result in a grave violation of their rights. Organizations should therefore carefully consider all of the options and choices available before deciding which ones will be best for the child.

2.4. Challenges of Adoptive Parents and Children

For many years, post-adoption services were generally viewed as services provided after the adoption had been legally finalized and, in some cases, only for short periods of time. However, adoptive families and adoption professionals recognize that a full spectrum of support is necessary to ensure the well-being, long-term stability and real durability for adopted children and their families.

Adoption affects people who have been adopted and their families in many ways throughout their lives. Several issues such as loss and identity development affect all adoptive families, while other experiences may depend on the child's and family's background and the nature of the adoption. The following are some of the issues that adoptive families typically identify needs for and seek support and services for.

Loss and Grief: All children and adolescents who are adopted, even those adopted as infants, experience some degree of separation and loss from their families of origin. They may grieve as they realize the role adoption has played in their lives. They may also struggle with feelings of abandonment as they try to understand why they were put up for adoption and how that affects who they are and the person they hope to become. These feelings can appear and reappear at different stages of life, even if their adoption and family life is a positive experience. Adopted children and young people may need support to process conflicting feelings, grieve their losses, and understand their experiences in a developmentally appropriate way. Adoptive parents may experience loss and grief issues of their own, which may relate to infertility or grief that the reality of adoption and parenting does not live up to expectations. For some adoptive parents, these issues can create strains in their marriage or partnership. For others, it can lead to depression.

Trust and Attachment: Every child or young person who has been separated from their biological parents has experienced a broken bond. Adoption requires the development of new bonds. Children who have experienced abuse, neglect, foster care, or institutionalization may have difficulty trusting and bonding with their new family. These children and young people may need help building healthy relationships. They may also need help understanding that they can form new relationships without having to end their existing relationships and attachments.

Developing new relationships doesn't mean replacing other important people and relationships in your life.

Identity formation: The process of identity development can be more complex for adopted children and young people, regardless of when they were adopted. This process can be further complicated if the child's race or birth culture differs from that of the adoptive family. Teenagers in particular can experience identity confusion as they confront the main questions of adolescence and how they are similar or different to their adoptive and birth parents. Teenagers may struggle with questions like "Who am I?", "How am I different from my parents?" or "Which of their values will I adopt?"

Connections to the birth family: At some point in their lives, many people who have been adopted want information about their birth family or want to reconnect with birth relatives. Social networks and apps (e.g. Facebook, Telegram) connect people in new, more immediate ways. While these tools can help expedite the search for birth relatives, this faster pace of contact can sometimes be emotionally overwhelming for participants if they are not prepared. Think about how you can set safe and appropriate social media limits for you, your child, and other family members to minimize the potential privacy and security risks.

For Ethiopian adoptees, the collectivist community and possible time spent with biological family members prior to placement/adoption in the orphanage may mean that they develop fewer attachment-related problems after adoption. Although adoptees may have a more positive pre-adoption experience, they are still likely to have experienced dietary neglect, abandonment, and/or institutionalization (Miller et al. 2008). These early childhood experiences put them at risk for a range of negative developmental and well-being effects in social, physical, and cognitive domains (Murphy et al., 2009). In cases of child abuse, neglect, and/or

institutionalization, adoptees may internalize views of the world as dangerous, and this may also lead adoptees to view themselves as unwanted or unloved (Vasquez & Stensland, 2016). If these thought patterns continue, behavior patterns geared toward self-preservation and survival can emerge, disrupting attachment formation and developmental progress (Vasquez & Stensland, 2016).

However, like adoptees, adoptive parents may face their own struggles, and in some cases these struggles may consequently lead to negative effects on parent-child bonding (Baden et al., 2013). Examples of issues adoptive parents may encounter include: experiencing pre-adoption infertility and the grief associated with it (Foli et al., 2010); Pressures and expectations to form secure attachments with adopted children (Bergsund, Drozd, Hansen & Jacobsen, 2018); caring for an adopted child with developmental or mental health problems (Paulsen & Merighi, 2009); etc. Studies with adoptive families have emphasized higher life satisfaction for parents and child when adequate pre- and post-adoption support is available (Drozd et al., 2018). Research suggests that these support services should aim to foster parenting skills, improve communication skills, build on secure attachment styles, and provide psychological support when needed (Algood et al., 2011; Dozier & Rutter, 2008). Depending on the availability and quality of these support services, the relationship between the adoptee and adoptive parents can either thrive or deteriorate (Verbovaya, 2016).

2.5 Types of Support Services

The wide range of issues that can be addressed with adoption support and preservation services means that the services themselves must be diverse. Below are the most common types of adoption support and preservation services, including those that families often find most helpful.

Preventive services - such as education and information - help families to understand the situation of their child and their family and to learn the most effective parenting strategies.

Supportive services—such as information and referrals, support groups, respite care, and advocacy—help normalize their view of their situation, relieve ongoing stress, strengthen their coping skills, and help them obtain needed resources for their families.

Therapeutic Services - A minority of adoptive families require clinical interventions to address specific difficulties, including specialized assessment services, crisis intervention, a variety of therapeutic interventions, and for some residential treatment services that involve the adoptive family in treatment efforts.

As mentioned above, members of adoptive families may need professional support if any concerns or issues arise. Needs vary from family to family and may include: Guidance on the children's attachment, trust, emotional or behavioral issues, helping them to cope with the impact of adoption on the family and strains in marriage or partnership and other relationships, helping them cope of feelings in the reality of an adoption does not match expectations, healing from traumatic experiences of abuse and neglect and ongoing support that addresses parent-child conflicts.

Counseling and therapy services can help a child or young person to deal with a variety of challenges. The services can also help understand child's behavior, particularly in relation to early trauma, and identify strategies to meet your child's needs and enable healing. Timely intervention by a qualified professional can often prevent concerns from becoming more serious issues. Type and duration of therapy vary. Some families only need the help of a therapist for a short time; others build a relationship over years and access help when needed. There are many

different types of treatment approaches and professionals' therapeutic services. It is especially important to work with a therapist who is familiar with the unique issues and dynamics of adoption (often referred to as an adoption expert) and to involve the parents in the process.

2.6. Theoretical Framework

When choosing to begin the adoption process, prospective adoptive parent(s) will be influenced by a multitude of motivating factors. As potential adopters learn more about the specifics of adoption and the children who need to be adopted, these factors are influenced in a very slow and unique way. It will take time and resources to investigate this process. The reality of placing a specific child or children and the potential effects this may have on the adopter's experiences and expectations will also need to be considered after approval. Different theories have discussed issues related with adoption and various related concepts after post placement.

2.6.1. Psychanalytic perspective

The idea that during childhood, escape from the total authority and love of one's parents was necessary for the individual to emerge was one of the foundational ideas of Freud's developmental theory. He contended that children inevitably invoked fantasies—played out in play and daydreams—and imagined that their “real” parents were much better, kinder, and more exalted than the flawed people who were raising them in order to achieve this liberation. These reassuring but wholly made-up fairy tales were dubbed the "family romance" by Freud. The made-up origin stories that kids told themselves were significant because they established a clear connection between adoption and Freudian theory. The "family romance" that Freud assumed almost all children had and that they sometimes remembered was an adoption story. The reason this scenario was beneficial for development was that it remained speculative. It encouraged kids

to form independent identities that are essential to growing up to be healthy adults while providing a safe space for them to express conflicting feelings and resentment toward their parents. However, what worked for the majority of kids led to clear issues for the kids who were adopted. Adoptees who dreamed of having a different set of parents weren't telling harmless lies. They were dealing with the truth. "It is either impossible or unconvincing to correct the illegitimate child's background by reality due to a genuine element of mystery,"

As the loss of birth parents was an all too common aspect of adoption, unsolved and occasionally unanswerable questions were hinted at in the family romances of adopted children. These agonizing questions—who were my birth parents, why did they give me away, and was there something wrong with me—were closely linked to the unhealthy relationships and self-perceptions that some adoptees displayed and that clinicians became aware of. It should come as no surprise that professionals and parents who embraced the Freudian family romance supported adoption policies and procedures, like matching, that attempted to obliterate natal kinship and hide the painfully real but emotionally inescapable reality that one set of parents had been lost and replaced with another. The ritual of telling children about their adoptions acknowledged that adoptees were different from their peers who were not adopted, even during the height of enthusiasm about confidentiality and sealed records. The family romances that adopted people dreamed about were potentially very depressing and upsetting; they were more like nightmares than daydreams. Adoptees were particularly vulnerable to a variety of psychopathologies because they felt that their identity was fragmented and incomplete, and they knew that they had really been given away. According to Freud's developmental theory, adoptees had emotional difficulties that were intrinsic to the adoption process, which foreshadowed and contributed to the emergence of more recent worries about attachment and loss.

2.6.2. Ecological Theory Perspective

Since a developing person is influenced by a wide range of circumstances outside of their immediate environment, Bronfenbrenner created a theory that takes into account all possible environments for a child and highlights the significance of the interactions between them all (Bristor, 2010). Since these relationships and exchanges cause both the individual and their surroundings to change and alter, the interaction between environments is just as significant as the environments themselves. According to Bronfenbrenner's ecological theory, a child's family is the most significant environmental influence because family members provide direct care, education, and support for the child in addition to acting as a link between the child and other environments like the community or school (Bristor, 2010). Families are defined as individuals who are connected to one another by blood, marriage, or adoption, though they can also take many other shapes and have different definitions (Cobb, 2014). Compared to children who live with their biological parents, adopted children are exposed to a variety of environments before, during, and even after adoption over their lifetime. As a result, adopted children develop in ways that are significantly different from those of non-adopted children in terms of their mental, behavioral, and social growth (Ward, 2011).

