

The benefits and challenges of direct post-adoption contact: perspectives from adoptive parents and birth relatives

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Abstract

Adoption in the UK primarily concerns the placing of children from the public care system, often against their parents' wishes. Most such children have a plan for contact with their birth family, and a significant minority of children have direct (face-to-face) contact with parents, grandparents, siblings or other relatives. This paper reports findings from interviews with 55 adoptive parents, and 39 birth relatives, all of whom had experience of direct post-adoption contact arrangements. Thematic qualitative analysis was used to identify the main benefits and challenges of contact as reported by adoptive parents and birth relatives. The key challenges of contact identified were: having personal meetings in impersonal circumstances; managing highly charged emotions; negotiating relationships when you are both strangers and relatives; and managing control, risk and power issues. The four key benefits of contact related to: maintaining important relationships between the child and birth relatives; providing reassurance to the child and birth relatives; helping the child with issues of identity and loss; and helping the child to deal with their dual connection to the birth and adoptive family. Implications for workers supporting direct contact arrangements are discussed.

Key words: post adoption contact; post adoption support, open adoption, adoptions from care, adoptive parents, birth families.

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Introduction

In the UK, where most adoptions that take place are domestic adoptions of young children in the public care system, in the past fifteen years or so it has become usual to consider some form of contact between adopted children and their birth relatives. This move towards contact has been prompted because of concerns that have arisen about the consequences of closed adoption. These concerns relate to feelings of loss and separation and problems in achieving a sense of identity which may be experienced by the adopted person. It is clear that many adopted people have a need to know about their roots, and about why they were adopted (Grotevant, 1997; Howe and Feast, 2003; Triseliotis, 1973). In the absence of any contact with the birth family, these can be hard questions to answer. Even when children are placed for adoption in infancy, adoption related losses such as the loss of genealogical continuity, the loss of biological connection to the adoptive parents, and the status loss of being different from non-adopted peers may prove stressful for children (Brodzinsky, 1990). For children who have established relationships with their birth relatives there are additional concerns that their overt feelings of loss and separation are heightened when all contact with birth family members is stopped. Many children do not wish to lose contact with certain members of their birth family; they may worry about family members and want to know how they are doing (e.g. Mackaskill, 2002; Morgan, 2006; Thomas, Beckford, Lowe and Murch, 1999).

Closed adoption may also be unhelpful to birth family members who must come to terms with the loss of the child, a loss that is both ambiguous and disenfranchised (Neil, Cossar, Lorgelly and Young, 2010) and which is made harder to deal with when there is no information as to what has happened to the child (Howe et al 1992, Neil et al, 2010). Adoptive parents need to integrate the child as a member of their family, but at the same time recognise that their child has differences because he or she is adopted (Kirk, 1964). Closed adoption may be unhelpful as it can promote and maintain a 'rejection of difference' attitude. Adoptive parents need to be open to thinking and talking about what adoption means both for themselves and their child, and willing to communicate with their child about these issues (Brodzinsky, 2005).

In the UK statistics about rates and types of post-adoption contact are not routinely collected, but research suggests some form of contact with birth relatives after adoption is now the norm for at least 70% of children (Parker, 1999). An ongoing exchange of letters and/or cards

and photographs between adoptive parents and birth relatives which is mediated by the adoption agency, usually referred to as 'letterbox contact', is the most usual arrangement (Neil, 2002a). A substantial minority of children will have face-to-face contact with members of their birth family. In Neil's survey of children placed for adoption under age four (Neil, 2002a), 17% were having face-to-face contact with a birth parent or grandparent after adoption. Face-to-face contact seems to be more common for older adopted children (those placed at 5 or older) where about a third or more of children may have a plan for direct contact with an adult birth family member, and possibly a higher percentage will see a birth sibling (Lowe, Murch, Borkowski, Weaver, Beckford and Thomas, 1999; Selwyn, 2004). Where post adoption contact does take place, in almost all cases this is a voluntary agreement between adoptive parents and birth relatives as the courts are reluctant to interfere with the authority of adoptive parents by making legally enforceable contact orders (Pearce, 2006).

Robust research evidence about the long term outcomes of different types of contact is scant, particularly for children placed from public care (Brodzinsky, 2005; Quinton and Selwyn, 2006). Studies do not always distinguish between different types of contact, and the outcomes measured vary but a number of studies have identified some of the benefits and challenges of post-adoption contact. For adoptive parents there may be a greater sense of entitlement and increased sense of empathy for the child and birth family (Berry, Cavo Dylla, Barth and Nedell, 1998; Etter, 1993; Fratter, 1996; Gross, 1993; Grotevant and McRoy, 1998; Lee and Thwaite, 1997; Logan and Smith, 1999; Neil, 2003b, 2007a; Sykes, 2000) and greater satisfaction with the adoption process (Ge et al., 2008). For birth relatives, contact arrangements can help to assuage feelings of loss and promote their acceptance of the adoption (Christian, McRoy, Grotevant and Bryant, 1997; Cushman, Kalmuss and Brickner Namerow, 1997; Etter, 1993; Neil, 2007b; Young and Neil, 2004), and improve post-placement adjustment and satisfaction with the adoption process (Ge et al., 2008). Qualitative research with children and young people suggests that those who have birth family contact are generally pleased to do so and wish such contact to continue (Adoption Policy Review Group, 2005; Smith and Logan, 2004; Neil 2004; Macaskill 2002; Thomas et al, 1999). Children will not however necessarily wish to see every member of their birth family, and typically do not wish contact to continue with birth relatives who have been hostile or abusive (e.g. Macaskill, 2002; Thomas et al, 1999; Wilson and Sinclair, 2004). Children have identified the benefits of contact including: continuing a relationship with a birth

