



In what way does a specialist parenting programme impact on adoptive parents' perception of their capacity to parent?

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## **In what way does a specialist parenting programme impact on adoptive parents' perception of their capacity to parent?**

**Linda Mullineaux**

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The reports were completed between September 2009 and February 2010 and apply a wide range of research methodologies. They are not intended to be longitudinal research reports but they provide a snapshot of the views and opinions of the groups consulted as part of the studies. As these projects were time limited, the evidence base can be used to inform planning but should not be generalised across the wider population.

These reports reflect the views of the practitioners that undertook the research. The views and opinions of the authors should not be taken as representative of CWDC.

A new UK Government took office on 11 May. As a result the content in this report may not reflect current Government policy.

# **In what way does a specialist parenting programme impact on adoptive parents' perception of their capacity to parent?**

**Linda Mullineaux**

## **Abstract**

Adoption Matters is a specialist voluntary adoption agency which operates in the north-west of England and north east Wales. In 2009, in recognition of the increasing challenges presented by children currently being placed for adoption, many of whom have a history of abuse, trauma or neglect, the agency developed a specialist parenting programme to assist adoptive parents in meeting children's needs.

This research focuses on testing how effective the programme was in enhancing the adoptive parents' skill and confidence in parenting and, more specifically, whether it helped them in the development of their relationship with the child.

Adoptive parents were asked to complete two questionnaires, one to be completed in advance of the training programme and the second on completion of the programme. Six parents returned the questionnaires. The questionnaires focused on assessing any changes in the parent's feelings of competence in their parenting after attending the parenting programme.

After attending the parenting programme, a focus group was held with three parents. One to one interviews and a telephone interview took place with the parents who could not attend the focus group. The interviews and the focus group covered four key areas:

- Their experiences of preparation training
- Satisfaction with the training
- Optimum time for attending the parenting programme
- Flexibility in delivery

The parents were in general agreement that their preparation training had not prepared them for the reality of parenting by adoption. However, they also felt that acquiring skills to handle difficult behaviour would not be easy to achieve without a child in placement. Because of this the parents felt strongly that support of this type should be readily available to adopters following placement of a child. Mostly they were in agreement that the training should be delivered approximately three months into placement. All the parents considered the parenting programme had given them a greater understanding for what drives their child's behaviour and this knowledge had helped them to be more receptive to their child's needs and respond with greater sensitivity. Several parents reported positive changes in their relationship with their child and seeing positive reactions from their child to the new parenting techniques being used. This would suggest that parenting programmes are valuable in increasing an adopter's confidence and satisfaction in parenting.

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# **Introduction**

## **The setting**

Adoption Matters is a specialist voluntary adoption agency which operates in the north-west of England and north-east Wales. The agency incorporates Blackburn Diocesan Adoption Agency and Chester Diocesan Adoption Services. The agency has a combined history of over 110 years and has been at the forefront of innovation in adoption service development. The agency's approach focuses on the potential of families to provide homes for children with complex needs. Family placement is the agency's core area of work and the agency is committed to the development of its adopters' training needs. In 2009, in recognition of the increasing challenges presented by children currently being placed for adoption, many of whom have a history of abuse, trauma or neglect, the agency developed a specialist parenting programme to assist adoptive parents in meeting children's needs.

## **The aims of the project**

All adoptive parents will have attended a preparation training course prior to a child being placed in their family; however, our experience has informed us that it is when a child is actually living with the family that training of this nature becomes particularly meaningful. This four day programme is in addition to the preparation training and is offered to adoptive families in the early stages of the placement of a child with a family.

The aim of the parenting programme is to heighten parents' awareness of the historical antecedents of children's behaviour and provide them with opportunities to foster relationships.

The aim of the research is to evaluate the impact of the programme from the adopters' perspective in order to learn from them whether they feel the programme meets its stated objectives. The hypothesis is that attending a specialist parenting programme will improve the adoptive parents' skill and confidence.