Because there are so many different environments and factors that go into adoption, it seems appropriate to use Bronfenbrenner's ecological theory to look at the relationships and effects that occur between environments and between levels. A child undergoing the adoption process is exposed to a variety of environments; the culmination of these experiences shapes and influences the child's overall development. In addition to emphasizing the significance of their relationships with the child and each other in influencing the individual's advancement, Bronfenbrenner's

ecological theory organizes and characterizes these environments and their influence on the individual (Hong et al).

2.6.3. Evolutionary theory

Adoption's universal motivations and advantages can be explained in part by evolutionary theories of adoption. In the days of ancestral humans, and even today in some societies, adopting a child for financial support was a common reason for adoption. Examples given by Silk (1987), Hrdy (2011), Daly and Wilson (1988), and Volk (2011) include offering adoptive parents inexpensive labor, free care for their elderly parents, and/or future financial support. Hamilton along with others. Evolutionary theorists suggest that since ancestral humans are thought to have lived in small communities in which they frequently cared for children within the community, the urge to care for (even genetically unrelated) children may be a derivative of such ancestral behavior. A 2007 study suggests that another benefit for adoptive parents may be filling the emotional void of parenting when adults are unable to have their own children. According to Hamilton 1964, adopting kin may increase an adoptive parent's evolutionary fitness, which would be a third advantage. According to Volk (2011), the majority of adoptions in Western societies entail the adoption of genetic relatives when the adopted child's biological parents are no longer able to care for them or have passed away. Furthermore, biological parents usually favor adopting kin for their children, believing that genetic relatives will likely be able to care for the child more effectively than non-relatives.

While these advantages may not always be deliberate factors in adoption, they offer an underlying evolutionary explanation for the widespread and even successful adoption of this behavior throughout history and cultures.

2.6.4. Attachment theory

Among theories that discuss about adoption, the researcher found that attachment theory is more related to this specific study and spent more time discussing on it.

The term attachment is an acronym for a complex set of interconnected patterns of behavior and thought directed toward a protective parent figure. Attachment behavior is guided by a biologically based behavioral system designed to provide protection and safety (Bowlby 1969/1982). Attachment organizes human motivational, emotional, cognitive, and memory processes. The attachment relationship begins in infancy and influences development, behavior in other relationships, risk-taking, and mental health throughout the lifespan (Bowlby 1969/1982, 1973, 1980; Cassidy & Shaver, 2008). Attachment differs from other social relationships in the following constellation of behaviors and processes: (1) seeking closeness; (2) distress when separation is incomprehensible; (3) happiness at reunion; (4) grief/sadness at loss; (5) safe baseline behavior - ability to explore when a caregiver is present (Ainsworth 1989); (6) trust that the attachment figure is persistent in the relationship; and (7) capacity for mutual enjoyment or vicarious joy (Bowlby 1969/1982; George & Solomon 2008; Kobak et al. 2004). Children develop preferential attachment relationships with their parents and a finite number of other caring adults (such as foster parents and daycares); the quality of these relationships contributes to an integrated self, trust in self and others, and developmental resilience (George & West 2012; Lyons-Ruth & Jacobitz; Sroufe et al. 2005).

Attachment behavior is adaptive. Chosen as a protective strategy by human evolution, it increases children's chances of survival. Bonding is controlled by a neurologically based system; It has specific biological substrates that affect physiological homeostasis (Bowlby 1973; Cassidy & Shaver 2008). This system, formally referred to as the attachment behavior system, is

activated by stress or threat, which creates a desire for physical or psychological contact or closeness to attachment figures (Bowlby 1969/1982, 1973). Internal cues (illness, fatigue, hunger, pain) and external cues (frightening and stressful events) activate attachment behavior. Some activating events are universal to humans and shared by nonhuman primates (peripheral movement; darkness); others are learned or taught by parents (Bowlby 1973). Understanding the evolutionary basis of attachment is particularly useful when thinking about young children and their parents. In many human-biologically programmed situations (being left alone, separation), attachment behavior signals distress and the need for attention and security. This programming is so fundamental that young children, and sometimes even adults, have little control over the heartache or fear they experience. Attachment behavior in early childhood is a form of communication, not a dependency problem (Bowlby 1973). Attachment needs are based on real feelings caused by real experiences; therefore, a perspective that sees attachment behavior as irrational or infantile does not make sense (Bowlby 1973). The feelings of closeness and love in attachment relationships are linked to neural and biochemical substrates. These feelings regulate the child's response to parental closeness, reassurance, and protection, and parental attunement to the child's protective goals (Bowlby 1969/1982; George & Solomon 2008; Cassidy & Shaver 2008). These feelings also promote intimacy and shared pleasure, which are essential for deepening attachment relationships (Bowlby 1969/1982). Relationships that lack mutual pleasure and in which the parents do not share the child's attachment goals and do not respond to the child's true attachment needs foster chronic and intense negative affect. As a result, negative feelings—anger, sadness, depression, anxiety, and fear—impair emotional regulation, exploration, cognitive competence, and ultimately mental health (Bowlby 1973, 1980; Lyons-Ruth & Jacobvitz 2008; see Cassidy & Shaver 2008).

The birth of attachment theory conceptualized the psychological need for attachment in relation to the body's need for food in a 1951 study by John Bowlby (Bowlby, 1979). Researches present the idea that just as the body needs food and water for sustenance, our psyche needs attachments in order to thrive socially (Duniec & Raz, 2011). Bowlby recognized the importance of the relationship between children and their caregivers as the primary and most critical interpersonal relationship that develops throughout the child's lifespan (Bowlby, 1979). This led him to study and observe these types of relationships and how attachment affects both components of the dyad. Bowlby reported that attachment is a modeled behavior that a child learns through observation (Woolgar & Scott, 2014). Bowlby explained that attachment is not developed by the child, nor is attachment development the responsibility of the child (Woolgar & Scott, 2014). Bowlby argued that attachment is primarily demonstrated and developed by the caregiver and is therefore more the responsibility of the child's caregiver (Woolgar & Scott, 2014). Attachment is needed in emotional situations, and by the end of the first year of life the child discovers its own internal working model of caregiver availability within four attachment styles: autonomous (secure), dismissive or anxious, preoccupied and unresolved, also known as avoidant (Jacobsen, Ivarsson, Wentzel, 2014).

Secure attachment is the product of interactive exchange through sensitivity and cooperation on the part of the adult. Since the quality of the mother's attachment influences the degree of secure attachment for the child, researchers examined whether or not a person can become secure despite their broken past experiences and found a time window for this to be true (Verissimo, 2006). Secure baseline attachment demonstrates continuity of support throughout parenting, as this is an early indicator of later externalization and internalization of behavioral problems by the teenage child (Beijersbergen, Juffer, Bakermans-Kranenburg & Van IJzendoorn, 2012). Maternal

sensitivity and support through observation of experiences faced by the child and parent, for this reason attachment styles are difficult to study. In longitudinal research, attachment is a continuous development that best results from how the parents deal with a situation affecting their child. By keeping the parents available when the time comes when the child needs their support, the bond can be strengthened and safely maintained.

In developing a new relationship, a preoccupied attachment style is evidenced by a caregiver who becomes angry, confused, and aggressive about their past experiences (Steele, Hodges, Kaniuk, Hillman, & Henderson, 2003). This reaction is a product of feeling insignificant and therefore lacking in trust. This type of attachment does not overcome the parents' difficulties and they are generally anxious and unwilling to have closer relationships with others (Steele et al., 2003). Authors report that parents who engage in a busy attachment style struggle with acceptance in their relationship with their foster or adopted child (Steele et al., 2003). Although they care about the well-being of others in their lives, the challenge these parents face relates to the negative attachment in their own past relationships, which are predictors of the expression of concern (Steele et al., 2003). These parents can also be very emotional as their reactions are based on the satisfaction of others.

Unlike the other attachment styles, rejecting or rejecting-avoidance can be classified as a disorder called dissociative identity disorder (Krakauer, 2014). In the article *A Model of Dissociation Based on Attachment Theory and Research*, Krakauer asserts that individuals with rejecting, avoidant attachments often struggle with childhood abandonment, brokenness, and helplessness, and thus show that negative evaluations also reflect attachment emotions and expectations in which needing help will be very annoying (cited in Loitti, 2006). This trauma to the caregiver can trigger stress and cause the person to avoid situations that relive the trauma,

and their closeness is likely to become problematic (Foroughe & Mirisse, 2014). The caregiver will also exhibit three symptoms of dismissive behavior. First, they can downplay their emotions through sarcasm, rejection, and unspeakable communication. Second, during playtime with the child, the parents become tired, anxious, or sleepy. Third, parents will use intellectualization to acknowledge feelings but will not make sense of the emotions they are feeling (Foroughe & Mirisse, 2014). By failing to acknowledge past experiences, the avoidance responses do not allow parents to show acceptance of the child when support is needed.

