



How do adopted adults see the significance of adoption and being a parent in their life stories? A narrative analysis of 40 life story interviews with male and female adoptees

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ABSTRACT

Being adopted and becoming a parent are both highly significant events in the life course. How adopted people represent adoption and parenthood in their life stories is the focus of the current study. The research explored the views of adopted people who were parents, focusing on those adopted since the late 1980s in order to capture the experiences of people adopted through the child protection system. The participants were 40 adult adoptees who had at least one child. Equal numbers of men and women were recruited, and purposive sampling was used to ensure a diverse range of people were included. Most participants (34 of 40) were in their 20s or 30s and age at adoption varied from 0 to 12 years old. All except one person were domestically adopted in England, with two-thirds having been adopted through the child protection system; 32 were White British, and 8 were Black, Mixed or Asian ethnicity. An adaptation of McAdam's life story interview method was used to enable participants to describe their whole life including their adoption and being a parent. Interviews were first analysed 'within case' looking at narrative themes and structure. Then looking across cases four types of life story narrative were identified: "continuously stable", "pulling through", "still struggling" and "robbed of parenthood". The research illustrates the wide diversity of adopted people's experiences and the ongoing impact of difficult early life experiences on adopted individuals as adults and parents. Parenting raised additional challenges for many adopted people, but could also be a positive turning point. The pathways to overcoming (or not overcoming) early adversity to succeed as parents are illustrated and the role of adoption as both a risk and protective factor is discussed.

1. Introduction

Being adopted and becoming a parent are both life changing events. Although adoption is often described as a 'lifelong' experience (Brodzinsky, Schechter and Marantz-Henig, 1992) its meaning and impact in adulthood, including in the role of parent, is relatively unexamined (Palacios and Brodzinsky, 2010). There is a particular gap in the research on parents for the generation of adoptees who have come to adoption through the child protection system. This study focuses on individuals adopted as children in England since the late 1980s, a time period during which the majority of adoptions were of children from the domestic care system. This group and generation are of particular interest because alongside adoption-related losses they had frequently endured adverse experiences such as abuse, neglect and separation from caregivers. They will have grown up at a time when compared to today,

less was understood about the impact of these adversities on development, and post adoption support services were not well established. They had experienced varied levels of openness with their birth families, in contrast to closed models of the past. How they perceived the effect of these life experiences when they had their own children, and how becoming a parent impacted their thinking and feeling about their adoption (including their birth and adoptive family connections) is explored through a narrative analysis of 20 adopted men and 20 adopted women's life stories. The aims were to understand how adult adoptees experience and feel about their adoption once they become parents, and to understand how they talk about the intersection of adoption and parenting in the context of their whole life story.

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1.1. Adoption – adversity and resilience

How adoption influences and is experienced by an individual is determined by a wide range of risk and protective factors. In terms of risks, adoption begins with separation from birth family and other caregivers, leading to ambiguous and disenfranchised loss (Brodzinsky, 2011; Neil and Beek, 2020). Missing or withheld background information, little communication by adoptive parents about adoption, a lack of birth family contact, and stigma around adoption all create barriers for adopted people in constructing a sense of their life story and adoptive identity: the ‘Who am I?’ and ‘Where do I belong?’ questions (Grotevant and Korff, 2011). Many adopted people have also experienced in-utero harm, abuse and neglect, and multiple moves of caregiver (Tregeagle et al, 2019; Neil et al, 2015). Intercountry and transracial adoptees can experience racism and a loss of ethnic and cultural identity (Baden et al, 2013). For some, further problems occur after adoption including difficulties in the adoptive parent–child relationship and less commonly adoption breakdown and/or maltreatment by adoptive parents (Palacios et al., 2019a; Selwyn et al, 2014; Matthews, 2020). Cumulative and prolonged adversities can have long-term effects on the adopted person’s emotional, behavioural, cognitive, and neurological development and their attachment relationships; adopted adults have an elevated prevalence of mental health problems (Van der Vegt et al, 2009, Melero and Sánchez-Sandoval, 2017), attention disorders (Kennedy et al, 2016), substance misuse (Behle and Pinquart, 2016), attachment difficulties (Raby & Dozier, 2019; Feeney et al, 2007) and suicide (Murray et al, 2022).

In terms of protective factors, adoption can constitute a very positive turning point in a person’s life trajectory, providing stability and a sense of permanence and family belonging (Palacios et al., 2019b). Adoptees can develop more secure representations of attachment over time (Van den Dries et al, 2009). Adoptive parents have a key role in helping their child process adoption-related losses through being ‘communicatively open’ (Brodzinsky, 2005; Ranieri et al., 2022). Safe and meaningful birth family contact can promote adopted children’s well-being (Iyer et al, 2020), and the adopted persons’ satisfaction with openness is linked to better adjustment (Neil et al, 2015; Grotevant et al, 2011). For transracial adoptees, where adoptive parents actively try to help their adopted child with cultural and racial socialisation, this can help build a healthy sense of identity and capacity to cope with racism (Lee et al, 2018). Adoptive parents often provide high levels of commitment to and support for their children, including into adulthood (Ward et al, 2022) although adoption-competent support services continue to be needed by many families (Brodzinsky and Smith, 2019).