## **Context**

The focus in adoption today is on the long-term welfare of the child. Successful adoption provides a child with a permanent home which is secure and meets the child's individual needs. It has become increasingly evident that, for this to happen, attention has also to be paid to the needs of the adoptive parent, Archer and Burnell (2003)

A long awaited reform of adoption law became a reality with the Adoption & Children Act 2002. With it came the 'recognition that participants in adoption may require support at any stage in the whole process,' Rushton (2003a p51.) To achieve its aim of reducing the numbers of children left waiting in the care system, the Government introduced initiatives, targets and monetary incentives to increase the number of adoptions. To succeed in making adoption more attractive to potential adopters and to meet the often diverse and complex needs of those affected by adoption and to improve outcomes, the Government raised the profile of adoption support by placing a duty on the local authorities to provide adoption support services designed to meet the needs of all those affected by adoption.

Central to the changes in adoption legislation was parenting. Supporting parents and carers has been increasingly seen as the optimal solution to achieving social development and social change in matters of child welfare. In adoption, research suggests that poor outcomes for children are linked to poor parenting; in particular, a parent's responsiveness to difficult behaviour (Adoption Now: Messages from Research, 1999).

The majority of the children placed for adoption today are from the Children Looked After System and their early life experiences of loss and trauma makes them particularly vulnerable to developing emotional and behavioural problems. In the last decade convincing evidence from neuroscience and developmental research, strongly influenced by Attachment theory, has helped make sense of the plight of many adopted children. Responses from health and social services since 2002 reflect the growth in understanding and the higher regard of the challenges that await adoptive families.

It is now widely accepted that these challenges have to be taken into account when preparing and supporting adoptive parents. Lindsey (2006, cited in Kenrick, Lindsey, and Tollemache 2006 p.8) suggested that adopters may feel disempowered and challenged if they are not given the information and skills they need to carry out the task. The recognition that many adoptive families may need help in responding to children whose challenging behaviour could result in family breakdown has prompted health and social work practitioners to explore and develop a variety of approaches to support adoptive families.

As part of a research initiative to examine how adoption legislation and practice is being translated into practice, Rushton and Monck (2009) made an analysis of two programmes designed to support adopters who were facing serious challenges from their children's behaviour. They found some evidence to support the view that parents were satisfied with the parenting advice and also that there were positive changes in parenting. In line with these findings they suggested that it would be reasonable to encourage further development of this approach.

The use of groups to train or educate parents has continued to grow and, according to Margaret Bell (2007), their success is generally positive. Exploring a study made of six Webster Stratton community based parenting programmes, she found that they can be preventive and restorative and the key to success lay in the open access community based delivery. However, the Tavistock Clinic, in their work with foster, kinship and adoptive families, found that many of the parents had experienced dissatisfaction with non-specialist community based parenting programmes. The parents reported that their sense of isolation and difference was made worse by a lack of understanding within the groups for the differences that parenting by fostering, adoption and kinship care brings.

Alongside their clinic work, the Tavistock Clinic included in their treatment programme a parenting programme for foster, kinship and adoptive families. Designing the programme around their knowledge of the specific needs of such parents, they found that the parents gained confidence from making connections with others in the group and they reported that considerable improvements were made in the parent-child relationship, (Granville and Antrobus, 2006 cited in Kenrick, Lindsey, and Tollemache 2006, ch.14)

Rushton and Monck (2009), reporting on adoptive parents' comments about their preparation training experiences, found that for most parents the training had not been helpful in developing

the parenting skills for managing difficult behaviour. Such findings are important when considering the training needs of adopters and consequently this is the focus of this study.

## **The Parenting Programme**

Parenting Transitions is a specialist parenting programme newly developed by the agency for adoptive parents. The programme is aimed at adoptive families in the early stages of the placement of the child with the family. This is a training programme which has been developed in recognition of the increasing challenges presented by children currently being placed for adoption, many of whom have a history of abuse, trauma or neglect. The programme has a theoretical basis in attachment theory. The aim is to assist adoptive parents in understanding how the child's early experiences may have affected their ability to develop secure attachments within the adoptive family. Although the families will have previously attended a preparation course, it is our experience that it is when the child is actually living with a family that training of this nature becomes particularly meaningful. The programme aims to help adopters to develop practical skills in interacting with their children using play and narrative techniques<sup>1</sup> that are known to be effective in facilitating the development of healthy relationships. This is an important predictor of placement stability (Selwyn et al, 2006).