relative to whom the child is emotionally attached, providing reassurance that a birth relative is safe (Macaskill, 2002, Smith and Logan 2004); enabling a child to understand realistically the reasons why he or she was adopted and increasing a child's understanding of a birth parent's difficulties, therefore, reducing self blame (Thoburn, 2004); and assisting with identity issues, particularly when placements are transracial (Fratter, 1996).

Contact is not always associated with positive outcomes. There is evidence that in some cases contact meetings can disturb or unsettle children, especially where children have a background of abuse or neglect and where contact includes relatives who have been involved in the abuse or neglect (Head and Elgar, 1999; Howe and Steele 2004; Macaskill, 2002; Smith and Logan, 2004; Selwyn, 2004; Sinclair, Baker, Wilson and Gibbs, 2005). Contact meetings can be difficult for children because of the poor quality of interaction between the child and the birth relative (Macaskill, 2002; Haight et al, 2002; Neil, 2002b). It is clear from these and other studies that the quality of contact must be considered (Grotevant, Perry and McRoy, 2005; Neil, 2003a; Neil and Howe, 2004; Quinton and Selwyn, 2006). A number of important factors that can determine whether contact is helpful are harmful have been identified (Neil and Howe, 2004; Young and Neil, 2009) and these are briefly summarised below.

Post-adoption contact arrangements appear to be more straightforward the younger children are at placement, the fewer developmental problems they have, and the better the relationship between the adopted child and their adoptive parents. Where adoptive parents have an open attitude, where they can empathise with the child as an adopted person, where they can empathise with the birth family, and where they enter into contact arrangements openly and willingly, contact is more likely to proceed in a beneficial fashion. Contact is more likely to be beneficial to adopted children where birth relatives are able to accept and support the child's connection to the adoptive family. The relationships between the adults involved in contact is also likely to be crucial to the experience of contact for the child (Neil, 2009). Where adoptive parents and birth relatives can relate to each other constructively working together in the best interests of the child, contact is much more likely to be comfortable for the child.

The psychological challenges of managing adoption and contact for all parties in the adoption triangle are arguably most complicated when older children are adopted from public care. To begin with, children

may have experienced abuse and neglect early in their lives (Selwyn, 2004; Rushton, 2009). This can affect their subsequent development, resilience and their relationships (Dozier and Rutter, 2008) and may mean they are ill-equipped to deal with any emotional stresses that contact may bring about. For older children who have established relationships with birth relatives, the cost of cutting contact (in terms of the loss for the child) is highest, yet it is in just these cases that establishing positive contact may be most difficult (Macaskill, 2002; Neil and Howe, 2004; Selwyn, 2004). The children's history and ongoing needs can pose challenges to adoptive parents in managing the connection with the birth family as the sensitive nature of children's backgrounds can make it harder for adoptive parents to be as open as they would like to be with their child (Jones and Hackett, 2007). The birth relatives involved may have high levels of social and psychological problems which can get in the way of their positive participation in contact meetings (Neil, 2002b). The compulsory adoption process may leave them feeling angry and distrusting towards professionals responsible for the removal of their child (Neil, 2007b; Neil et al, 2010), this affecting their willingness to cooperate with professionals involved in planning and supporting contact (Neil et al, 2010). Finally, both adoptive parents and birth relatives may feel forced into accepting the contact plans determined by the agency placing the child (Logan, 2010; Neil, 2002a).

Recent adoption legislation in England and Wales (The Adoption and Children Act 2002) does not include any presumption of contact between an adopted child and members of his or her birth family, but it does require that contact must be considered and decided upon, and that proposed arrangements must be set out in the child's placement plan. As Pearce suggests, "the intention is to ensure that the issue is actively addressed and not sidelined" (Pearce, 2006, p. 145). Decisions about contact should take account of the principle that the child's welfare throughout his or her life should be the paramount consideration. Local authorities have been given a duty to undertake an assessment of need for adoption support services on behalf of adopted people, adoptive parents and birth parents. Local authorities are required to provide assistance, including mediation services, in relation to contact arrangements between adopted children and their birth relatives. In order to provide an effective contact support service, it is important that the service providers have an understanding of what is challenging about post-adoption contact; this understanding needs to be firmly grounded in the experiences of those people directly involved. It is also important that the potential benefits of

contact are understood, and services to support contact should aim to help people address the challenges they face, and to maximise the potential benefits.

The research from which this paper draws was commissioned and funded by the Department for Education and Skills in England and Wales (now the Department for Education) to explore and cost the provision of adoption support services to help birth and adoptive families manage face-to-face post-adoption contact arrangements (full details of the methodology and findings can be found in Neil, Cossar, Jones, Lorgelly and Young, in press). This paper focuses on how birth relatives and adoptive parents experienced having direct contact, in particular what they saw as the main challenges and benefits of such contact.