The majority of adopted adults express largely positive views about their adoption (Howe & Feast, 2000; ter Meulen et al, 2019), but experiences of adults adopted from care are lacking in research (Sánchez-Sandoval et al, 2020). Negative emotions about mistreatment, loss of birth family, heritage and culture can coexist alongside positive feelings, and a minority of adopted adults feel mostly negative about their adoption (ter Meulen et al, 2019; Borders et al, 2000). Adopted adults’ views of adoption may change over time. For some this may be in the direction of increased positive feelings as people move from emerging adulthood into midlife (ter Meulen et al, 2019; Rushton et al, 2013), but for others a growing consciousness about their own adoption and/or the history and politics of adoption in general can lead to difficult feelings sometimes described as ‘coming out of the fog’ (Newton, 2022). Penny et al.’s (2007) cross-sectional study of adoptees in mid-life described five different ‘phases’ of adoption appraisal, including a lack of awareness, growing awareness often accompanied by feelings of anger and sadness (described as ‘reconstruction’), and finally a balancing of the losses and gains in adoption leading to a sense of peace or resolution. For some a journey of reconstruction through to resolution may occur, for others feelings may vary little over time. For example some people may always feel ‘stuck’ with angry feelings, others have little need to explore their adoption, or consistently feel at peace with their adoption (Penny et al,

2007).

1.2. The experience of adopted people as parents

1.2.1. *Becoming and being a parent*

Becoming a parent is both highly meaningful and positive and demanding and stressful and experiences of parenting are affected by a wide range of contextual and demographic factors (Nelson et al., 2014; Nomaguchi and Milkie, 2020). Childhood adversities can be linked to increased parenting stress (Rassart et al, 2022), parental mental health problems in the transition to parenthood (Christie et al, 2017), and poor parenting including maltreatment (Dixon et al, 2005). However, most parents with a maltreatment history do not abuse their own children, often referred to as ‘breaking the cycle’ of intergenerational abuse (Fonagy et al., 1994).

For care experienced parents, early parenthood is more common than in the general population and parents with a history of abuse/neglect and/or care entry are overrepresented amongst those who have child protection involvement and who lose their children into the care system or adoption (Courtney et al, 2011; Roberts, 2017; Broadhurst and Mason, 2020). But for care alumni, parenting can also be a positive choice, a rewarding experience, and a turning point (see e.g. Dworsky and Courtney, 2010; Chase et al, 2006; Taussig et al 2022).

1.2.2. *Adoptees as parents*

There are two recent systematic reviews of research on adoptees as parents (Despax and Bouteyre, 2019 – published in French; Field and Pond, 2018). Although they come from different perspectives and fields, psychology and counselling respectively, they identify ten studies and four similar themes.

The first issue is that *becoming a parent can reawaken adoption-related issues* such as questions about family/genetic history, or feelings around their own birth and relinquishment. Links between becoming a parent and wanting to search for birth family members (Müller & Perry 2001) or information are noted, often the adopted person’s partner playing a key role in the exploration and construction of the adoptee’s history (Greco et al., 2015). The second issue relates to the *specific challenges that adopted people may face as parents*: insecurity in attachment relationships with partners, children or parents; the heightened importance of the biological link with the child; barriers in the adopted person’s relationship with their adoptive parents, sometimes linked to unresolved infertility issues; anxieties linked to the parenting role such as fears of abandoning their own children. A third theme that Despax and Bouteyre highlight is that *parenthood can be a catalyst for change in relationships with adoptive and birth parents* for example adopted parents may have greater empathy with birth parents’ loss or find it much harder to understand how their parent could have relinquished them. Adoptees may feel distanced from adoptive parents because having their own child emphasises the importance of biology. Finally, *positives of becoming a parent* are noted, for example some adopted parents may feel a new sense of healing, completeness and belonging, and parenting can be a source of resilience.

Both reviews comment on the limitations of the literature highlighting the small and selective samples, the almost exclusive focus on women/mothers (including more recent qualitative studies by Conrick 2020, Despax et al., 2021a, Egan et al., 2022) and the lack of comparisons with non-adopted parents (although see Pérez et al. (2016) and a recent study by Despax et al., 2021b). Most research concerns people adopted in infancy in closed adoptions or intercountry adoptions (Field and Pond’s study exclusively looked at domestic infant adoptions), with the experiences of people adopted from care and those who had more open adoptions being notably absent.

The four themes above suggest a range of interactions between the experiences of adoption as a child and becoming a parent. Questions about the nature of this possible interaction underpin our exploration of how adopted men and women represent being adopted and becoming a

parent in the context of their whole life story. For adopted adults who had experienced a wide range of risks in their lives, we were interested to understand the links they perceived between their early life experiences and their lives as parents, and how both being adopted and becoming a parent may have altered the trajectory of their life story.