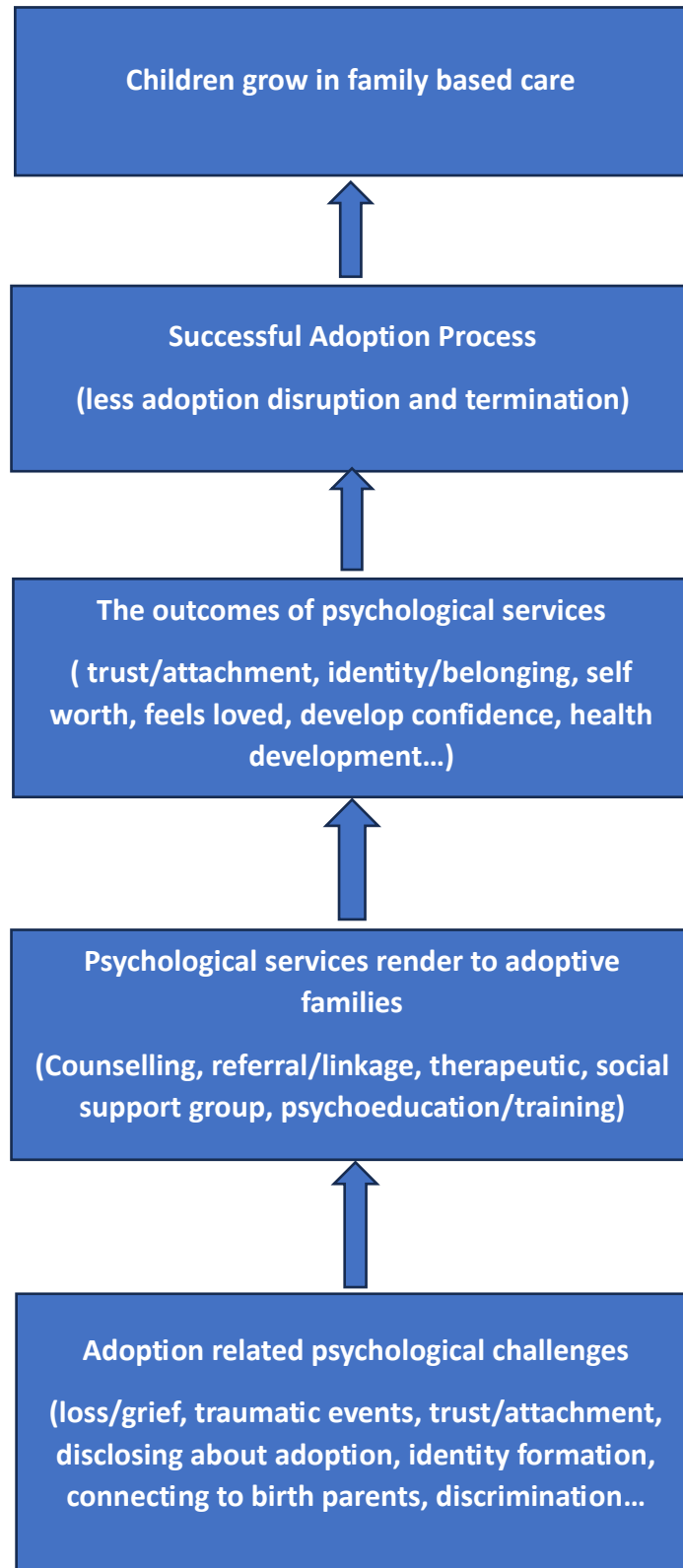
Finally, the anxious attachment style conceptualizes a lack of trust on behalf of the parents. This can lead to negative beliefs about themselves and others as it demonstrates emotional detachment to protect them from repeating the past (Liu & Huang, 2012). If he or she has experienced trauma, it is likely that he or she will not want to experience that type of emotional feeling again in the future, and therefore he or she will maintain an emotional distance to not experience the trauma again. Avoidance behavior has an unresolved quality that keeps children from expressing their feelings and putting everyone in the same position that reminds them of previous negative experiences. A strong distrust of others leads to an unworthy self-image based on a range of interpersonal issues related to socialization and intimacy (Reis & Grenyer, 2004).

Children who enter the youth welfare system or are born there are disadvantaged in future bonding due to past trauma and negative bonding experiences. Many children face tremendous impacts of abuse, neglect, and institutionalization and are likely to experience adverse effects on their cognitive processes, attachment skills, and impairments in peer and family relationships (Hodges, Steel, Hillmann, Henderson, Neil, 2000; van den Dries, Juffer, Van Ijzendoorn, & Bakermans-Kranenburg, 2009). Children who have experienced institutionalization are also classified as at risk of facing attachment difficulties in future relationships (Hodges et al., 2000;

van den Dries et al., 2009; Barcones, Abrines, Brun, Sartini, Fumado & Marre , 2014). In addition to the hardships associated with a relationship, adopted youth are also likely to exhibit behavior problems resulting from past traumatic experiences.

Finding a permanent home and family for children who have lost their parents is the goal of the child welfare service known as adoption. OVC can find a home through the process of domestic adoption, which allows them to remain in the nation of their birth while maintaining their nationality. In order to have an effective adoption, it is very crucial to understand the behavioral, relational, attachment challenges that the parents and children have been facing and the roles of psychological services as a way of building secure attachments between the parents and children while they grow together. This paper explores the practice of domestic adoption, which involves both parents and children with different past experiences, personalities, up bringing with enormous challenges in various walks of life. It will also try to address the contribution of psychological services while placing a child and forming attachment with their adopting parents.

2.7. Conceptual framework



2.8. Summary

There are literatures done on adoption in Ethiopia such as Exploring the practice of domestic adoption, Inter country adoption: The Law and Practice (Abayneh.S, 2008), Guddifachaa Practice As Child Problem Intervention In Oromo Society: The Case Of Ada'a Liban District (Desalegn.N, 2006), Domestic Adoption: Its Practices, Opportunities and Challenges in Adama City, Oromia/Ethiopia (Heran et al.) These literatures have tried discussing issues such as adoption process, the legal framework for adoption, practice of intercountry adoption, major requirements of adoption and other related topics with different location and focus area but this paper is mainly focusing on post placement services render to adopting families and children; and the challenges that parents and children are facing after the adoption process is completed

It is clear from the literatures that support is imperative during the adoption process, however, despite this fact, some adoptive parents report feeling frustrated, discouraged, and unprepared for their child's psychological and emotional needs. Therefore, this paper is concerned with psychological services rendered to adopting families and adopted children after post placement in Bethany Christian Service, Addis Ababa.

CHAPTER THREE: RESEARCH METHODOLOGY

3.1. Study Design

The study's primary focus was on identifying, analyzing, and elucidating the psychological difficulties faced by adoptive and foster families and their children, as well as the associated psychological services provided by Bethany Christian Services.

The researcher intended to employ qualitative research methodology for this purpose. A method for investigating and comprehending the significance that people or groups ascribe to a social or human issue is qualitative research (Creswell, 2009). Mason (2002) also points out that exploratory, flexible, data-driven, and context-sensitive qualities are hallmarks of qualitative research. In order to gather data regarding domestic adoption in relation to the difficulties and functions of psychological services, the researcher will use a qualitative research design, with the goal of examining the practice of domestic adoption in Ethiopia.

An exploratory qualitative research design approach was used in this study. In areas where research is scarce, a qualitative approach is employed (Donalek, 2004). One of the things about Ethiopia that we don't know much about is the practice of domestic child adoption. It is appropriate for this study to use a qualitative research design in order to investigate Ethiopian domestic adoption practices. For this investigation, a phenomenological approach was selected. The goal of the study was to investigate the postplacement psychological services as a phenomenon seen at Bethany Christian Services. Data was gathered by the researcher from individuals who had witnessed the phenomenon.

3.2. Study Setting: Organizational Background

In 1944, Marguerite Bonnema took in a little girl who was not loved and who was threatened with death by her father. Marguerite and her friend and roommate, Mary DeBoer, took the child in to live with them in their small apartment. But the two didn't stay with one child. They took in five more babies over the coming months, and in November, with the help of Andrew Vander Veer, they started the Bethany Christian Home as a nonprofit organization. The following year, the house moved to a residence on the 13-acre property in Grand Rapids, Michigan, which is now Bethany's headquarters. Since 1944, Bethany has grown to become not only a well-known adoption agency, but also a social services agency serving expectant parents, foster families, individuals and families in need of counseling, and struggling families and children in dire need of help. serves and supports the most basic needs. The agency has a heart for children and equips families to be the answer to children in need on five continents. The group estimates that there are over 150 million children worldwide who are homeless. In 2016 alone, Bethany Global was able to benefit more than 84,000 children. Bethany has been working to help children in Ethiopia since 2007. It runs in three different cities: Addis Ababa, Adama and Hawassa. This project viewed foster parents as a temporary solution, a placement service preparing to host families for permanent adoption through the sponsored and new concept of unrelated adoption. The organization helps orphaned children find the love of a forever family as part of an attempt to prevent orphanage by keeping families together. In addition, Bethany works with families who are willing and able to become last long families for orphaned or abandoned children. The foster-to-adopt program prepares and assists families to care for a child or a child and their siblings on a foster basis until the best permanent care solution for the child is determined. The hope is always for the family of origin to be reunited where this is possible. Bethany is using the “foster-to-

adopt” approach in Ethiopia so successfully that other NGOs are already beginning to develop their own programs based on the Bethany model.

3.3. Participants

The participants in the study were those who have direct or indirect relationship with the adoption process in general. Adoptive parents, social workers/agency workers and officers in the government bureau have participated in the study. Social workers and officers from government bureau (Ministry of women and social affair) were those who provide orientation and training, and conduct assessments on the adoptive families’ socioeconomic, medical and physical status. These workers were also responsible to provide services to adoptive families whenever they face difficulties after placement.