Method

Participants

The study focused on arrangements where *face-to-face* contact was taking place between an adopted child and one or more members of his or her birth family, and where this contact was being supported in some manner by an adoption agency, or an adoption support agency. We sought to interview adoptive parents and adult birth relatives in such cases. Where contact was taking place between an adopted child and their sibling/s, we attempted to include the parents or carers of the sibling/s, or the sibling themselves if they were an adult. The sample were recruited with the help of eight participating agencies (seven local authority adoption agencies and one independent adoption support agency) who agreed to pass on invitations to take part in the study to all adoptive parents and birth relatives who met the criteria above. Adoptive parents and birth relatives were interviewed twice with an average gap of 16 months between interviews.

Adoptive parents. Fifty-one adoptive parents and four long term-foster parents took part in the interviews at Time 1, a total of 55 interviews (these will all subsequently be referred to as adoptive parents). The foster carers were included because they were caring for the brother or sister of an adopted child who was having face-to-face contact with the adopted sibling. Fifty-one interviews were with mothers and four were with fathers. Fifty-three people (96%) took part again at Time 2. Ninety-one percent of parents interviewed were White and 9% from minority ethnic groups. The majority of parents interviewed (82%) were married, 13% were single parents and 5% were cohabit-

ing with their partner. Many adoptive parents had more than one adopted child, and/or the adopted child had more than one face-to-face contact arrangement. Hence we asked adoptive parents to focus on a contact arrangement for one of their adopted children, and to choose the child and the contact arrangement which they felt was most complex for themselves and the child. Much of the interview then focussed specifically on this particular contact arrangement and one index child. All cases in the study were of domestic adoptions and all except two of the children had been in public care before being adopted. The majority had experienced high levels of adversity in their early lives, and 84% of children had a history of abuse and neglect. On average, the index children of the adoptive parents were 3.7 years old at placement, nine years old at the time of this study, and the average length of time since the children had been placed was 4.8 years. One quarter (25%) of the index children were from minority ethnicity groups (this includes children of dual heritage). The majority of parents (78%) had adopted a child not previously known to them. Six people had adopted their foster child, two had adopted a child from within their birth family, and three people had adopted a child already known to them in some other way.

Birth relatives. Thirty-nine birth relatives took part at Time 1 and 35 were retained in the study at Time 2 (90%). The sample consisted of 19 birth mothers, two birth fathers, nine grandparents, seven adult siblings and two aunts. The majority of these birth relatives (87%) were from the adopted child's maternal family. Just over half of birth relatives (56%) had been the child's main carer prior to adoption. Fifteen percent of birth relatives were from minority ethnic groups; the remainder were White British. The ages of interviewees ranged from 17 to 78. The adopted children these birth relatives were having contact with had all been removed from the birth family under the age of eight, with the mean age at removal being 2.7 years. There was some overlap between the adoptive parent and birth relative samples: of the 94 people we interviewed, 55 of these had a connection to another person in the interview sample.

Interviews and Data Analysis

Semi structured interviews were carried out with adoptive parents and birth relatives, and interviewees were encouraged to answer questions in their own way and in as much depth as they wished. Interviews were fully transcribed and were analysed thematically (Boyatzis, 1998) with the help of Nvivo software and through the use

of detailed case summaries. Initially adoptive parent and birth relative interviews were examined separately to identify the key themes in relation to the benefits of contact and the challenges involved in having contact. This paper reports on a further stage of data analysis: the identification of key themes that cut across both birth parent interviews and adoptive parent interviews and which relate to the benefits and challenges of contact.

Results

Challenges of Having Face-to-Face Contact

Four overlapping themes emerged from adoptive parent and birth relative interviews relating to the challenges of direct contact and these themes are illustrated below.

Personal Meetings in Impersonal Circumstances

The contact arrangements that the children were having with their birth family members varied widely in terms of who in the birth family was involved. The largest proportion of cases (49% in the adoptive parent sample, and 72% in the birth relative sample) involved only adults from the birth family (in most cases birth parents and/or grandparents); other cases (22% in the adoptive parent sample and 18% in the birth relative sample) involved only siblings from the birth family (siblings in foster care or adopted, or adult siblings living independently). The smallest number of arrangements (20% in the adoptive parent sample, and 10% in the birth relative sample) involved the adopted child seeing siblings and adults: these were all situations where siblings remained living in the birth family, for example if the birth mother had another child born to her, or if the grandmother was caring for the adopted child's sibling.

In both the adoptive parent and birth relative sample over three-quarters of contact arrangements were of low frequency (once or twice a year) and of brief or medium duration (up to 5 hours long). In most cases (76% in the adoptive parent sample and 69% in the birth relative sample) there had been no exchange of identifying information (such as addresses, phone numbers or last names) between birth family members and adoptive families - the contact was entirely mediated via the agency. Finally, the vast majority of the contact arrangements involved families meeting at a public venue (for example a park or museum) or a formal venue (for example a family centre) as opposed to meeting

in each other's homes. Only five adoptive parents and one birth relative reported that their (or the other person's) home had been used for contact. In almost all cases adoptive parents were present throughout contact meetings - only three adoptive parents and three birth relatives reported that the adoptive parent was not present for the whole of the contact meeting. The majority of contact arrangements (64% in both samples) were attended by a professional such as the social worker or contact support worker. The adults involved in these meetings almost never saw each other outside of the contact meeting, and had no chance to talk without the child being present.