2. Methods

2.1. Research design

Concerned primarily with adoptees' lived experiences, their autobiographical memories, and the meanings they make of being adopted and being a parent, the research took a narrative approach. Narrative is defined as "meaning making through the shaping or ordering of experience, a way of understanding one's own or others' actions, of organizing events and objects into a meaningful whole, of connecting and seeing the consequences of actions and events over time" (Chase, 2013:56). We adopted a narrative identity theoretical framework, previously used to study how people remember, identify and make meaning of key experiences, how they exercise agency and how stories of life after adversity are told (McAdams and McLean 2013, Adler et al., 2017). Such a psychological approach has its roots in the humanist tradition: it maintains that human beings are natural storytellers and this creates meaning and builds a sense of self, deemed to be important for psychological wellbeing (McLean and Pratt, 2006). Given that little is already known about the life stories of parents adopted from the care system, the approach taken here is one of narrative in the *context of discovery, as opposed to justification* (see McAdams 2012) – thus examining open ended narratives inductively for broad patterns, themes, images and qualitative characterisations to generate novel insights, rather than hypothesis-testing.

The research was informed by an academic advisory group which met periodically, and which included academics with lived experience of being adopted, or of being an adoptive parent. Two additional 'lived experience' advisory groups were also recruited, one of adoptees who were parents, and one of adoptive parents who were grandparents. The adoptee group consisted of six parents (two fathers and four mothers) whom we consulted at key junctures in the research: design and recruitment, data interpretation and analysis, and latterly on findings, impact and dissemination. Two meetings were face to face, with the last online due to COVID. Members' expenses were covered, and they received £50 for each meeting.

2.2. Participants

Participants were 20 mothers and 20 fathers, adopted in childhood, who had a biological or adopted child (parents with only stepchildren were excluded; 3 parents had adopted child/ren). They came from 38 different adoptive families (two pairs of adopted siblings took part). The study also included 43 adoptive parents who were grandparents; this paper however focuses on the adopted adults only.

The criteria of being adopted since 1989 was used to go back far enough (30 years) to allow for adoptees to reach an age where they may be parents, and to ensure that many care experienced adoptees would be included (without excluding those adopted via other pathways). During the late 1980s-1990s in England, the number of adoptions of 'relinquished' babies was relatively low and most adoptions were of children in care – about 2,000 per year (Performance and Innovation Unit, 2000). This was approximately 4 % of the in-care population, with almost 70 % being under age five at adoption (PIU, 2000). Across this time period the practice of planning for adopted children to stay in contact with birth family members took root, with the majority of adoptees having a plan for indirect (mediated letter) contact with birth relatives and a substantial minority (approximately one quarter to one third) having direct contact with parents, siblings or other relatives (PIU, 2000). It is important to note however that many contact plans were not sustained

over time, effectively meaning many children still had a relatively closed adoption (Neil et al, 2015).

We recruited adopted people with a diverse range of experiences using purposive sampling to ensure that particular types of cases were included (Robinson, 2014). A quota method specifying a minimum number of people within certain categories was discussed with the advisory group of adopted adults. Recruiting equal numbers of men and women and the majority of people adopted through the care system were key goals. Our adoptee advisory group however cautioned against excluding adopted people 'relinquished' as babies, arguing they also had significant experiences to share. To learn about those who may most need support, categories with a minimum quota included: parents not living with their children, parents estranged from their adoptive parents, people adopted age five or older. We also sought diversity in terms of ethnicity and openness with the birth family. The main challenge was including 50 % representation of men as fewer men volunteered for the study. In order to recruit sufficient fathers we relaxed our criteria about adoptions having taken place since 1989 and six men took part who had been adopted before this date.

The adoptee sample characteristics are summarised in Table 1. Most participants (85 %) were in their 20s and 30s with young children at the time of the study. Thirty-two adoptee parents identified as White British. Eight (25 %) were of minority ethnicity (2 = Asian, 6 = mixed ethnic backgrounds) all of whom were in transracial adoptions.

This table shows separately the characteristics of fathers and mothers, important differences being that fathers tended to be older than mothers at the time of interview, though more of them were younger at placement for adoption.

Twenty-six (65 %) were adopted from care and 14 (mostly fathers) were 'relinquished' for adoption. All except one were domestic adoptees. Thirty were adopted alone and 10 with sibling/s. Most were adopted by heterosexual White British couples. For just under half of

Table 1
Characteristics of adoptee parents in the study.