The parenting programme was designed to deliver an educational element in the first two days and provide experiential learning, using play and narrative techniques, in the third and fourth days. The content of the programme is as follows:

Days one & two:

'Getting to know you' exercise and introduction to the programme. Understanding attachment, trauma and insecurity. Understanding how bad experiences affect learning and development, children's survival strategies and defensive reactions.

Days three & four:

Understanding how children develop new relationships. The value of play, Life Story work and narrative techniques. Evaluation and ending.

The rationale for the programme incorporates elements of both a cognitive behavioural and educational approach.

## **Procedures**

Consent to carry out the research was given by the agency's Chief Executive. The situation regarding governance within the agency did not present any difficulties. However, as many of the children in placement were not yet adopted, the local authorities with responsibility for their care were informed of the research and gave their consent.

## **Methodology**

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<sup>1</sup> Play techniques are based on the principles of Theraplay®<sup>†</sup>. Theraplay® is a registered service mark of the Theraplay Institute. Narrative techniques are based on Attachment Narrative Therapy (Lacher, Nichols and May, 2005).

This was a qualitative study. The emphasis was on whether adopters felt the training had been useful in enhancing their skill and confidence in parenting and, more specifically, had helped them in the development of their relationship with the child.

Parents invited to attend a parenting programme were also sent an invitation to take part in this research study.

Parents who attend a parenting programme are nominated by their social worker. The social worker provides information about the programme to the family. With the parents' agreement the social worker and/or parent completes a referral which provides the trainers with details about the family and child. In selecting the parents, first consideration was given to the most recent placements. Consideration was then given to families where children had been in placement for a longer period but were known to be experiencing problems in developing attachments within the family.

Parents<sup>2</sup> who were invited to attend the programme were provided with the details of the research proposal and asked to give their written consent to take part. They were told that the parenting programme is a new development for the agency.

In total, six out of the seven parents attending the parenting programme consented to take part in the research study.<sup>3</sup>

In families where there were two parents, both parents were invited to attend the parenting programme. However, because of work commitments and not having any holiday leave left, three attended the training without their partners. The parents attending the programme were informed that there was a risk that, following the programme, the parent who has attended the training would parent in a different way than their partner. On balance both trainers and parents felt the benefits of attending the training would be more important than the potential for risk.

**Table 1. Summary of demographic information provided by the parenting programme referral**

Family composition	4 couples (3 adopters' partners could not attend) 2 single adopters
Gender of parents	4 females and 3 males
Number of children	The 4 couples :    1 had 4 children 1 had 3 children 1 had 2 children 1 had 1 child 2 single adopters: 1 had 2 children 1 had 1 child
Age range of children	2 – 9 years
Gender of children	7 boys and 6 girls
Length of placement	Ranged from 5 months to 3 years.

<sup>2</sup>Parents were told that participation in the parenting programme did not necessitate participation in the research.

<sup>3</sup> At the end of the programme the parent who had chosen not to take part in the research study asked to attend the focus group and for her views and feeling about the programme to be included in this report.

## **Data was collected in four different ways:**

- Adoptive parents were asked to complete two questionnaires, one to be completed in advance of the training programme and the second on completion of the programme.
- A focus group was conducted with three parents (this included the parent who had initially declined to take part in the research study).
- Face to face interviews were conducted with two parents
- A telephone interview was conducted with one parent.

## **Questionnaires**

Parents who had agreed to take part in the research project were asked to complete a questionnaire in advance of the parenting programme. These questionnaires were sent out by an agency administrator on receipt of the parents' consent form.

It was felt that the Parenting Sense of Competence (PSOC)<sup>4</sup> questionnaire would assist in assessing any changes in the parent's feelings of competence in their parenting after attending the parenting programme.

'The PSOC produces two sub-scales reflecting (a) Efficacy – skills and knowledge, and (b) Satisfaction – sense of being comfortable in the parenting role. It is based on 17 statements with Likert scaling<sup>5</sup> from 'strongly agree' to 'strongly disagree'. For some questions the scores are reversed so that, for all items, a higher score indicates higher parental self-esteem', (Ohan et al, 2000, cited in Rushton and Monck 2009 p.42). The questionnaire is given in full in Appendix A.