Many people (especially adoptive parents) saw there to be good reasons why contact was set up in such ways, and they often were not seeking to change structural arrangements. For example, many adoptive parents did not want the contact to be too frequent or to take place in their home. They wanted to maintain some distance from the birth family not just physically, but psychologically: they wanted to be able to feel that they were free to get on with their family life. However although many people were not seeking to make large changes to the form of contact meetings, the way that contact meetings were set up did present a number of challenges to both adoptive parents and birth relatives. Contact meetings are the forum in which the child meets with his or her birth relatives. In ordinary family life, family get-togethers can take many different forms, but generally speaking those involved are well known to each other over many years. Meetings often take place around significant events within the family for example to celebrate the birth of a child, marriages, birthdays, Christmas or other festivals, and so on. Families often meet in each other's houses and get-togethers involve eating, drinking and exchange of presents, often lasting several hours. Between family get-togethers, family members often talk on the telephone or send each other cards, letters or emails. Post-adoption contact meetings could share some of these features, but rarely all. As such meetings could feel 'different' or strange compared to the usual type of family get-togethers people had experienced. Meetings often evoked intense feelings (see below) and therefore felt highly *personal*, but the frequency, duration, and venue of the meeting, together with the presence of a professional worker often served to make meetings feel *impersonal*.

For some people, the short and infrequent nature of contact meetings could contribute to a feeling of pressure. For example one birth father who had annual contact with his children for two or three hours explained: "You're looking forward to it ... then all of a sudden

it's all over. If it was somebody you bumped into on a regular basis it probably wouldn't be quite so bad". Another birth mother explained the pressure she felt to ensure that the small amount of time she had with her children was positive. She said:

"I get so tense, enormously tense, and frightened to death that something will go wrong on the contact. I think what it is, is the expectation that I want everything to be so perfect for the girls ... I want it to be so perfect because it is only once every six months that we get to see one another."

In some cases problems with contact arose when the expectations of the two families about the frequency and form of the contact differed. For example, one grandmother had anticipated that once her grandchildren had been adopted, she could continue to see them a few times a year, perhaps sometimes having them to sleep over. However the adoptive mother had very different views, wanting contact to be just once a year for a couple of hours, supervised at a neutral venue. This grandmother spoke about how the nature of contact did not allow her to have a 'normal' or 'ordinary' grandparent relationship with her grandchildren: "they are my grandchildren and I can't treat them as my grandchildren".

Other birth relatives felt that the infrequent nature of contact had affected their relationship with adoptive parents. For example, another grandmother who felt very distant from the adoptive parents explained, "maybe if I went to their house it might be different, I might get to know them better. But I only see them once a year...we won't be close." Similarly, in a sibling contact case, the adoptive mother explained that her relationship with the other adoptive mother felt "awkward... simply because you don't know them and you've not spoken to them over a year".

Most adoptive parents would not have felt comfortable with contact taking place in their home, but finding the right venue for meetings often proved challenging. It helped if the venue was child friendly with plenty of toys and activities but it was also important that the activities available were ones that could be shared between the adopted child and his or her birth relatives, rather than activities to be pursued individually. For example, one adoptive parent explained how when they had met with their child's siblings at a theme park, instead of interacting together, the children spent most of their time queuing up to go on the rides. Challenges arose when contact involved groups of children who had diverse ages and interests. For example, one of the cases in our

research involved a sibling group of nine children where the youngest child was pre-school age and the oldest was a young adult.

In some cases where formal venues (for example social services' premises) had been used the meetings were uncomfortable and not child friendly. One adoptive mother described how the contact meetings between the child (a baby) and the birth grandmother and sibling was held in a meeting room with no toys and no space on the floor where she could safely put the baby down. Some families found that a more personal or natural feel to contact meeting could be created by using an informal or public venue such as the zoo, play parks or museums. Such venues seemed to work particularly well when people shared an interest in the activities on offer. One adoptive mother described how meeting at the zoo worked out:

"[The children and their birth mother] have something to occupy them. We will wander around and look at the animals and [birth mother] can talk to them about the animals. You know it gives it a social feel, it makes it an easier interaction."

Another adoptive mother decided to change from having contact with her children's birth mother at a family centre to meeting in a restaurant for a meal. She explained that the children were not comfortable in the family centre, a busy, noisy place where they often encountered other people shouting, swearing and smoking. She explained: "so our idea was that if we took them out of that and actually bought were more into what we would normally do with friends it kind of normalises it." Other people also described how they could make meetings feel more natural or personal through the sharing of food or gifts. For example one adoptive mother said:

"We always make cakes and take them along, and the children always do pictures or cards or something, and I always make sure there's lots of photographs and that birth mother can share in what the children had done."