	Whole sample (N = 40)	Fathers (N = 20)	Mothers (N = 20)
Age at interview (years)	21–54 (M = 32.9)	24–54 (M = 37.8)	21–33 (M = 28.1)
21–29	14	2	12
30–39	20	12	8
40–49	3	3	0
50–54	3	3	0
Age when first child born			
14–19 years old	8	2	6
20–29	22	10	12
30–39	8	6	2
40–49	2	2	0
Age at adoption			
<1 year	16	13	3
1–5 years	14	6	8
6 + years	10	1	9
Partnership status (time of interview)			
Single	16	4	12
Married or having a partner	24	16	8
Child(ren) living with a parent (time of interview)			
Child(ren) living with the parent	31	14	17
Child(ren) removed and in care, guardianship or adoption	4	2	2
Living with the other parent	5	4	1
Ethnicity			
White British	32	17	15
Minority ethnicity	8	3	5
Birth family contact			
Closed adoption	12	9	3
Past birth family contact	9	3	6
Current birth family contact	19	8	11

participants, there was ongoing contact (indirect or face-to-face) with their birth family at the time of interview – this included people who had experienced planned contact whilst a child as well as others whose birth family contact only started in their late teens or adult years. The other half either had a closed adoption (i.e. no contact to date) or any birth family contact had stopped. Most adoptees were still in touch with their adoptive parents but five were estranged from them.

2.3. Recruitment and data collection

Two UK adoption organisations publicised the study via their mailing lists (Adoption UK - most of whose members are adoptive parents, and The Post Adoption Centre UK, a support provider working with all members of the adoption triad). The study was also publicised on social media and by word-of-mouth, particularly within adoptive families. Participation was based on voluntary consent, and ethical approval for the study was obtained from the University of East Anglia Social Work Research Ethics Committee. Participants were offered £30 in vouchers for taking part. Interviews were conducted by all three authors, with IS carrying out the most and EN the fewest. Both IS and JR are female, post-doctoral, social scientists, employed as the project's researchers. IS has no personal connection to adoption, but JR is a parent through adoption. JR maintains the view (held by the whole research team) that adoption is a significant, lifelong intervention by the state into family life which warrants a commitment to ongoing research and critique. JR's adoptive parent status was not disclosed to adopted participants, apart from in two cases where participants were already known to her. EN has no personal connection to adoption but has conducted a significant number of studies in the field. Detailed, reflexive researcher fieldnotes were made immediately following interviews and regular team meetings were used to reflexively review each team member's understanding and interpretation of the data. In linked cases (12/20 mothers and 4/20 fathers), where we were also interviewing the participant's adoptive parent(s) (now grandparent(s)) as part of the study, this was mostly known to participants with confidentiality maintained and generational cohorts analysed separately. Interviews themselves were audio-recorded and transcribed verbatim, removing names and all identifying information. Most interviews were conducted privately in the participant's home, but the last four people were video-interviewed (due to COVID lockdown).

An adapted version of [McAdams' \(2007\)](#) Life Story Interview (LSIM) protocol was developed with our adopted people's advisory group. The LSIM is a structured interview but importantly here, does not imply a preferred narrative. It is designed to elicit stories and minimise researcher involvement to allow narratives to flow. Our adapted LSIM schedule stayed faithful to the notion of inviting participants to tell the story of their whole life as if it was a book or a film, broken down into key chapters or scenes, but specifically included being adopted and becoming a parent. This was followed by asking the questions about key events in their life (*high, low and turning points*) and the meaning of these events, but with additional focus on being adopted and parenthood. Finally, we added questions about service needs. We consulted with our advisory group to consider how the LSIM might be experienced by participants and to amend the schedule to meet the aims of the study, and the interview was piloted with two adoptee parents. The LSIM successfully elicited lengthy narrative accounts (1–3 h): rich autobiographical memories with a contextualised focus on participants' adoptee and parental identities.

2.4. Data analysis

"Narratives do not speak for themselves or have unanalysed merit; they require interpretation when used as data in social research" ([Riessman, 2003:2](#)). Narrative research analyses the extended account, rather than fragmenting it into thematic categories. Analysis began 'within case' by two researchers working independently in duplicate on

an initial, diverse sub-sample of cases. This involved close repeat reading of a transcript and fieldnotes, initially examining our interpretations of the data, then exploring narrative themes, tone and imagery - in line with guidance by [Crossley \(2000\)](#). Ongoing reflection and discussion both within the team and in conjunction with academic and adoptee advisory groups, refined and verified our narrative identity approach and established the data analysis protocol. The latter focussed on the trajectory of the life story told ([Gergen and Gergen 1983](#)), how narrative identity is situated and evolves ([Crossley 2000](#)) and the significance, or otherwise of adoption and parenthood as turning points. We also incorporated adapted narrative categories identified by [Adler et al. \(2017\)](#): motivational themes (agency, communion, growth goals), affective themes (contamination, redemption), themes of integrative meaning (e.g. degree of meaning-making) and structural elements of narratives (coherence and complexity). Subsequent 'across cases' analysis was carried out to reveal similar and telling narrative features and help explore the significance of salient issues (e.g. type of adoption, openness in adoption). The participants' adoptive and parent identities were further interrogated, and the intersection between the two informed the understanding of their lives and experiences. At each step, researchers performed validity checks and worked in consensus on cases to verify that all narrative elements and narrative types were accurately identified and represented in the typologies summarised below:

"Continuously stable" (coherent life stories with a predominantly positive tone describing a largely happy childhood through to successful parenting as an adult; adoption and parenthood are both represented positively in the life story with adoption seen as having low significance in relation to the parenting role).