## **The Focus Group**

To compliment and gain a better understanding of how the parenting programme might be linked to a change in parenting and child responses, the parents were also invited to take part in a two hour semi structured focus group, three weeks after completing the training. This was taken up by three of the parents. One of these three parents had declined to take part in the research study prior to the parenting programme; however, at the end of the parenting programme, she asked to join the focus group and gave permission for her feedback to be included.

Three parents were unable to attend the focus group because of lack of child care support. Two agreed to a one to one meeting with a researcher and the third agreed to a telephone interview. The focus group, the one to one meetings and the telephone interview addressed four key areas:

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<sup>4</sup> The PSOC was first developed for new mothers by Gibaud-Wallston and Wandersman (1978), but later adapted for use with parents of children aged 4-9 years by Johnson and Mash (1989)

<sup>5</sup> A Likert scale, named after its inventor, psychologist Rensis Likert, is a psychometric scale commonly used in questionnaires.



- their experiences of preparation training
- satisfaction with the training
- optimum time for attending the parenting programme
- flexibility in delivery.

The questions are detailed in Appendix B.

## **Findings**

Although the sample is relatively small, the data is complete. All the parents attended and completed all sessions of the four day parenting programme. The data was analysed by the lead researcher and comparisons were made between the scores of the two PSOCs and the feedback discussions from the focus group, one to one meetings and the telephone interview.

The results of the questionnaires, the focus group and the interviews are presented below under key headings.

### **Parenting Sense of Competence Questionnaires**

The questionnaires, completed by six parents, indicate that the Parenting Satisfaction score increased after attending the programme. There were higher scores in 'Satisfaction' in 54 per cent of the items (23 per cent of the items had a significantly higher score). Thirty nine per cent of the items remained the same and only seven per cent of the items scored lower. It is reasonable to regard these changes as attributable to the parenting programme.

The Parenting Efficacy score had higher scores in 67 per cent of the items in the questionnaire completed after attending the programme. This suggests that the parents were feeling more competent and familiar with parenting.

### **Focus Group, One to One Meetings and Telephone Interview Feedback**

Using a semi structured approach, researchers asked the parents for their views and feelings on the parenting programme. Direct quotes are indented.

The parents were reminded that the aim of the research study was to explore the training needs of adoptive parents and therefore it would be helpful to know of their experience of preparation training.

#### **Did you feel the preparation for adoption training prepared you for adoption?**

The parents' feedback shows that those who had children placed within 12 months of attending preparation training were more satisfied with the training. However, these parents still felt the training did not prepare them adequately for the reality of parenting, saying for example:

'The training was useful but he found the parenting programme much more useful'.

Another parent said:

‘I think the training was useful but I think prospective adopters are full of their own self importance and naive about the reality of adoption’.

This parent was not approved by our agency and came to us for post placement support:

‘Preparation training was seven years ago. Four years after I applied, I got the children. I have had the children three years and there has been no top up except for a day on attachment from a specialist in attachment. This expert said “don’t place these children with a single carer”. They did talk about attachment but it did not prepare me for the scale of the problems. In the first year I was black and blue from behaviours from one child. There was no preparation for the challenges of behaviours.

I was not given relevant information about the children’s history and I felt unprepared for the level of behaviour difficulties and I was not given advice on dealing with sexualised behaviour’.

A single parent with one child says:

‘It did not provide me with the knowledge and skills I think I needed. This might be because I waited 18 months for a placement’.

### **Do you feel parenting programme was helpful in these areas?**

The parents were asked what they found most useful and what was least useful in the parenting programme. Some parents provided very carefully considered feedback whilst others were less expansive. Their feedback shows that the sessions were well received and highly relevant. There was some general agreement on what was less useful and what they had found most useful.

A parent with two children comments:

‘I really enjoyed the getting to know you exercise; being a single parent and also being new to the agency, I had felt a bit of an outsider.