In nearly two thirds of cases contact meetings were also attended by a professional worker and these workers could undertake their role in a variety of different ways. The approach of some workers was to be little more than a benign presence, a passive figure in the background who does not actively intervene in the dynamics of the contact meeting. Another approach was to take on a role of inspection and correction. These workers were described as being alert to conversations and behaviours, stepping in when these became inappropriate. This

intervention was almost always directed at birth relatives and often contributed to a sense of the contact meeting being impersonal or strange. One birth mother described how the contact meeting was attended by three supervisors who “all stood around”, something that she found “100% intimidating”. Another birth relative said that she felt that the contact meetings were like “a prison visit ... you’re not allowed to do that, you can’t do this, you can’t do that, and it’s very, very upsetting”. Other workers were described as having a more positive approach, undertaking actions designed to facilitate the dynamics of the contact meeting. These approaches included managing the beginning and ending of meetings, making sure that these progressed smoothly, or attempting to make contact more physically and psychologically comfortable, for example by providing refreshments or trying to get conversations going between birth relatives and adoptive parents. In some cases workers had an active emphasis on building relationships within contact, for example by modelling play activities for birth parents or guiding the conversations of adults. In such cases birth relatives and adoptive parents described how workers were able to make meetings feel more normal or personal. One adoptive mother explained: “It was more like she was a family friend ... She didn’t say I don’t do this and don’t do that, she just joined in the group, drank coffee with us, and played with [the child] a bit.”

Highly Charged Emotions

For all involved, contact meetings often gave rise to intense and complex emotions, both positive and negative. Adoptive parents described in detail their children’s reactions to contact. Just under half of cases in the sample (25 of 55) adoptive parents did not feel that contact worried or upset their child. They generally believed that contact was something that the child looked forward to and enjoyed. In some cases they described quite intense positive emotions, for example one adoptive parent described how her child was “on a real high... just really happy ... delighted” after seeing his siblings. Another adoptive mother said that her daughter was like “an excited miniature volcano which is ready to erupt”. About the same number of adoptive parents (26 of 55, 47%) described a more mixed picture where children had negative as well as positive feelings associated with contact. For example, some parents felt that contact meetings made their children sad: “he hates goodbyes”; others felt that contact stirred up difficult feelings and memories from the child’s past: “it’s like opening up a wound”; further parents talked about how their child’s behaviour could change after contact, or example he or she would become more clingy or

withdrawn, or angry and defiant: “there was very big fallout”. Finally, a small group of four adoptive parents felt that their child was disinterested or disengaged with contact, as if it was “a chore” or “like going to the dentist”.

For adoptive parents, a key aspect of what was emotionally complex about contact was thinking about and managing children’s responses to contact. It was apparent however that the extent to which adoptive parents felt challenged by their child’s response to contact was determined by the characteristics of the parent as well as those of the child. Some adoptive parents viewed the emotional responses of their child as very much a negative consequence, whilst other adoptive parents saw an opportunity to help a child process their underlying feelings and memories. As one adoptive mother said: “It stirs up memories ... but maybe that’s healthy in itself because I think sometimes there’s a danger that he could bury the memories that actually need to come to the surface for him to deal with.”

Some adoptive parents had to manage their own feelings of sadness or anger in relation to birth relatives. But the most common emotional complexity of contact for adoptive parents (reported in about one quarter of cases) was that contact served to remind the adoptive parent of the child’s connection to the birth family. In some adoptive parents this reminder was painful and difficult: “I get a little bit anxious about [contact]... it’s probably the fact that it is reiterating that I’m not his birth mum”. One adoptive mother referred to how contact made her want to “tighten her grip” on the child, and an adoptive father said how contact meetings made him feel that the child had another family “waiting in the wings”.

For birth relatives, dealing with the reality of the child’s other family also posed emotional challenges. This was often combined with a sense that their own relationship with the child was becoming less and less important as he or she grew closer to the adoptive parents. As one birth mother explained: “basically, the contact is so we don’t lose touch with the children ... but I feel as if I am losing them more and more to the adoptive parents”. In some cases, these feelings eased over time as one grandmother described: “the first contact we had, it was like trying to swallow a big bullet to say ‘your mummy and your daddy’. But now that’s how I think of them even inside my head.” All birth relatives emphasised their joy at being able to maintain some sort of contact with the child. One birth father stated: “I just enjoy every moment, every time I see them ... I love having contact”. But for

many people, contact was a bittersweet experience as birth relatives had to deal with their anxiety about how the meeting would go, and a renewed sense of loss at having to part with their child again.

Strangers and Relatives: Negotiating Relationships

The third key theme relates to how people manage their relationships within the contact network. The connections between children, adoptive parents and birth relatives are in some ways very intimate: the child and his birth family members are of course connected by biology, and sometimes by a shared history. Adoptive parents and birth parents are both parents to the same child, yet in most cases will be complete strangers to each other. Siblings and grandparents in the birth family also have to find a way of relating to the strangers who are now bringing up their brother or sister, or their grandchild. As already discussed, these relationships must be negotiated through the somewhat unusual medium of formal and infrequent meetings, and with a highly charged emotional backdrop. As we have seen, adoptive parents and birth relatives each have to manage their feelings about the other family to which the child belongs. People may also be challenged by the differences in outlook and lifestyle between the two families, and they may feel that, aside from the child, they have little common ground. The relationships between everyone involved are dynamic and transactional, moving in positive directions when people demonstrate trust and respect for each other, but deteriorating in the face of hostility, rivalry or a lack of appreciation for the other person's point of view.