"Pulling through" (life stories with a redemptive arc portraying change and transformation - overcoming of significant adversities to become a good parent despite the odds; adoption may be presented as positive or negative (or both) and the intersection of adoption and parenting issues is emphasised).

"Still struggling" (life stories with a predominantly pessimistic tone; adoption largely seen negatively with an ongoing contaminating influence of adoption-related loss and/or abuse and neglect on psychological well-being and parenting).

"Robbed of parenthood" (stories with a thematically coherent central narrative around past and ongoing difficulties resulting in the unfair loss of their parenting role; redemptive narratives are attempted, though these seem over-optimistic).

In the findings below quotes are described using a code- 'M' for mother and 'F' for father, followed by a number from 1 to 20.

3. Findings

3.1. "Continuously Stable"

I haven't had a traumatic adoption experience ... it's been a fairly normal life for me apart from I've got this one different part of my identity that's kind of interesting (F10).

The six fathers and two mothers in this group were all adopted under the age of two years, the majority having been 'relinquished' for adoption at birth. Their life stories followed a strong thematic narrative line of *a mostly happy, stable life starting in childhood and continuing into adulthood and parenthood*. Life stories were optimistic, but not idealised; ups and downs were described but difficulties had not significantly diverted the positive direction of their lives.

3.1.1. Adoption in the life story

People described mainly *harmonious and supportive relationships* in their adoptive family, often illustrating themes of love and communion with stories such as happy family holidays, or the joy of a brother or sister joining the family: "We kind of did everything together, so it brought us a lot closer as a family and we all have those shared memories" (M09).

They emphasised feelings of *belonging in their adoptive family* and a sense that parents are the people who bring you up: “*when you say a parent, it’s the person who does the parenting*” (F16).

A sense of *never knowing anything other than being adopted*, and adoption feeling “normal”, was commonly expressed.

It’s just the norm, it’s just normal, do you know what I mean? ... I don’t consider it as being any different to anything else. ... I’ve had a great upbringing, I’ve had a great life, I’ve known from day one, but it’s just it’s not an issue (F04).

Adoptive parents were described as being open to helping them talk and think about their adoption, including exploring birth family connections:

My parents were always very open about what happened. That I could go and see my birth parents whenever I wanted. I had a file and I would go through the file and they would always make time to go through it. So, it was always just a very open experience, one that I found really interesting and I was comfortable with (F10).

The significance and emotional tone of adoption in their life stories varied, but *prominent themes of loss, rejection or identity confusion were absent*. Four fathers presented adoption as being neither particularly significant nor problematic: “*it doesn’t bother me, it’s never bothered me*” (F04). Examples of meaning making about adoption were however present in life stories such as questioning if or how issues in their life might be related to adoption. Some found it difficult when other people suggested being adopted was a negative life experience; they wanted their perspective to be accepted: “*This belongs to me. It’s not for you to say*” (F12).

The other four people did include prominent discussion of adoption in their life story, two of these using adoption-related themes to structure their life chapters. The *connections made about the meaning of adoption were largely positive*, for example M09 saw her early adoption as being the defining turning point in her life, offering increased opportunities including becoming an adoptive parent herself: “*it kind of set me up for the rest of my life really*” (M09). F15 described his search for and reconnection with birth family members, as an emotional process, even dramatic, but not negative: “*I think you should be the star of your own show, but it is quite an interesting tale.... I’m kind of drawn to it because there is a drama to it*” (F15). F15’s search for his birth family was to satisfy his curiosity, rather than being driven by feelings of loss, rejection or anger. He had considered the influence of adoption on his emotions and personality: “*I always look at adoption first and go, “Is it that? Is it some deep sense? Is the sand shifting underneath my castle because of that?” but ... I never have found it to be so, so far*”. Others described more *mixed feelings*. F19 felt proud to be adopted as this made him different, but at the same time he linked his lack of confidence to “*the uncertainty of being adopted*”.

Although three people had some ongoing birth family connections, these relationships were somewhat distant or strained and *family narratives centred around the adoptive rather than birth family*. The other five people had not reconnected with birth family, emphasising their lack of felt need: “*It’s a – I don’t know – just a very even feeling or lack of feeling or emotion*” (F16).