3.3.1. Population of the Study

The participants in this study are families who adopt children and representative of the organization that facilitates adoption of children. The target population of the study is 25 participants which includes the adoptive parents, social workers/agency workers and officials from government bureau. At the time of the study, Bethany Christian Service had done 84 adoption placements for consecutive two years and out of the total adoption number, nineteen adoptive parents, four social workers/agency workers and two government officials were selected based on their willingness and participated in the study.

3.3.2. Sampling Procedure

This study used a Non-Probability Sampling Methods called Convenience sampling. It is a type of sampling where participants are selected based on availability and willingness to take part.

This enables the researcher to choose adopting parents who really understood the purpose of the research and are willing to participate in the study. The adopting parents was reached through the organization, after having the consent of the participants the interview was conducted by using the interview guiding checklist.

3.4. Data Types and Sources

Both primary and secondary data types are used for the study. Interview guiding questions are formulated and interviews was conducted as the primary data sources, while document review was used as the secondary data source. The primary and secondary sources have used to triangulate data from different perspectives related to the research question, i.e., the gaps of psychological services render for adoptive families in case of Bethany Christian Service The main sources of data include interviews with the agency representative and adopting family obtained through the organization. The secondary sources was collected from reports and records of the organization visited and from brochures.

3.5. Data Gathering Instruments and Collection Procedure

The main data collection tools that are implemented in the study are key informant interviews and document review. Besides, observation was also used to see the interaction of the adoptive families, social worker and children during pre-adoption stage and post placement. Ensuring that any information collected is done so in a manner and for a purpose that aligns with the research topic and conforms with consent and privacy protection laws was the primary consideration. To enhance efficacy and efficiency, it was decided to make an attempt to gather information that will clarify current problems. Information should be obtained using recognized data collection methods to preserve the validity and dependability of the data. Some of the procedures taken into

consideration in this study are determining the purpose of data collection, setting the goal or scope of the data, choosing the appropriate data collection techniques, and actually collecting the data.

3.5.1. Key Informant Interview

The purpose of the interview was to get firsthand experiences of adoption from the adoptive parents. It also helped get in-depth information with a room for both the adoptive parents and the research being flexible and elaborate ideas in the interview guiding questions. The interview comprised of different topics such as background information of the interviewee, the reason for adoption, psychological challenge faced by adoptive parents, psychological services render by the agencies and coping mechanisms of different emerging challenges because of the adoption. The interview was conducted using Amharic languages even though the interview guiding questions were prepared in English; and the researcher was responsible to make clarification and make sure that the questions were well understood by the interviewee. Eighteen participants were interviewed through phone on the participant's convenient time, however, seven participants were interviewed in person at Bethany's Christian Service office. The interview was designed to take about 30-40 minutes, and most of the interview conducted fall within this range.

The most important informants are the adoptive parents. It makes sense to select these key informants as they are the primary reasons these children receive the care they deserve. Interviews help the researcher to explain, better understand and examine opinions, behavior, experiences, phenomena, etc. of the research topics. It is the best way to collect data to understand how the adoption process is handled in the organization.

3.5.2. Document Review

Documents can provide supplemental research data, making document analysis a useful and beneficial method for most research work. Documents can provide background information and broad data coverage and are therefore helpful in contextualizing one's research within its topic or subject (Bowen, 2009). Almost all the required documents that go with it and that the agency can easily share have been checked.

The purpose of reviewing the documents found in the Bethany Christian Services were to enrich the researcher with information of psychological services rendered by the organization and to capture the general picture how adoption process was facilitated. The documents found in the organization broaden the notion of the researcher towards the preadoption and postadoption services and their contents. This helped the researcher to compare the paperwork with the actual intervention; and helped to identify various psychological services and their contributions to adoptive parents.

The researcher tried to collect documents which are relevant to the study and applicable to the general objectives of the study. Bethany Christian Service has various documents pertinent to the facilitation of the adoption process, such as training modules, assessment tools with different age ranges, observation and reporting tools and standardized implementation guideline.

The researcher listed documents that are relevant to the study at hand and review the content of the document in relation to adoption facilitation and providing the necessary services including the psychological services. Reports also reviewed to understand challenges and lesson learned as the adoption was facilitated and any positive or negative outcomes as a result of adoption. Then,

data from the reviewed documents are integrated with data obtained from the interview and observation to have a full-fledged picture of psychological services rendered to adoptive parents.

3.5.3. Observation

The observation was done on the prescheduled program in which the researcher only observed the interaction between the adoptive parents, adoptees, and the social worker. There were two major sessions; which are intake and follow up sessions. In intake sessions in which the adoptive parents and social workers are mainly involved where by the readiness of the families and their related psychosocial and economic status are evaluated, In the follow up session, challenges faced by families are topics of discussion and in addition to adoptive families and social workers, there were times when children were part of the sessions.

Observation gives you the chance to keep an eye on or evaluate a situation or process while recording what you see and hear. Understanding and insights into the event, activity, or situation under review can be gained by observing actions and behaviors in their typical settings or within their natural context.

The researcher have attended orientation sessions in which the social workers provide the initial information about the adoption process and requiring the prospective adoptive parent's reason of adoption, age and sex preferences; and other related issues. Besides, the researcher attended support services in which the social workers engaged in resolving various social and psychological issues after placement. The researcher did the observation while the social workers and the adoptive parents were engaged in conversation but only focused on the behavior and interactions that relevant to the objectives of the study, since the adoption process touched different areas like legal and economic status of adoptive parents. The researcher recorded the

preparedness, emotional and psychological difficulties they faced, the compelling reasons for adoption, the coping mechanisms they implemented and the services they were looking for from the adoption agency.

3.6. Data Analysis

Qualitative data analysis is the process of organizing, evaluating, and interpreting qualitative data—non-numeric, conceptual information and user feedback—in order to identify themes and patterns, provide answers to research questions, and determine what steps to take to enhance services or product. There are different methods of qualitative data analysis including content analysis, thematic analysis, ground theory, narrative analysis, and discourse analysis. The researcher believed that thematic analysis is more appropriate to this specific study for it tried to identify patterns and classify them in various themes. Thematic analysis entails going through a set of data and searching for patterns in the meaning of the data in order to identify themes. Making sense of the data is an active process of reflexivity where the subjective experience of the researcher is central to the process.

Data collection and data analysis started at the same time. Initially, the researcher read through all of the notes taken during key informant interviews and listened to all of the recorded data of all participants' responses. The recorded information was listened to multiple times to ensure data accuracy. In order to obtain a broad overview, the researcher then typed up the information gathered from the interviews. Following a second reading, the objectives of the study were taken into consideration when classifying the key informant data collected into distinct topics. Then it was refined and adjusted in the course of the analysis.

3.7. Ethical Code of Conduct

Respect human dignity, privacy, and autonomy; take extra precautions with vulnerable populations; and work to distribute the benefits and burdens of research fairly are some ethical considerations the researcher did take. Because research frequently requires a lot of collaboration and coordination between numerous people in various disciplines and institutions, ethical standards promote the values that are crucial to collaborative work. Some of the major ethical considerations the researcher took in this study are discussed briefly below.

- **Informed Consent:** the researcher should obtain the informed consent of the participants, ensuring they understand the nature, purpose, and risks and benefits of the research.
- **Confidentiality:** The researcher should protect the confidentiality of participants by keeping all information confidential and secure.
- **Respect for participants:** The researcher should respect participants' rights, autonomy, privacy, and dignity throughout the research process.
- **Communication:** The researcher should communicate the findings of the research to all relevant stakeholders in an understandable and accessible manner.
- **Transparency:** The researcher should be transparent about the research process, methods, and findings to foster trust between participants and researchers.

CHAPTER FOUR: FINDINGS AND DISCUSSION

This chapter deals with the findings and discussion of the study. The sections in this chapter include background of the participants in the study and it describes and discusses the psychological services being rendered by the organization, the psychological challenges faced by adopting parents, the contribution of the psychological interventions and the strategies need to be in place to overcome the observed challenges.

4.1. Characteristics of Participants

A descriptive analysis of the demographics from the interviews yielded data that are largely different among several domains. All the families participated in the study are married except one adoptive parent. The age of the youngest participant is 35 while the oldest is 58. Three of the participants have attended college/TVET and earned diploma. Eight participants were BA degree holders and six of the adoptive parents were MA degree holders. The remaining two of the participants were with PhD degree. Except two of the adoptive parents in the study were employed and working in governmental and nongovernmental organizations and earn an average monthly income of 10,000 Birr. Participants from adopting agency (Bethany Christian Service) and individuals from women and social affairs were also included in the study with various educational level and age categories.

Table 1: Socio-demographic Characteristics of Participants

Socio-demographic variable		Participant	
		Workers	Adopting Parents
Sex	Male	2	2
	Female	4	17
Age in years (Mean age)		31	45
Responsibility		Social workers and MOWSA officers	Housewife, employee, business owners.

4.2. Reasons for Adoption

Adopting families were asked about the initial or compelling reasons that persuaded them to go for adoption and most of their responses were fall into three major categories as experience/exposure, biological issues and religious teachings/readings.