Both adoptive parents and birth relatives discussed the challenges of the relationship between the child and his or her birth relatives. Some relationships between adopted children and their siblings living elsewhere were affected by differences between the children in terms of their ages, gender, and current living circumstances, and by the difficulty of maintaining the connection over lengthy time gaps that to the children could feel like an eternity. One adoptive mother explained that her eight year old son was supposed to meet up with his sister every six months but contact had not happened for over a year. She explained that as a consequence of these long gaps her son did not remember his sister and she said, "if we don't have contact soon, I think that link is just going to go ... it is starting to disappear really". Adoptive parents, when speaking about the interaction between adult birth relatives and the child, often referred to the ability or otherwise of the birth relative to communicate effectively with

the child during the contact meeting, treating him or her appropriately for their age. In some cases, the adoptive parents felt that the birth relative was too pushy, wanting too much intimacy with the child who maybe did not remember them, or was very shy. As one adoptive mother put it: "Sometimes mum and dad overpower her and want to pick her up and want to touch her and she backs off, because she doesn't always remember who they are." Where birth relatives had mental health problems or learning disabilities some adoptive parents felt these issues impacted negatively on the birth relative's ability to relate constructively to the child. In other cases, adoptive parents felt that contact worked well because the birth relative was able to tune into the child's personality and developmental stage. One adoptive mother described the birth mother as having "quite a rapport with him...she does come down to his level, she'll get down on the ground and play a game and he will enjoy that."

Birth relatives also referred to challenges in their relationship with the adopted child. In contrast however to adoptive parents who emphasised issues of capacity, birth relatives often spoke of their difficulties in not knowing what they were, or were not, allowed to do. Birth relatives typically had high anxiety that if they overstepped the boundaries in meetings, they may lose their contact altogether. However, they were unsure where these boundaries lay. For example, one birth mother talked about how the child fell off her bicycle during a contact meeting; she said that her instinct was to pick the child and comfort her, but the adoptive mother quickly stepped in to help the child. Some birth relatives felt marginalised within the contact meeting, as one birth grandmother put it: "The children were running about and doing different things and you felt as if the [adoptive] family was the family and you were the outsiders". Other birth relatives talked about feeling out of touch with their child's interests, hobbies and capabilities.

Control and Power Issues

The backgrounds of the adopted children often included abuse and neglect; as such contact posed challenges in relation to managing risks and boundaries between the two families. About one third of adoptive parents highlighted issues of risk that needed to be controlled. Some adoptive parents were worried about the flow of confidential information to the birth family, for example birth family members finding out where they lived, or learning their last name. This risk was sometimes difficult to control where siblings had contact with each other, as the children would pass on information to each other regard-

less of what the adults wanted. Sometimes adoptive parents were not worried about the birth relatives who were involved in contact, but were concerned that other members of the birth family might pose risks. Because adopted children rarely saw their birth relatives unaccompanied by either their adoptive parents or a professional worker, the risks of children experiencing physical harm during contact meetings were negligible. However several adoptive parents worried about, or had experienced, the child being caused psychological harm during contact meetings. Typically, adoptive parents were worried about comments made by birth relatives indicating their lack of acceptance of the child's position within the adoptive family. For example, one adoptive mother described how the birth father of her teenage son told him that if he was unhappy at home he could come and live with him. One or two adoptive parents were concerned that birth relatives had talked in an unhelpful way to the child about past experiences, in some cases denying responsibility for abuse or neglect. Some adoptive parents described how their child's behaviour could become very disturbed following experiences such as these.

In terms of risk and boundary management, some adoptive parents felt comfortable exercising control of the contact situation themselves. They did not want or feel they needed much help from the agency; as one adoptive mother said "I know my child and what works for her". But other adoptive parents felt relieved when the contact support worker took on the role of talking to birth parents about rules and boundaries, as one person said, "we wanted it taken out of our hands". Where support workers were involved in managing risks and boundaries, adoptive parents had varying opinions on how well these matters were handled. What seemed to work best was where support workers did not focus solely on emphasising the rules, but where they also paid attention to the needs and feelings of birth relatives. Sometimes adoptive parents did not feel the right balance was struck. For example, one adoptive mother felt that contact would work better if the worker was more supportive of the birth mother, saying "she doesn't handle the birth mum as well she should ... it needs to be more gentle". But in other cases adoptive parents felt that the worker was insufficiently controlling, allowing birth parents too much say over contact. An extreme example of this was an adoptive mother who did not attend contact meetings because the birth mother was so hostile towards her. Although she was relieved not to be at contact, she did not feel that her son's welfare was always the uppermost consideration and she argued that "birth mum has too much say in contact ... if she doesn't get her way someone suffers."