The attachment theory helped me to understand what had caused my children’s difficulties. It made me realise that they are at the heavy end. The first two days made me worry as my kids seemed to have all the issues and I wondered if I could cope. Because of the one week break between the first two days and the second two days of training, I could have done with a trainer or my social worker contacting me between the second and third days to talk about how I was feeling after day two. I would have preferred the training weeks to run consecutively.

It was only on the last day that we really got to talk about our parenting experiences. The ‘mindful parenting’ section was needed as it made me realise that our parenting can have a negative impact. The narrative section has been very useful; I have used the claiming story ideas. The Theraplay section was good but it was difficult to practice play activities with another parent. I feel less stressed and now understand their behaviour’.

Another parent said:

'I felt the course enabled you to focus on your child. At the very least it gives you hope that you can get through it. I got an awful lot out of it. I am using the claiming stories naturally now. I am incorporating them into everyday activities with my son and find this a very natural thing to do. Our relationship has grown very close and I can almost see when he is struggling with this closeness. I can see that he is less close to his mum. I enjoyed doing the play activities but it is harder doing this with another parent when you don't know each other.

Since the programme, the way I am with my child is slightly different. My partner saw a difference in how I am with our child almost immediately. She is interested in Theraplay and would like to attend the training. Her not having attended with me is not a huge problem as we back each other up.

I liked having the first week break in between the first two days and the second two days as it gave me time to think'.

I would have liked more discussion time in the programme'.

This parent was satisfied with the content of the programme but preferred the practical and interactive sessions in days three and four. A quieter member of the group she found sharing information about herself in the 'getting to know you exercise' difficult:

'It helped to identify serious issues and helped to re-focus on the kids once they were in placement; not that I'd forgotten. The attachment theory was useful. I found the last two days more relaxing. I thought the narrative session was useful. I have used story telling with my youngest son and he loved it. I enjoy playing and did not find playing with another parent difficult. I think there should have been more time for the parents to interact.

I have tried to transfer the learning to my partner; he is interested and I think he understands.

I was not sure about the 'getting to know you exercise'.

This parent with two children said:

'My knowledge was definitely increased by the course. I found the course a very useful experience, being with other families in the same situation as you and listening to the examples from other adopters with their children.

I found the session on brain development interesting and seeing the brain scan helped. I have put certain things into practice. I can see that my daughter has missed things. Being on the course has made me more mindful of helping my seven year old with stuff.

I would have liked more time to discuss with the other parents what our children are doing. I felt I could open up to the other parents and it would have been helpful to hear more of their experiences'.

Another parent said:

'I preferred the first two days. The theoretical model was very helpful. The theory has given me an insight into why children behave as they do. It has made me refocus on my child's difficulties and why she behaves as she does. It re-affirmed what I was doing right and what I can change.

I did not feel the programme satisfactorily bridged the theory and practice. I would have liked to have explored Dan Hughes' suggestions more.

I am not sure if it has helped my relationship with my child. There are some differences but I am not sure if these are because CAMHS (Child and Adolescent Mental Health Service) are involved or because of the support I am receiving from my social worker.

This parent had been told by his social worker prior to coming on the programme that he didn't need to attend but he would still find it useful. He said:

'I don't think it was really applicable to me because my son does not have any difficulties. I had read about attachment and had enough knowledge. It legitimised what I was already doing. It confirmed that I was doing okay and has increased my confidence in my parenting abilities.

I am using the Theraplay but incorporating it into everyday situations and not making it stand out as something different'.

This parent said:

'Yes, in terms of increasing my understanding of what might be happening, I gained a lot personally and now look at things differently. The attachment and development part was particularly useful; I found it illuminating.

I found the programme useful as it was a good time to take stock of what was happening with my child. It was beneficial and comforting to hear other parents telling their stories and knowing it was not something that was just happening to me.

I did not feel the first two days' training was adequately bridged with the second two days training. The week in between the second and third day possibly didn't help.'

The parents were asked if this parenting programme should be offered routinely to parents and when would be the best time to attend the training?

Their comments suggest that they had been satisfied with the programme and all felt strongly that this type of training should be available as a matter of course for all adoptive parents.

### **Should this type of parenting programme be offered routinely to parents?**

The parent's comments follow:

'Yes, they need to know because it is better to be prepared if an issue comes up'.