3.1.2. Parenthood in the life story

The dominant motivational themes in these parents’ life narratives were love and communion, driven by *the desire to recreate their childhood experiences of unity and togetherness in their own families*: “*I think about [my adoptive mother] a lot and, you know, it was a lot of her caring principles that I kind of relate back to...*” (F10). Although parenthood was sometimes associated with struggles, these were related to *normative domestic stresses rather than adoption*: “*It’s just got normal trials and tribulations being a mother, owning a business, and running a house, it’s just tiring, you know, as it is for everybody*” (M12).

Some connections between parenting and adoption were made such as how to talk to their child about adoption or wanting to know their

medical history for their child’s sake. Two parents who had adopted children felt being adopted helped them understand their child’s needs. Although several parents commented on enjoying physical resemblances with their child, they often qualified the importance of this: “*So, it was amazing to have my own child, but it’s definitely brought it home that blood isn’t an issue.... She’s got her own little personality and all my traits are from my mum and my dad, blood or not*” (M12).

For one father, becoming a parent was a trigger for him to find out more about his birth family: “*having my own children ... I think, cemented my decision to actually start doing something about, you know, looking at my own situation*” (F19). Others now reflected on their adoption differently. For example, F04 talked about his understanding that his birth parents were protecting themselves from loss in choosing not to see him after he was born: “*But, it must be so hard to actually give that child up, ... I was literally born and then taken away, which I can actually understand why from becoming a parent, ... you don’t ever forget [seeing your new-born]*” (F04).

3.2. “Pulling Through”

You know, after all the negativity ... being taken away and stuff, at the end of the day it’s made me a stronger person, and everything is going to be alright (M16).

Eight fathers and 14 mothers narrated *life stories with a redemptive arc*, though sometimes with lingering issues that were still being worked on. Most in this group had been adopted through the care system, 15 of the 22 being aged 2 or older when they were adopted. Their life stories outlined very difficult times (often peaking in adolescence/early adulthood) but they had largely overcome major problems stemming from childhood loss, stigma, abuse and neglect. The impact of adversities described included emotional difficulties (such as feeling rejected, unworthy, angry, anxious or fearful), behavioural issues (most commonly angry and defiant behaviour in adolescence and young adulthood, and/or risk-taking behaviours including substance misuse), mental health problems (depression, postnatal depression, anxiety, “breakdown”, self-harming, including suicide attempts) and relational issues (with partners e.g. neediness/a lack of trust or becoming involved with abusive or controlling partners), with adoptive parents (e.g. pushing them away due to lack of trust, conflict/angry feelings towards adoptive parents particularly in adolescence) or with their own children (finding it hard to bond or an anxious/clingy and overprotective style of parenting).

People referred commonly to a need to ‘break the cycle’ for their children. For some parenthood was an important turning point providing new motivation to address challenges. For others, reaching some stability before parenthood, through the help of partners, adoptive parents, their own agency and/or services had been crucial.

3.2.1. Adoption in the life story

Within their life stories these parents *attempted to make meaning of their adoption, which could be seen as positive and/or negative*. Some people represented adoption primarily as ‘*a better life*’, and they saw the support of their adoptive family as key in overcoming struggles resulting from difficult early experiences.

Well, the best moment of my entire life, I mean, this is aside from giving birth to [my daughter], ... was probably getting adopted ... because as a child in care that’s what you aim for... to one day have a mum and dad who actually like you, at least, and hopefully love you (M14).

Closeness with their adoptive parents may have fluctuated over the years but currently they remained strongly connected to them, in some cases still living with or close to adoptive parents who often had provided high levels of ongoing support when their children were born (particularly the first grandchild). In describing how and why their lives had moved from bad to good, people often gave examples of *adoptive*

parents supporting them despite setbacks and conflicts, understanding their specific needs stemming from adoption.

I was lucky to have such great adoptive parentsmy parents were constantly there and like ...[my mum's] aware of the kind of extra issues that I might face, you know, being an adopted person, so yeah, I think she's always taken that on board and been extra supportive (M05).

Others talked about how although adoption had provided a good family experience for them, **adoption-related loss had contaminated their lives** becoming the major source of adversity to overcome. Some people felt different to their adoptive family, sometimes compounded by differences in race or class: "I don't know whether it would be different if I was adopted into another mixed race family, ... I feel I can never match up to them, because they're this very middle class family, and I've come along" (M16).

Feelings of rejection, abandonment and consequent problems with trust were prominent for some: "It's not that I didn't trust my mum and dad ... But, pushing people away, it's something I have always done, it's scared of being rejected, ...if I'm the one pushing you away you can't reject me" (F03). Feelings of sadness or loss (overt or covert) were often raised: "it always leaves ... left me with that void and hole" (F09), and identity challenges were common: "one of the biggest struggles ... is knowing who you are, what's the real you" (F13).

Where adoptive parents recognised and supported people with adoption-related losses this was welcomed, but for some there were **barriers in communication**: "I think probably the biggest challenge was wanting to know my birth family but not wanting to upset my family" (M19).