- **Experience/Exposure:** Among the adoptive parents participated in the research, eleven of the participants fall in this category. Adoptive parents whose reasons for adoption were experience or exposure to adoption stated their reason of adoption as:

I had an experience of my grandmother adopting an abandoned child and this had been instilled in my heart. as I grow in my spiritual life, religious teachings were enforcing the idea of adoption from my childhood. (adoptive parent 12)

There was a child who came for the institutional care to the organization where I was working and the child was not that much accepted by the social workers for the child wasn't physically neat and attractive. But I felt of changing her unattractiveness with God and decided to start the adoption process. (adoptive parent 9)

I had an intimate friend who was adopted and had an interest to do the same when grown up. And then, I fortunately had opportunity to work in adoption agency that inculcate the idea of adoption moreover before. (adoptive parent 17)

Some adoptive parents are working in an organization who facilitate adoption and through exposure to children and the institutional care that the children were struggling with; they came to decision to adopt a child. Adoptive parents shared their reasons of adoption as follows:

Adoptive parent 1 stated as: I was working in an organization that has institutional care program for orphan children and this had provided an opportunity to see how children in the institutional care were looking for loving family.

Adoptive parent 6 was working in the program that facilitate adoption process and wanted to put exemplary life for others and spiritual teachings had also contributed a lot to the decision. Besides, I had attended orphan summit where I heard a lot of testimonies about adopting disabled children and this had pushed me forth.

Working in the organization that empower women and OVC children, had also provided me the opportunity to see and understand how it benefits these vulnerable group of society. I had an opportunity to spent time with the orphans and attached more to one of the children in the orphan center. (adoptive parent 4)

- **Biological issues**

Adoptive parent 14 was a single participant whose reason of adoption was biological and stated that she has biological issues, she tried to conceive to have a biological child after she get married but it didn't happen. Therefore, she and her husband came to a decision to adopt. Accordingly, they adopted two children.

- **Religious teaching/Spirituality**

Religious teaching/spirituality was initiating factors for eight participants to go for adoption and adoptive parent 18 stated that I happened to read a book that talks about ways of manifesting love and I got ideas of expressing love through care to children who don't have parents to look after. On top of the spiritual teachings, the book has had a lot to the decision I took in regard to adoption.

What we can see from the above responses is that religious teachings have an important role in instilling the idea of adoption as one way of exercising righteousness and experiences of adoption from intimate friends or family members create an environment where individual grow up testifying the reality of adoption and normalizing adoption that will open hearts as a way of paying forward. However, there are times that families came forth for adoption because of health-related issues like infertility.

Overall, reasons of adoption imply different perception by both the adoptive families and the community in which the adoptive parents are living. Adoptive families who are biologically infertile and who are single mothers stated that the societal perceptions towards parents who adopt because of biological reasons (like infertility) are somehow negative and also to those parents who are single, the people around perceive their adoption as pushing marriage away or no one is interested with her/him to get married. In the contrary, those parents who are married and have biological children usually receive praise for they adopt child, and it is normally taken as part of their righteousness and good deeds. On the other hand, the adoptive families who have biological reasons for adoption are more restrained from disclosing about their adoptive child in fear of discrimination and other related societal burdens than those adoptive families who have biological child.

At the time observation, it was able to testify that parents don't have only differences on the reason of adoption but also preferences on the sex of the child. The social workers were elaborated the idea of preferences that most adoptive families have opinions that males will leave them early whenever they get the opportunity and males are more curious to look for their birth families than females, this is one but not the whole reason why male children wait for much longer time than females children to be adopted.

4.3. Psychological Services and Its Contributions to adoptive families.

Research shows that adoptive parents' level of pre-adoption preparation is related to the adopted child's emotional, behavioral, relational, and family functioning (Goldberg & Smith, 2013; Simmel, 2007). Interventions that adequately prepare and inform adoptive parents can improve the outcomes of adopted children and adolescents. Interventions with adoptive parents must recognize the unique challenges that adoptive families face, including the impact of exposure to early adversity, attachment difficulties, coping with loss, and helping the adoptee understand the meaning and implications of adoption (Brodzinsky, 2011; Rushton, Monck, Upright & Davidson, 2005; Woolgar, 2013). The psychological services rendered for adopting families and children starting from intake assessment to post placement services.

The participants were asked to explain the psychological services rendered by the adoption agency and its contributions as they try to develop attachment with adopted child. Some of the common findings of the study in regard to psychological services and its contributions are briefly discussed in three thematic areas.

- **Pre-adoption services:** Pre-adoption services help the potential adoptive family integrate the child into their home during the trial adoption (TA) placement phase before the adoption is formally finalized. Adoptive parents 5 and 12 stated the psychological services render by the agency as:

There were different services provided by the adoption agencies, like orientation, one or half day training and follow up services. Most of the awareness creation sessions were focused how vulnerable the children are and how blessed the adoptive parents are for they are willing to participate in the adoption process.

While describing the necessity of the preadoption services, adoptive parent 4 and 19 emphasized on the intentions of adoption needed to be seriously verified and stated that as:

Awareness has to be created among the adopting parents for there was time that families who came to adopt with ill intentions like abortion happened around eight months pregnancy and after pretending that the parents are still pregnant while facilitating to adopt few days long infant child to substitute their misfortunate in a way of replacing the identity of the adopted child with the deceased one. Adoption is not to fill gap or misfortunes of miscarriage or infertility, but it has to be to the best interest of the child.

The adoptive parents 1,7 and 17 explained the nature of the psychological services they received and put their expectations by stating as

The psychological services are more of advocacy for adoption than preparing the adopting families to the long journey but I was expecting to discuss postplacement issues of adoption related with psychological and behavioral aspects of the child and child-parent relationship.

In regard to training as pre-adoption service, adoptive parents 6 and 10 stated as:

the specific awareness towards the adoptive parents and children was not given. One fit for all kind of training approach has been used but children have different behaviors according to their ages and parents have also various personalities based on different factors. Therefore, particular approaches have to be followed when matching is done.

The preadoption services have an important role in preparing the adoptive families to take the long journey of adoption and adoptive parents 3, 8, and 15 stated as follows:

The psychological readiness of both parents and children is assessed, especially the mother has a significant role on the child's upbringing. Psychological services play a great role helping parents reassess their decision, for there were times that parents got divorced because of adoption was initiated by single individual.

- **Counseling Services/therapeutic services:** Therapy can be used to treat a wide variety of concerns related to adoption and foster care. Some ways therapy may help people cope with adoption or foster care include: Exploring one's identity, processing trauma, posttraumatic stress (PTSD), or abuse, addressing behavioral disorders in adopted or foster children, working through anxiety, depression, addiction, or another mental health issue, healing attachment issues experienced by children or adults who were adopted and/or in foster care, and telling a child they are adopted. Adoptive parents may be able to help by providing children with as much information as possible and by answering any questions a child might have about their adoption.

Adoptive parents 2 and 14 underlined the necessity of counseling/therapeutic services as they go through the process of adoption. They stated this as:

There were not that much psychological services done with follow up after the postplacement and this left us alone with the child and related challenges which caused a lot of stress on the family.

There were psychological services where social workers give or guide to different kinds of services whenever any types of behavioral, relational and developmental issues raised.

However, there were times that certain adoptive related issues became beyond the capacity of the staffs in the agency.

Adoptive parent also received psychological related issues as part of the counselling services through various adoption training as the parents are trying to develop secure attachment with the adoptees. Adoptive parents 11 and 18 stated their experiences in relation to counseling services as:

Parenting training, trauma focused training and experience sharing sessions are provided by the agency to minimize the psychological burden of the families during postplacement.

I received counselling services whenever our families come up with relational, behavioral or mental issues. And the agency is also making referral when some issues are beyond the expertise found in the agency.

Information obtained from the document review revealed that the psychological services render from the agencies after post placement was much more on the socioeconomic well being of the family and very less attention was given to the psychological challenges that both parents and children are facing. Most reports showed that the home study and follow up visit focused on whether the child is able to go to school and whether the parents are able to provide food, cloth and educational materials.

- **Support Group:** There are lots of support organizations for foster and adoptive families. Parents can network, provide support, and talk about difficulties they may face when raising an adopted or fostered child in these groups. Parenting groups can support one another, provide validation, facilitate resource sharing, and aid in problem-solving.

Participating in a group that supports foster or adoptive families can be a crucial aspect of self-care.

Holmes (2013) notes that adoptive parent and/or peer support groups play a crucial role in providing informal post-adoption support. Participating in support groups can reduce the sense of isolation that some adoptive parents and adopted children feel. Many parents may find that being a part of a support group makes them feel more emotionally refueled and prepared to deal with the particular difficulties their family faces and to provide their foster or adopted child with the support they require.

Furthermore, improved knowledge of the services gained and the sense of collective solidarity felt in support groups may also lead to earlier (proactive) parent and adoptee seeking help before crisis point is reached within the family (Beauchamp 2014). Cravens (2016) states that peer support groups for adoptive families and adoptive children can help create group norms around adoption by providing a safe environment for parents to counsel, share fears, support each other and build trust.

These responses indicated that families have different notions of understanding towards the psychological services rendered by the adoption agency, some families have mentioned that the services are not adequate especially after the postplacement. The above responses implied that the psychological services starting from intake assessment to the therapeutic services/referrals had contributed a lot in smoothing the adoption process and building the relationship between the adopting parents and adopted children after postplacement.

4.4. Psychological Challenges

Much like any other type of parenting, adoptive parenting can be both incredibly rewarding and very stressful. As they approach the adoption decision, during the adoption process, and most importantly, after adoption, adoptive parents may go through emotional highs and lows. Certain themes regarding the emotional reactions of adoptive parents emerge, despite the fact that every adoption is different and every parent has different experiences and feelings (Child Information Gate Way, 2010).

Adoptive parents were asked to explain the psychological challenges they have faced during the adoption process and post placement: From the interview with the adoptive parents and key informants, four major psychological challenges such as emotional burden, attachment issues, disclosing about adoption and stigmatization and discrimination.