The issue of risk looked different from the birth relative perspective. Many birth relatives were acutely aware that they were perceived as a potential risk to the adopted child, and this made them feel uncomfortable and in some cases resentful. Often, as discussed above, birth relatives could feel that the worker attending the meeting played too much of a policing type role. Birth relatives often resented rules about what presents they were allowed or not allowed to give, what questions they were allowed to ask, and how close they were allowed to be to the child during contact meetings. What people found particularly difficult was the imposition of rules which appeared, at least to the birth relative, to be disproportionate to the risks they presented. For example one birth mother wanted to bring her children a basket of fruit prepared for her by a friend who worked at a market. However the social worker insisted that she supervised the purchasing of this fruit, presumably, the birth mother commented ironically, in case she tried to poison the children. Rules and boundaries were easier for birth relatives to accept when they were clear and where their rationale was explained; as one birth mother said: "It's really good to understand what the boundaries are so you don't over step those boundaries". Fear of having their contact further restricted or even withdrawn altogether was common amongst birth relatives who were generally very well aware of their position of powerlessness relative to adoptive parents. One consequence of this was that some birth relatives felt unable to make potentially constructive suggestions for changes to the contact arrangements lest they were seen as being too "pushy".

The Benefits of Contact

Almost all contact arrangements had begun around about the time the child was placed for adoption, and the vast majority were ongoing at the time of follow up. There were five cases in the adoptive parent sample where contact had stopped because the risks were considered to be too great, and the benefits too few, and there were two such cases in the birth relative sample. Almost all adoptive parents and birth relatives identified one or more benefit of having direct post-adoption contact, and in most cases people felt that the benefits of contact outweighed the challenges described below. The benefits of contact perceived by adoptive parents and birth relatives fell into four main categories. Firstly, the **value of contact in allowing the child and birth relatives to maintain their existing relationships** was emphasised. For example, one adoptive mother said about her son, "he loves his mum, he loves his siblings and he just loves seeing them." Birth relatives also emphasised how important it was for them to be able to

maintain a relationship, albeit an altered one, with the adopted child. As one birth mother said, "it would have been terrible not to see her". Secondly, contact was seen as important in terms of **providing reassurance to both the child and the birth relatives about the welfare of each other**. This seemed particularly important for children who knew and remembered their birth relatives, as one adoptive mother put it: "she needed reassurance that her mum was okay". Birth relatives described how contact could ease their worries about how well the child was getting on: "it puts my own mind at ease" said one birth mother. The third benefit of contact was the contribution it made to **helping the child deal with issues of identity and loss**. The following adoptive mother described how direct contact made her son's birth family very real to him: "Contact gives him an insight into who he is and who they are ... [his siblings] are not just pictures ... They are standing next to him and they look like him, and he can see who he resembles". The following quote by a birth aunt shows how some birth relatives saw contact as a way to help children cope with feelings of rejection and loss: "It gives him a feeling that his family did want him, he wasn't just abandoned". The fourth main benefit of contact was that it could **help the child deal with their dual connection to both the adoptive family and the birth family**. Many adoptive parents felt that through allowing and promoting the child's connection to the birth family, this also cemented the child's position within the adoptive family as he or she did not have to choose one family over the other. Many adoptive parents felt that contact also strengthened relationships within the adoptive family. One adoptive mother explained: "I think it actually makes them feel more comfortable in our family ... Every contact we come away feeling more secure really. I mean more certain that they need us as parents and that they are our children." The following birth mother spoke of contact in terms of her showing her approval of the adoptive family:

"I was able to go to my children and say that I have met [the adoptive parents] and they are really nice people and they're going to be a very good mummy and daddy to you, and that was me giving my blessing to my daughters and that went a long way for them - it gave them the opportunity so that they could go forward."

Discussion

Drawing on interviews with adoptive parents and birth relatives this study presents a picture of face-to-face contact between adoptive children and their birth relatives as something which inevi-

tably involves some level of challenge, but which for most people is experienced as beneficial in spite of its complexity. Contact arrangements are frequently emotionally loaded for children, adoptive parents and birth relatives. Building and maintaining relationships between the child and his or her birth relatives, and between the two sets of adults involved, can be difficult because although intimately connected, people are strangers. Adoptive parents and birth relatives do not enter arrangements with an equality of power: adoptive parents can ultimately determine the shape of contact arrangements, and whether or not contact continues, but not all adoptive parents are comfortable with managing the control of arrangements themselves, especially when they perceive there to be risks. Birth relatives have little power and are often highly conscious of this fact. On top of these complexities, the contact meetings themselves often take forms that are unusual compared to ordinary family get-togethers and hence one challenge is coping with the strangeness of the actual contact event.

In some cases the level of challenge in contact arrangements was great whilst other families found creative ways of surmounting challenges and making contact meetings work. Similarly the extent to which people perceived benefits in relation to contact was very variable. Many people emphasised the value of allowing the child and the birth family to maintain their relationship albeit in an altered form and meetings were seen as a way to reassure both children and their birth relatives about each other's welfare. Contact was seen as something that could benefit the child in terms of understanding his or her personal identity and biography and making sense of why they needed to be adopted. The child's relationships within the adoptive family were also seen to be promoted in many cases, reassuring adoptive parents' anxieties or jealousies in relation to birth parents, and giving the child permission to have feelings for both their families.