'Yes it should be a follow up to the preparation training'.

‘Yes, the course enabled you to focus on your child and understand their behaviour’.

‘I think this course will be very useful, invaluable for all adopters’.

‘It should be offered to all adopters but if it is not free then it should be offered to those who are struggling’.

‘Yes I do, particularly for those who are experiencing difficulties’.

‘Yes I think it should be offered routinely’.

### **When would be the best time to attend the training?**

This parent felt that in the early days of placement she would not have had the energy to attend the programme. Additionally, her children’s behaviour would have made it difficult to leave them in the care of anyone else:

‘Not three years after placement’.

Another said:

‘It is hard to say, possibly two to three months into placement’.

This parent could recall feeling exhausted in the first few months after her four children were placed:

‘Six to nine months after placement’.

Other parents said:

‘I think adopters should attend the course before the children are placed’

‘Six months after placement. Attending before this could be difficult to manage and you haven’t got a real sense of your child. We had a honeymoon period’.

‘Within three months of placement.

‘Immediately but this is possibly unrealistic. Possibly one or two months after placement and, if this is not possible for the adopter, then they should have the option of doing it later’.

### **Implications for practice**

The findings raise a number of important points and highlight a need for additional specialist parenting training. In respect of preparation training the responses of the parents can be compared to the information collected by Rushton and Monck (2009) in their study of a group of adopters coping with very troubled children. It was generally felt that providing adopters with the skills to handle difficult behaviours would be hard to achieve prior to placement. Rushton

and Monck proposed several options including the shifting of resources forward to the early months of placement and providing continuing assessment and advice tailored to the needs of the parent and placed child.

The research demonstrates the parenting programme unquestionably enhanced the parent's knowledge and understanding of the origins of their child's difficulties and helped them to focus on their child needs. The group learning experience lets parents know that they are not alone and enables coping strategies to be shared. With potential implications for placement stability it makes a strong argument for this type of intervention to be available to parents in the early months of placement and raises the question as to whether this training should be included, as a matter of course, in the adoption support plan.

## **Conclusion**

Overall the parents reported on the benefits of the parenting programme. There appears to have been an increase in both their skills and knowledge and in feeling comfortable in their role as parents. Their increased awareness of what drives their child's behaviour has produced new parenting responses. There has been some reporting back of positive changes in parent-child relationships. Some parents reported positive reactions from their children from story telling and to play activities.

One specific issue received frequent comments; there was not enough group discussion time. This points to the need for follow up support groups that give parents further opportunities to get together to talk about their experiences and difficulties and to gain additional information on strategies for dealing with difficult behaviour.

## References

Adoption and Children Act 2002, (2002), London: HMSO

Bell M (2007) *Community-based parenting programmes: an exploration of the interplay between environmental and organizational factors in a Webster Stratton project*, *British Journal of Social Work* 37, 55-72

Department of Health, (1999) *Adoption Now: Messages from Research*, Chichester: Wiley.

Lacher D, Nichols T, and May J (2005) *Connecting with Kids through Stories: Using Narratives to Facilitate Attachment in Adopted Children*, London, Jessica Kingsley.

Kenrick J, Lindsey C, and Tollemache L (2006), *Creating New Families: Therapeutic Approaches to Fostering, Adoption and Kinship Care*, The Tavistock Clinic Series, London, Karnac.

Rushton A, (2003a), *Local Authority and Voluntary adoption agencies arrangements for supporting adoptive families: A survey of UK practice*, BAAF 27(3) pp. 51-60.

Rushton A and Monck E (2009), *Enhancing Adoptive Parenting: A test of effectiveness*, London, Baaf.

Rushton A and Monck E (2009), *Adopter' experiences of preparation to parent children with serious difficulties'*, *Adoption & Fostering Journal*, Col. 33, Summer 2009, pp. 4-12.

Selwyn, J., Sturgess, W., Quinton, D., and Baxter, C (2006) *Costs and outcomes of non-infant adoptions*, London, Baaf.

Booth P, and Jernberg A, (2010) *Theraplay: Helping Parents and Children Build Better Relationship Through Attachment Based Play*, 3<sup>rd</sup> edition, San Francisco: Jossey-Bass.