- **Emotional burden:** adoptive parents in the study express their frustration and emotional burden after post placement and stated their psychological challenges as:

Adoptive parent 18 stated that at the beginning of the adoption process I was frustrated for I didn't receive the appropriate service from the respective government offices.

While discussing the emotional readiness of parents adoptive parent 14 stated that after I and my wife discussed about adoption and decided to go forth, we were overwhelmed to adopt a child but not prepared well emotionally, especially my wife was reluctant and persuading her was tough.

I had some information about the child's birth mother that she was affected by HIV and the child was seriously suffered from pneumonia. I was afraid of losing my adopted child and was felt of guilt and blame myself for the painful journey he had.

In the first periods of adoption after placement adoptive parents receive different kinds of questions from relatives, neighbors, and their biological children. Adoptive parent 10 and 16 stated that my biological children were asking me how a child is born without pregnancy. I was psychologically challenged to answer these and related questions. Because of less follow up from the agencies, there were times that we were frustrated because biological and psychological issues related with adopted child are not discussed in the initial stage of the adoption.

The psychological challenges adopting parents' encounter are usually started from the day the idea of adoption come to their mind. Most of the families in the study are emotionally overburdened and feeling angry towards their condition of being not able give birth or long stayed idea of adoption even they gave birth. Adoptive parents usually perceive adopting a child will alleviate the emotional burden they have been carrying for long period of time and rushing towards without properly considering other related factors with adoption. This in turn will bring frustration, doubting their decision and feeling of guilt during the process and postplacement.

Attachment issues: Every child or young person who has been separated from their biological parents has experienced a broken bond. Adoption requires the development of new bonds.

Key informant from the government office stated that since the child were in institutional care where the children were living in a group home, there were possibility of developing different behaviors like aggressiveness, anger, sensitivity, irritability and related ones; and this in return made the attachment difficult for the adoptive parents.

Creating the attachment is an ongoing process which exceeds bring a child to the house and being physically together. There were adoptive parents in the study who wanted to have the attachment right away in the first day and shared their experience as:

Adoptive parent 6 and 9 stated even though I have been working in OVC and adoption agencies, the experiences I had in the organization didn't help that much because I was tested on the first day, I brought the child to my home. I was challenged by her sleep trend, tense behavior and overwhelmed feeling by the new environment the child wasn't calm that gave me a hard time.

and adoptive parent 9 stated that because of the malnutrition and other related factors, the child sweat frequently and had a bad odor which stayed for consecutive eight months that did put my decision of adoption in question. Besides, the child usually shocked whenever someone get closer or giver a kiss or hug because she didn't have such closeness and love in the institutional care. This had also put me in stressful situation and again doubt the decision I made was right.

Creating attachment will sometimes take more than it was expected, and adoptive parent shared her experiences stating that:

It took me three years to dissolve the confusion I had between my biological child and adopting child, there were times I gave up on my adopting child because of the guilt feelings I had when I felt there are some partials treatments between my biological and adopting child.

Beside the attachment concern with adoptive parents, adopted children have issues with biological children and become too competitive among themselves. In addition, adopted children inclined to one or two family members but didn't want to attach to other members of the family.

Adoptive parent 8 and 14 described their difficulties in relation to attachment as: The child was used to scream the whole day and was irritable that had put us in stressful situation where no practical knowledges of parenting an adopted child. The child was more affiliated to male gender and didn't get closer to me and my daughter which was a challenge to the family. Besides, the child was violent enough who throws different materials on my son who was three years old and this was frustrating me as how long these behaviors will take to be changed. Since my second child is closer in age with my last child who is adopted, they were very much competitive and the second child hadn't been willing to welcome my adopted child that add up to the challenges and frustration I was facing.

Adoptive parent 8 added her experience with her adopted child in relation to attachment: Since the child is attached to male figures, the very disturbing issue I had with my adopted child was, he used to go with any male stranger who pass by if he was not attended. This had been giving me hard time, especially when I was at office.

Adoptive parents testified that there are times they felt guilt because of favoring their biological child than the adopted one for the necessary attachment wasn't created with the required level and stated their experiences as:

The responsibility we had towards the adopted child sometimes overburdened us and leads us to make some unbalanced favor between the children that in return was creating a guilt feeling.

Most of the psychological challenges are raised during the postplacement stage where adoption is legalized and finalized. This is the stage where adopting families face the reality of rearing adopted child by themselves with the family members including siblings, extended family members and neighbors around them. The adopted children usually challenged to adapt the new environment and lifestyles of the adopting families. Then, the child's behavioral reaction to the new lifestyle and the parents' response to the child's behavior may not bring the expected outcomes and this put both the child and parents in stressful situations. Almost all parents have faced some kinds of challenges within the first few weeks till the child adjust themselves psychologically and physically to the new environment. These adjustment issues are mainly observed by children above one year old than on those below one year old. The parents are also challenged while adjusting themselves to the new adopted child's behavior; and related stress and frustration that come out from the adjustment process.

Disclosing about adoption: Adoptive parents are not open to adoption. This is something they want to keep secret mainly due to the great societal pressure and it is believed that having biological children of one's own is of paramount importance in Ethiopian society (Simegn, 2015). Regarding disclosing about the adoption, adoptive parents shared their experiences as:

Adoptive parent 3 said that the major stressful aspect of the adoption is to clearly understand the right time of disclosing the adoption to the child. I know that my child has the right to know the truth and there were also times questions raised that shocked me and

wasn't prepared to answer the question which stressed me highly. Questions like, where am I in the family photo?

Some parents don't have adequate information about the biological parents and adopted child beside a single paper police incomplete report to disclose about the adoption and adoptive parent 9 stated as:

I don't have enough information about the child than the police report and I really worried about questions that will be raised by my adopted child in the near future. I don't want to be taken as irresponsible mother before him and assuming me as I have partialities between him and my biological children. I am also worried if information about the birth parents is obtained and what my decision will be.

Some parents use their own method of disclosing about the adoption by exposing the adopted child to orphan center and adoptive parent 15 stated as:

I am taking him to orphan centers where we volunteer and this will normalize the idea of adoption and create some pictures that my adopted child will associate with in the near future. However, despite doing all these things, I still have fear toward how he will react to the story of him being adopted and me either not his biological mother.

Most adoptive parents were confused about the right time of disclosing and adoptive parent 9 and 17 stated as:

We were also had issues in regard to how to inform the child about the adoption and confused to know the right time to disclose both to the child and to the families around for there were extended family members who didn't support the idea of adoption. These situations have left us alone and anxious about how to forward questions.

I have adequate information about the birth parents but I am not quite sure what my decision will be if her birth parents appear sometimes in the future and afraid that this will hurt all members of the families, especially my children and husband.

Moreover, as far as disclosing about adoption is concerned, adoptive parents were felt uncertain about their adopted child's reaction to the reality and adoptive parent 10 stated as:

There are times my adopted child suggesting as a child that I don't love him when I don't allow him something, I usually afraid how he will be going to respond the worst-case scenario of coming to know that he is adopted. Even I don't know how to react if his birth mother appears in the future and I usually feel that my life is full of uncertainty in regard to my adopted child.

Key informant from Bethany Christian Service suggested that:

As parents grow older and gain understanding, they become better at explaining to the child how the child was adopted. If adopted children are not notified of their adoption by adoptive parents, at a certain age they may hear it from someone else or detect it from conversations with relatives or from teasing from neighborhood children. As a result, they may feel different from the family they live in and face negative stereotypes about being different.

Key informant from the government office (MOWSA) suggested that:

Some families are well prepared in regard to collecting information about the adopted child and planning to disclose or are doing it in different ways, however, the families have still fear to their adopted child reaction when the reality of adoption is disclosed.

Some families are not well prepared and don't want to go further to get information about the birth parents; and has been living in anxious condition and with uncertainty.

Open communication regarding the adoption is beneficial to adopted children's development and psychological health when it is disclosed (Brodzinsky et al. Bai et al., 1986; MacIntyre, 1990. (2006)). According to Mohanty (2015), adoptive parents who told their child about the adoption were better able to comprehend the advantages of sharing the information with the child and were less conscious of the loss of birth parenthood. Early adoption education is beneficial for the adopted child (Nickman, 1985). Children who have been adopted and whose adoptive parents have not informed them appear to sense that they are unique in some way. In the end, this might impact how they see themselves (Nickman, 1985).

Stigmatization and Discrimination

Open or passive discrimination and rejection can become stressful for adoptive parents as their adopted children are incorporated into the larger family social structure (Forbes & Dziegielewski, 2003).

Adoptive parent 13 stated that: My family took the decision I made as something abnormal; as if I didn't want to get married or me pushing away marriage forever. Extended families didn't accept my decision and has been treating my child as an outsider and this had been a strong challenge and put me in the position of stressful situation.

Stigmatization or discrimination are experienced by adoptive parents in different form and level.

Adoptive parent 5 shared that:

The bureaucracy itself frustrated parents who are looking for adoption in so many ways, especially from the government office. I have been psychologically challenged whenever I go to government offices to facilitate documents to my adopted child; it usually took me much more time than it would for a biological child which put me in stressing situation.

Key informant from government office suggested about the registration of adopted child, such as birth certificate and it states that the child is adopted; this in return expose the child for peer pressure and adoptive parent 16 confirmed this:

In educational centers, families are not willing to submit their adopted child's birth certificate for it states that the child is adopted and disclosing this information to the public will bring an unanticipated psychological burden to the child and parents. The families are fearing of their child being discriminated and pressurized by their peer students; and this in return reenforce the feeling of abandonment and will possibly develop low self-esteem.