For four parents their **progress in life was portrayed as being achieved in spite of their unhappy adoptive family experiences** which in some cases resulted in them re-entering care. The problems described included: adoptive parents who had mental health problems or alcoholism; emotional rejection/lack of unconditional love/physical abuse "she would stand there and say I wish I'd never adopted you are" (F07); lack of openness and support birth family contact.

3.2.2. Parenthood in the life story

Becoming a parent was often linked to overcoming adversities, roughly half in this group saying **becoming a parent was the key turning point in their life**. For many people, their problems had been complex and overlapping. For example, M03 (adopted age 7) described how prior to becoming a mum she was depressed, in an abusive relationship and misusing substances, these difficulties rekindling pre-adoption traumas.

I was really low from around that time, so a lot of drinking going on and then [my boyfriend] introduced me to cocaine ...and it was just horrible... .. I just went into myself again, I disassociated, I just went back into the child (M03).

Parenting provided **a strong motivation to make changes** such as distancing themselves from negative behaviours, situations or relationships (including for several, difficult birth family relationships), or taking steps to address mental health problems, substance misuse, adoption-related loss, and/or negative adoptive family relationships: "It changed my life because I had more responsibility... It sort of grounded me a bit more as well ...it made me grow up pretty quick from being a bit of a boy racer and whatever" (F02). Other key turning points included meeting their partner/getting married or conversely separating from a difficult relationship or achieving independence by going to university or through work achievements. Many parents talked about how their child gave them a new focus, or a valued identity, belonging and sense of self-worth: "I finally felt comfortable in myself as a person" (M14).

The **biological connection to their child was often treasured**: "to meet the first person in my life who's got my DNA that was a huge thing for me" (F09). And several people talked about a new closeness with adopted family members (and for a few also birth family members): "It's like I feel I've melded this family together by having children" (M02).

Parenting also presented new challenges especially the **fear of perpetuating cycles of abuse and neglect**. Some worried that they would not be able to bond with their child, and they would effectively "abandon" him or her as they felt they had been abandoned themselves: "I started to have these ... oh god what if he is born and I don't want him ... I started thinking is it genetic? Is not wanting your baby genetic?" (M10). Others expressed **fears that their child may reject them**: "you are worried that if you come down too hard or firm with your children, that they're going to reject you and leave you" (F13). Some had to **work hard to get close to their children**, for example M02 said her biggest challenge was "learning how to bring down my barriers for the kids". Several mothers had experienced postnatal depression and/or problems bonding with their baby: "I could not bond with her...I didn't know how to parent" (M14). Several parents talked about having an **overprotective or 'clingy' relationship with their children**: "I do wrap them up too much" (M15), or striving for unrealistic standards: "I felt I had to be hundred percent doing everything, ... Be perfect, perfect father, perfect husband" (F13).

But balancing this, parents in this group also talked about their **strong motivation to break cycles of loss and maltreatment**: "I think it's made me want to strive to be the complete opposite that I had, for my children. I don't want them to have to deal with what I had to deal with" (M02). A few parents felt **judged by health or social care professionals and/or adoptive parents** who expected that they would continue the cycle: "I think there is a lot of stereotyping, ...you do feel that you're just being judged" (M16).

The parents in this group considered these difficulties in parenting as being mostly behind them. For some however there was a sense of ongoing struggle, albeit a struggle they felt they were winning (for example feeling that they need to constantly work on not being too overprotective of their child).

3.3. "Still Struggling"

Everything that was good always gets ... something happens and always gets turned upside-down or taken away (F01).

This group consisted of six parents: two mothers, (both adopted at older ages from extremely difficult backgrounds) and four fathers, placed for adoption as young babies. Although their life stories identified positive turning points and personal growth, they all described serious episodes of mental health problems (which they linked to adoption and/or abuse), including anxiety and phobias, postpartum psychosis, suicide attempts or ideation, depression, and schizophrenia. They reported **ongoing significant psychological struggles** (often with low self-worth) and **a lack of resolution of contaminating issues rooted in their adoption**.

The life stories of these parents were patchy as periods or aspects of their life were often not included. Instead **themes such as the impact of rejection/loss or pre-care trauma dominated the life chapters**. The complexity of people's narratives varied, this seeming to depend both on age and how much counselling they had received. The narrative tone of these stories was broadly pessimistic/depressive/negative, although some expressed some sense of hope or agency in eventually processing their issues.

3.3.1. Adoption in the life story

Adoption was rarely represented in a positive way. Two parents appeared to have supportive adoptive parents, but their stories did not strongly feature positive adoption narratives. For the other four parents, **adoption narratives were negative and current relationships with adoptive family members were absent or strained**. One father had experienced the death of his adoptive mother in early life, and the subsequent deteriorating relationship with his adoptive father led to estrangement throughout his adult life. Another father recounted abusive experiences in his adoptive family. As in the "pulling through" group, some parents also talked about **feelings of difference** (for

example in looks, personality, class or ethnicity) to their adoptive parents, and **a lack of open communication and understanding about adoption-related stresses**: “I didn’t feel that they were very open with me, I now feel that I can’t be very open with them” (F11).