## Appendix A -: Parental Sense of Competence Scale <sup>†</sup>

### Appendix A Parental Sense of Competence Scale

#### Parental Sense of Competence Scale

Please ring the score that reflects how much you agree or disagree with the questions below

	<i>Strongly agree</i>				<i>Strongly disagree</i>	
	1	2	3	4	5	6
1. The problems of taking care of a child are easy to solve once you know how your actions affect your child; an understanding I have acquired	1	2	3	4	5	6
2. Even though being a parent could be rewarding, I am frustrated while my child is his/her present age	1	2	3	4	5	6
3. I go to bed the same way I wake up, feeling I have not accomplished a whole lot	1	2	3	4	5	6
4. I do not know why it is but sometimes when I'm supposed to be the one in control, I feel more like the one being manipulated	1	2	3	4	5	6
5. My mother (father) was a better mother (father) than I am	1	2	3	4	5	6
6. I would make a fine model for a new parent to follow in order to learn what s/he would need to know in order to be a good parent	1	2	3	4	5	6
7. Being a parent is manageable and any problems are easily solved	1	2	3	4	5	6
8. A difficult problem in being a parent is not knowing whether you are doing a good job or a bad one	1	2	3	4	5	6
9. Sometimes I feel like I'm not getting anything done	1	2	3	4	5	6
10. I meet my own personal expectations for expertise in caring for my child	1	2	3	4	5	6
11. If anyone can find the answer to what is troubling my child, I am the one	1	2	3	4	5	6
12. My talents and interests are in other areas, not in being a parent	1	2	3	4	5	6



13. Considering how long I've been a parent, I with the role	1	2	3	4	5	6	feel thoroughly familiar
14. If being a parent of a child was more motivated to do a better job	1	2	3	4	5	6	interesting, I would be
15. I honestly believe I have all the skills necessary to be a good mother/father to my child	1	2	3	4	5	6	
16. Being a parent makes me tense and anxious	1	2	3	4	5	6	
17. Being a good mother/father is a reward in itself	1	2	3	4	5	6	

Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<sup>†</sup> Parenting Sense of Competence (PSOC) Ohan et al (2000)

## Appendix B - Focus Group questions:

### **Appendix B** **Focus group questions**

#### **Focus Group Discussion**

1. The aim of the research study is to explore the training needs of Adoptive parents and to evaluate the programme from the adopters' perspective in order to learn from them whether they feel the programme meets its stated objectives.

We are interested to know of your experience of preparation training.

- Did you feel the preparation for adoption training prepared you for adoption?

2. The programme is aimed at adoptive families in the early stages of the placement of the child with the family. The training programme has been developed in recognition of the increasing challenges presented by children currently being placed for adoption and the process of developmental recovery. The aim was to assist you in understanding how the child's early experiences may have affected their ability to develop secure attachments within the adoptive family. It was also designed to help you develop practical skills using play and narrative techniques that are known to be effective in facilitating the development of healthy attachments.

- Do you feel the parenting programme was helpful in these areas?

3. Tailoring adoption support to the needs and availability of adopters can be a problem for agencies.

- Should this type of parenting programme be offered routinely to parents and when would be the best time to attend?

4. The design of the training programme allows for some flexibility for the delivery of the sessions i.e. the first 2 days are educational and build on the information you received at preparation training; the second 2 days are aimed at teaching you new parenting responses. We are wondering if the Programme could be delivered as two modules; for example, providing the first 2 days to all adopters who have been approved and are waiting a placement and then, when a child is in place, the adopters would then attend the 2nd 2 days.

- What do you think about this idea?

The Children's Workforce Development Council leads change so that the thousands of people and volunteers working with children and young people across England are able to do the best job they possibly can.

We want England's children and young people's workforce to be respected by peers and valued for the positive difference it makes to children, young people and their families.

We advise and work in partnership with lots of different organisations and people who want the lives of all children and young people to be healthy, happy and fulfilling.

[www.cwdcouncil.org.uk](http://www.cwdcouncil.org.uk)

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Contact us to receive this information in a different language or format, such as large print or audio tape.

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