In many cases, families faced different psychological challenges with various severity level and most of the challenges are related to behavioral, relational, past experiences that the child had and the parent perception towards adopted children's behaviors. Zill (1996) suggested that problems in adoption, whether manifested in troubled behavior or adoption disruptions, are highly associated with certain characteristics of adopted child. The most predominant child factor that contribute to the challenge is the child's age. Older children who are also more likely to have been older when separating from their biological families, have had time to absorb deleterious effects of abuse or neglect. Additionally, they may have closer ties to biological parents and may have developed more resistant habits that make their integration into a new family more difficult (Smith & Howard, 1994). Families in which children display behavioral or

emotional problems are also more likely to be challenged psychologically, particularly when those problems are of an externalizing nature such as violation of family norms, defiance, or physically harming others (Barth & Berry, 1991)

Overall, most of the psychological challenges during the preplacement are related to understand whether their decision towards adoption is timely and right or not. The initiation of adoption is mostly raised by one party among couples and this will take long time to persuade the other party that sometimes end up with disagreement which led to argument and further possibly lead them to divorce.

During the adoption process, parents pass through different requirement stages like medical examination, home study, legal procedures, orientations, bonding sessions, matching processes, training; and there are some other back and forth requiring procedures that stress the families. It is noted from the parents participating in the study that the process is too long and have many requirements that frustrate to go forth in the process.

It is shown in the study that there are adopted children who violet, throw materials, reject eating or over eating, sleep disturbance, favor only some members of the family, run away with strangers and other related challenges that put parents in anxious situation and start to doubt the decision they made about adopting a child.

Findings seem to indicate that the major challenge of adopting parents are facing is how and when to disclose about the adoption to the adopted child. Families not more than two are trying to disclose the adoption issues in different ways like taking the adopted child to adoption center and initiate the normalizing process of adoption in the child's psychological make up. And there are families who are openly discussing issues among the family members and considering their

children's level of understanding. However, the way that parents use to disclose adoption is sometimes shocking the child and internalize it in different perspectives as if they don't belong to the family or unabandoned and unwanted.

Families who withheld information must constantly worry about how their child will learn that they are adopted, whether the information is coming from a trustworthy source, and how the child will respond to the adoption's reality. For families living with an extended family member as well as very close friends or neighbors who are aware of the adoption, there is a great deal of uncertainty and fear. According to recent research, parents worry and are unsure about how their family will communicate about adoption (Miall, 1987; and Alexander et al., 2004), which Jayashree cited in Jaejin and Srinivasan, 2015). Daniel et al. (2004) discovered that one of the reasons African-American parents were uncomfortable with storytelling was because they were afraid of what would happen if they revealed too much, especially in terms of their children's loyalty and fidelity.

Findings in the present research indicated that parents are in fearful and anxious condition whenever disclosing the reality of adoption is come up to the surface. The parents are tensioned between disclosing the fact that they have an adopted child and the psychological burden the children will face at school or any public service areas where it is required to disclose the adoptive relationship. Unlike findings in previous research, the major psychological challenge faced by the families in the study is the emotional burden caused by disclosing the adoptive relationship and the responses from the community, institutions and other public services.

Participants from the agency and respective governmental sectors indicated that most of the psychological challenges faced by the families are raised from inadequate awareness and

psychological services, social pressure and lack of infrastructures and systems that accommodates adopting parents and children.

4.5. Managing the Challenges

The families were asked about how they have overcome the challenges they faced, and their responses are categorized into two main themes: seeking professional intervention and personal coping mechanisms.

Adoptive parents tried to manage any challenges that come from the adopted child, social pressure, emotional burdens and other related ones by seeking professional interventions.

Adoptive parent 7 stated her experience in managing challenges as I am arranging time to see psychotherapist to prepare myself and my child to future and to the worst-case scenario. I do want support from individuals who have passed through adoption process and adopting a child.

Adoptive parent 11 also stated her coping mechanism as I usually turn to the adoption agency social workers to get some advice whenever I face challenges, especially when I see strange behavior on my adopted child and not knowing what to do.

Adoptive parent 6 stated I am planning to see psychotherapist for help, especially on the issues of disclosing to my child about his adoption and that I am not his biological mother.

On the other hand, adoptive parents usually request support from their families and friends who have an experience towards adoption, but still there are parents who follow their own way of managing the challenges they faced because of the adoption.

Adoptive parent 4 and 13 stated that openly discussing the issues of adoption with the family member has helped us a lot to share information among us and let the adopted child have some information appropriate to his age level.

Adoptive parent 9 stated her experience of managing challenges as: Our family used doll in different interactions like prayer or bed time as representing the child who was about to be adopted and let the children get used to it. However, the second child was not happy to have interaction with the doll representing the child.

Exercising patience towards the adopted child will do a lot to learn the new environment, for we ourselves are also adopted child of God.

Some adoptive parents manage the challenge by working on the extended families circle and help both the adopted child and the remaining family members accept the new environment by censoring the languages used towards the adopted child. Adoptive parent 16 shared her experience stated as:

I overcame the challenge I faced during the postplacement by consistently reaffirming that the child is my child and deconstructing terminologies used to refer my adopted child as ‘‘the child’’ and call him my child in every conversation I had with my family members.

Some adoptive parents tried to normalize being adopted to their biological and adopted children by exposing to the reality of adoption.

Adoptive parent 17 shared her way of managing the challenges as: I am taking my adopted child to orphan centers where we volunteer and this will normalize the idea of adoption and create some pictures that will associate in the near future.

There are adoptive parents who openly discuss issues related to their adopted child as their way of coping mechanism and adoptive parent 8 shared her experience as:

I proudly disclose that I have adopted a child and let everybody around me hear about it which was a kind of promoting adoption to the community that I am living in. Adopting a child is not something I am ashamed of rather it is something that everybody has to be participated.

There are adopting families whom I know and I discuss with them any challenges I faced in regard to parenting my adopted child.

However, there are adoptive parents who keeps secretly about the adoption as way of managing the discrimination and peer pressure if it is disclosed. Adoptive parent 1 and 16 shared as:

We kept everything related to adopting our child for ourselves and waiting for the right time or till we are obligated to do so.

On the contrary, key informants suggested that keeping the adoption secret from family members and the adopted child won't help that much and stated their suggestion as:

I think we as parents need to be ready for the everyday questions our adoptive children will raise. We, as parents should be the ones that should provide answers because if they get answers from outside, their feelings will be hurt and they will not also get the full or real information. Therefore, adoptive children should hear about their background from their parents and not from other people. That's also something we have learned during the initial training we took.

The above responses show us that adopting parents use different coping mechanisms based on their level of understanding, experiences and available resources around. Most of the families

participated in the study cope up the challenges, especially the ones raised from the adopted children, by taking the children as their biological child and willing to grow up together looking for solutions.

Adoptive parents and biological parents experience similar parenting responsibilities and individual challenges. However, since the transition to parenthood, adoptive parents have to deal with additional stressors that may include dealing with infertility, stigma of adoption and uncertainty about the child's arrival. There is also an increased likelihood that their adoptive children will have emotional and behavioral difficulties due to their history of adversity. As children grow into adulthood, other challenges related to adoption may arise, including initiating and discussing adoption with the child, assisting in coping with adoption-related losses, and supporting and satisfying the child's curiosity about his or her origins. Likewise, these parents appear to have less social support than non-adoptive parents. According to parental stress models , parental stress can be explained by characteristics related to the external context (e.g. social support), the child (e.g. age, gender, history of adversity). the parent-child interaction (e.g. family dynamics) and to the parents (e.g. adjustment to parental role, emotional states, psychological resources).

According to Leeming and Hayes (2016), when parents are able to use psychological resources such as mindfulness, psychological flexibility, and self-compassion in their daily lives, parents tend to be psychologically healthier and more able to foster a healthier family environment.

Parents who are able to practice mindful parenting tend to be less reactive and more patient with children's challenging behaviors. In addition, by raising parents' awareness, mindfulness could help them perceive and truly value their children's prosocial behavior.

CONCLUSION AND RECOMMENDATION

Conclusion

There are numerous reasons why families opt to adopt a child. Some families are unable to conceive biologically, while others may choose to have a child to their family through adoption to give a child in need a loving home because of the exposure or experiences they had. Adoption also provides families with an opportunity to make a positive impact on a child's life and help them reach their full potential. For many families, the decision to adopt is influenced by different teachings including religious and is driven by a desire to become parents and provide a stable and nurturing environment for a child in need. Ultimately, adoption is a selfless act that requires love, commitment, and compassion, and it benefits not only the child but also the entire family.

Adopting families are an important part of the adoption community, providing children with loving and secure homes. However, the adoption process and post-placement can present psychological challenges that may require support and resources beyond what families can provide on their own. By seeking help from psychological professionals, adopting families can receive counseling, therapy, and support that can help them navigate the complexities of adoption, address any issues that may arise, and provide the best environment for their adopted child. Coping mechanisms can also be learned through this support. Adopting families can benefit from building a strong support system, knowing how to form healthy attachment, communicating openly with their child, and engaging in therapeutic activities. With the right resources and support, adopting families can provide their adopted child with a happy, healthy, and stable home and be equipped to cope with the challenges that may arise along the way.