This study targeted families where some level of contact support was provided by an agency. As such, contact arrangements that were being successfully managed independently by adoptive families and birth families (or between two sets of adoptive parents in the case of sibling contact) were deliberately excluded and it is important to remember that not all post-adoption contact arrangements will require agency support. However, the findings from this study do suggest that face-to-face contact often brings significant challenges and therefore the need for contact support services to be available is supported. A number of suggestions as to the nature of contact support services can be made.

Firstly it is clear that support services must take account of the emotional impact of contact and for all parties support in dealing with this; supporting contact is much more than just an administrative venture. Secondly, that contact is a relationship based process is reinforced (Grotevant, 2009; Neil and Howe 2004; Neil 2009; Smith and Logan, 2004). Birth and adoptive families may benefit from support to build a shared understanding of the goals of contact, to establish collaborative working relationships with each other, and to work out how emotionally close or distant they want to be (Grotevant, 2009). Thirdly, when children are adopted from care the negotiation and management of risks to the child is of great importance. Adoptive parents are ultimately responsible for protecting their children but they may value support from the agency in setting boundaries with birth relatives, and stepping in when things go wrong. It is important however that agencies do not just control or police arrangements, that they are not unnecessarily restrictive with birth relatives, and that the need for rules is explained clearly and sensitively. This is especially important in relation to the supervision of contact, where the role of the worker should be to support and facilitate as well as to control (Bond, 2007). The balance of challenges and benefits may need to be kept under review especially where the former are as many as the latter. In some cases the risks of continuing direct contact may be too great, and some children themselves will want contact to be stopped. In situations such as these, it is important that all parties are not left to deal alone with the aftermath of contact stopping, but that support is available to deal with this inevitably stressful outcome. Finally, birth and adoptive families may need help in working out the nature of the practical arrangements, especially choosing suitable venues, and negotiating rules around the exchange of gifts. The optimal frequency and duration of contact meeting will vary from case to case and will change as children's needs change: families should be involved in negotiating these.

This research does have certain limitations. In particular, the benefits and challenges of contact for adopted children have been described through the eyes of their adoptive parents and birth relatives. These may not always be accurate informants, and it is important that future research includes the perspective of children and young people themselves. The findings from this study may not be transferable to cases where direct contact happens, but families manage this without help, or to cases where no direct contact happens because the risks have been assessed as being too great

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Resum

L'adopció en el Regne Unit fa referència a la col·locació d'infants, des del sistema d'atencions públiques, a famílies adoptives, moltes vegades en contra de la voluntat dels seus pares. Per a molts d'aquests infants hom té un programa de contacte amb la seva família de naixement, i una minoria significativa de nens tenen un contacte directe (cara a cara) amb els seus pares, avis, germans o altres familiars. Aquesta feina presenta els resultats d'entrevistes amb 55 parels adoptius i 39 familiars de naixements que han tingut experiències amb contactes directes postadoptius. El mètode de l'anàlisi temàtica qualitativa va ser usat per identificar els principals beneficis i reptes d'aquest contacte, tal com van ser explicats pels parels adoptius i els familiars de naixement. Els reptes clau del contacte identificats van ser aquests: tenir trobades personals en circumstàncies impersonals; tractar amb emocions fortes; negociar relacions quan hom tracta amb persones que són estranyes, al mateix temps que familiars; tractar amb assumptes de control, risc i poder. Els quatre beneficis clau es referien al següent: mantenir relacions importants entre l'infant i els seus familiars de naixement; donar suport al nen i als seus familiars; ajudar el nen amb assumptes d'identitat i pèrdua; ajudar el nen en la seva relació dual amb la família adoptiva i la família de naixement. Al final, hom discuteix les implicacions per als professionals que treballen en aquests programes de contacte directe.

Paraules clau: contacte postadopció; suport postadopció; adopció oberta; família de naixement.

Resumen

La adopción en Reino Unido hace referencia a la colocación de niños por el sistema de cuidados públicos en familias adoptivas, muchas veces en contra de la voluntad de sus padres. Muchos de estos niños par-

ticipan en un programa de contacto con su familia de nacimiento, y una minoría significativa de niños tiene un contacto directo (cara a cara) con sus padres, abuelos, hermanos u otros familiares. Este trabajo presenta los resultados de entrevistas con 55 padres adoptivos y 39 familiares de nacimiento que han tenido experiencias con contactos directos postadoptivos. El método del análisis temático cualitativo fue usado para identificar los principales beneficios y retos de este contacto, tal como fueron explicados por los padres adoptivos y los familiares de nacimiento. Los retos clave del contacto identificados fueron: tener encuentros personales en circunstancias impersonales; tratar emociones fuertes; negociar relaciones cuando se trata de personas que les son extrañas aunque sean familiares; tratar con asuntos de control, riesgo y poder. Los cuatro beneficios clave se referían a: mantener relaciones importantes entre el niño y sus familiares de nacimiento; dar apoyo al niño y a sus familiares; ayudar al niño con asuntos de identidad y pérdida; ayudar al niño en su relación dual con la familia adoptiva y la familia biológica. Al final, se discuten las implicaciones para los profesionales que trabajan en estos programas de contacto directo.

Palabras clave: contacto postadopción; apoyo postadopción; adopción abierta; familia de nacimiento.