Adopting families may experience various psychological challenges during the adoption process and post-placement. These challenges may include bonding difficulties, grief and loss, behavior problems, and attachment issues. Coping mechanisms like seeking professional help, adopting healthy lifestyle habits, accessing support groups, and taking self-care very seriously can help adopting families deal with these challenges. Adopting families should also consider building a strong support system, having open and honest communication with their child, and engaging in therapeutic services, like play therapy. It is important to note that all families and children are unique, and coping mechanisms may vary depending on individual circumstances. Psychological professionals can provide customized coping strategies and recommendations to help adopting families navigate the psychological challenges of adoption. Through the use of these strategies, adopting families can feel better equipped to handle these challenges and provide their adopted child with a loving and nurturing environment.

Psychological services can play a crucial role in supporting adopting families after post-placement. The services provided can help families navigate the complexities of adoption, address any issues that may arise during and after the adoption process, and provide support to ensure the well-being of both the adoptive parents and the child. These services may include counseling, therapy, education, and support groups that are targeted to the unique needs of the adopting family. By providing these services, psychological professionals can ensure that adopting families receive the necessary support and resources to create a healthy and secure family environment for their adopted child.

5.2. Recommendations

Psychological services play a vital role in supporting adopting families throughout their journey. Adoption can bring about a range of emotional and psychological challenges for both the adoptive parents and the children. These challenges can include attachment issues, grief and loss, identity formation, behavioral difficulties, and trauma-related issues. Psychological services provide a valuable resource for addressing these challenges and promoting the well-being and adjustment of all family members. Some of the recommendations based on the findings of this study are discussed below briefly.

1. **Pre-adoption preparation:** Mental health services can provide education and support to potential adoptive parents before the adoption takes place. This preparation may include counseling sessions, educational workshops, and resources to help parents understand the unique needs of adopted children. By providing accurate information and addressing concerns, mental health services can help parents feel more prepared to meet their child's needs.
2. **Post-adoption support:** Psychological services should be easily accessible to adopting families after the adoption process is complete. This support can take the form of individual therapy for parents and children, family therapy, support groups or parenting courses. Post-adoption support should be tailored to each family's individual needs and provide a safe space for processing emotions and overcoming challenges.
3. **Attachment:** Adopted children may experience disruptions in early attachment relationships that may impact their ability to form secure bonds with their adoptive parents. Psychological services can provide interventions that focus on promoting healthy attachment and bonding between the child and his or her new family. These interventions

may include instruction on building trust, creating a nurturing environment, and improving parent-child interactions.

4. **Trauma-Informed Care:** Many adopted children have experienced trauma or loss prior to their adoption. Psychological services can help adoptive families understand and cope with the effects of trauma. This may include trauma-focused therapies such as Eye Movement Desensitization and Reprocessing (EMDR) or trauma-focused cognitive behavioral therapy (TF-CBT) to help the child process and heal from their past experiences.
5. **Collaboration and coordination:** Psychological services should collaborate with other professionals involved in the adoption process, e.g. Adoption agencies partners and social workers and medical professionals. Joint efforts can ensure a holistic approach to addressing the needs of adoptive families and facilitate a coordinated support system.
6. **Identity Formation:** Adopted children often struggle with questions about their identity and their birth family. Mental health services can provide support in addressing these complex issues and help children develop a positive sense of self and understand their unique adoption story. Additionally, counseling can help parents create an open and supportive environment in which their child's questions and feelings related to his or her adoption can be discussed.
7. **Parental support and coping strategies:** Adoptive parents may face various challenges during their parenting journey. Psychological services can provide ongoing support, guidance, and coping strategies to help parents navigate these challenges effectively. This support can range from individual advice for parents to support groups where they can network with other adoptive families and share experiences.

8. **School and social support:** Adopted children may encounter particular challenges at school and in the social environment, such as identity issues, belonging or teasing from peers. Psychological services can work with schools and provide advice to educators and other professionals involved in the child's life. The goal of this collaboration is to create supportive environments that meet the unique needs of adopted children and promote their social and academic well-being.

Overall, psychological services play a vital role in supporting adoptive families by addressing the unique challenges they face. By providing pre-adoption preparation, promoting healthy attachment, addressing trauma, supporting identity formation, offering parental support, and collaborating with other professionals, psychological services contribute to improving the outcomes and well-being of adopted children and adolescents.

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Appendix A
INFORMED CONSET

Informed consent for Adoptive parents

My name is Robel Solomon, and I am a post graduate student at Addis Ababa University School of Psychology. I am conducting a qualitative study on the psychological services render during post placement for adopting parents and adopted children. I am conducting this study for partial fulfillment of my Master's degree in Counselling Psychology.

The purpose of this study examines the post placement services provided by BCSG as a way of enhancing bonding and attachment between the foster/adoptive families and their children. You have been invited to take part in this study because you have adopted a child /child through domestic adoption. If you decide to take part in this study your participation will involve an in-depth interview about your overall experience of being an adoptive parent. Either you or your spouse can be interviewed.

The interview will be tape recorded and it will approximately take 45 minutes to an hour. The information you disclose to me is strictly confidential. It will not be passed to any third party nor shall it be used for purposes other than this research. Your name shall not appear in any documentation upon which this interview is based.

There is no direct benefit for participating in this study except knowing your participation and the information you provide will be vital to improve the agency's services, policy makers , child care institutions other researchers and other prospective adoptive parents who are wanting to open their homes and hearts for children in need just like you did. Your participation in this

study is completely voluntary. You can choose not to answer certain questions or withdraw from the interview anytime.

By signing below, you will be indicating that you have read and understood the above Information and you are interested in participating in this study.

Name _____ Signature _____ Date _____

Appendix B

Interview Guide for the agency workers

- I. Background about the interview
 1. Sex
 2. Age
 3. Education level
 4. Responsibility
- II. Interview Guide Questions
 - A. General issues and services
 1. When did the agency start operating in Addis Ababa?
 2. Where do you find these orphans and vulnerable children that are in your agency?
 3. When did it start placing children for local adoption?
 4. What is the age range that your agency considers for children to be adopted? Why?
 5. What is the overall adoption process and procedures in domestic adoption?
 6. Do the employees in the agency clearly know what adoption is? Characteristics, problems...Could you tell me their training and competency level?
 7. Does the agency consider the mental status examination in the intake criteria?
 8. Does the agency have employees with psychology expertise background and intervene whenever challenges arise?
 9. What services are provided by the agency?

B. Psychological challenge during post placement.

1. What challenges are mainly reported from parents during placement?
2. What are the psychological challenges faced by the parents and the adopted children?

C. Psychological services

1. Does the agency have criteria for both parents and children for the adoption?
2. Do the selection criteria consider the mental status of both the child and parents in the adoption process?
3. What services are rendered before placement and why?
4. What psychological/counseling services have been rendered to the adopting parents and adopted children and why?
5. What do you think are the strengths and weakness of the psychological services rendered so far?

➤ Strengths

➤ Weaknesses

D. Contribution of the psychological services

1. What are the contributions of the psychological/counseling service for the families?
2. Do you have encountered any challenges that are improved by the psychological services provided by the agencies?
3. What feedback obtained in the psychological services rendered by the agency?

➤ Positive feedback

➤ Negative feedback

4. What success and failing stories?
5. What success stories do you have

6. What failing post placement cases and what do you think are the reasons?

E. Managing challenges

1. What do you say about the future strategies to manage psychological challenges of the agency to include in the process of domestic adoption?

Appendix C

Interview Guide for adopting families

A. Background about the interview

1. Sex
2. Age
3. Education level
4. Responsibility

B. Interview Guide Questions

I. Psychological challenge

1. What were the major psychological challenges after the child was brought home?
2. How did you overcome them? What were your coping mechanisms?
3. After the adoption is completed, are there any follow-up reports that you need to send to the agencies or the BOWCYA office?
4. Have you thought about how to tell your child that they have been adopted? Or is this something you don't consider? (probes: when do you think is the right time? how did you plan it?)
5. Have you done any mental status examination as a criterion along with biological examination and household income study?
6. How prepared do you feel to answer your child's questions about adoption? (about the family background of the birth, reasons for giving up or placing in the orphanage, your reason for considering adoption)
7. Do you know anything about your child's birth parents that you can share with your child?

8. Do you anticipate any challenges that might come in the long run?
9. How do you plan to deal with these challenges?

II. Psychological services

1. How prepared was your family to welcome the new child into the family? (probes: things you wanted to change, housing, lifestyle, informing other siblings about the adoption)
2. Where were you less prepared?
3. How did you manage to fill in the gaps?
4. How was the transition? rough smooth? (Why rough/smooth?)
5. What mechanisms were used to facilitate the transition?
6. Contribution of the psychological services in the postplacement.
7. Did you receive any psychological support during adoption and postplacement?
8. What are the psychological services you have been receiving during the postplacement?
9. How do these psychological services contribute to the adoption process and development of child-parent relationship?
10. Have you ever faced any psychological or behavioral challenges that are improved by psychological interventions?

III. Strategies to overcome the challenges

1. Have you ever received any awareness about behavioral/psychological issues in relation to adoption?
2. What do you suggest that must be improved to enhance child-parent relation and appropriate attachment?
3. What services have to be included during post placement by the agency?

Declaration

I, Robel Solomon, hereby confirm that this thesis in the title “psychological services rendered to adopting families and adopted children after post placement in Bethany Christian service, Addis Ababa” is my original work and has not been presented for a degree in any other university, and all sources of material used for the thesis have been duly acknowledged.

Advisor

Signature: _____

Signature: _____

Name: _____

Date: _____

Date: _____