Some parents emphasised **problems that pre-dated adoption** (e.g. abuse) which were not resolved through adoption: “I think part of me thought all my problems are gonna be finished now [when I was adopted], ... And it’s not fine” (M17). Others saw their **problems (predominantly feelings of rejection and loss) as caused by their adoption**: “you’re always going to have an empty space in you” (F20).

All parents in this group had **difficult feelings about and/or relationships with their birth families**. Some had had some contact with birth parents, yet this had not brought any sense of resolution:

My birth mum died quite a few years ago, ... I felt a huge let down for, how dare she? How dare she die when I’ve not gotten the answers? ... I got in touch with my birth father, which is one of the worst things I’ve done, I think (M01).

Others in this group had cut off contact with birth relatives, been rebuffed by birth family members, or they had decided not to look for their birth family, fearing the outcome would not be positive.

For some, counselling or therapy had helped them construct **a story linking problems to adoption-related experiences**. For example one father had recently finished a period of therapy in which he explored the impact of the early loss of both his birth mother and adoptive mother: “I didn’t realise how, I suppose, emotionally traumatised I was by my very early years... it was buried deep” (F20).

3.3.2. Parenthood in the life story

Although many cited parenthood as a positive force and they had hopeful dispositions in some aspects of their lives, where they **attempted redemptive arcs in the life story were not coherent or sustained**. The parents in this group all found the **transition to parenting was complicated by their being adopted** and their **parenting had been seriously threatened**, including for one mother the threat of the removal of her children by social services. Often they expressed **high levels of mental distress which they linked to parenthood**, and having no one to share these feelings with:

I just remember thinking the whole way through my pregnancy that I would just never be a good enough mum ... that was just a whole new level of like worrying ... I went on to have postnatal psychosis after the birth of my first son. Which was all to do with just them feelings of not ever feeling like I was good enough because of what I’d been through (M17).

I found it traumatising seeing my children being so well cared for by their mother [...] Because all I really ever, all I wanted was this kind of mothering and soothing [...] seeing what I never got drove me round the bend (F17).

And yet many cited **parenthood as their motivation to live/overcome their difficulties**: “my children were the only things that kept me alive, I mean if I hadn’t had the kids, I would have just done myself in” (F17). Some of these parents reflected critically on how their own needs could negatively affect their parenting: “... needing [my son] to need me as well... so sometimes when he’s hurt, he asks for my dad, and I hate it. Like no, you need me. You need me, what about me?” (M01); “And when my eldest is grumpy or upset or annoyed at me, I experience it as abandonment. So that leads me to a parenting style of being quite permissive, to bond with the kids” (F17).

Relationships with partners were felt by all to be complicated by their adoption-related issues, for example because of their own insecurity leading to clinginess: “I am very, very attached to my husband, ... I’m very attached to him in a way I can’t really be away from him” (M01) or a tendency to accept violence in relationships: “Because I was so desperate to be wanted by everyone that I’d just throw myself at anyone and all my

relationships have been violent” (M17).

Relationship breakdown or divorce from their child(ren)’s other parent had been an issue for most parents in this group. Separation then created new challenges to do with managing the coparenting relationship and/or coping with feelings of loss, anger or abandonment: “I’ve never not wanted [my children] to not know who their parents was because that for me was the hardest ... the hardest thing in the world” (F01).

3.4. “Robbed of Parenthood”

Losing children, ... that wasn’t down to being my fault. It was social services going back on my childhood and what my mum was like (M18).

This group consisted of two mothers and two fathers, all of whom were **living apart from their children** who were in care, adopted or in one case in the guardianship of his adoptive parents. Three were adopted over age 4 after severe abuse and neglect in their birth families, and had numerous problems following from this. One father was adopted as a baby. His key difficulties related to a developmental disability as well as adoption-related feelings of loss. These parents’ life stories revolved around the **central narrative of the loss of their children**, and their view that they had been **judged unfairly**, resulting in them being “robbed” of the chance to parent their children. **Parenthood was conceptualised as key identity** despite not living with their children.

3.4.1. Adoption in the life story

For the three people adopted at older ages, being adopted was met with some initial relief, but did not interrupt **negative chains of events in their lives**. For example, F06 felt that his feelings of stability gained through being adopted were lost when his parents split up:

[being adopted was] the first thing that was whole and complete and happy if that makes sense. [...] But when my mum and dad split up that was a bit crap ..., as a teenager, to me that was the worst thing happening in my life (F06).

M13 initially felt that “*everything was great*” when she first went to live with her adoptive family. However when her adoptive parents had a biological child she felt that she became “*the black sheep*” of the family. She described rising conflict with her adoptive parents who resorted to physical and emotional punishment in response to her disturbed and risky behaviour. After a suicide attempt she was taken into care where she was severely abused. She identified her adoption breakdown as the greatest challenge in her life, seeing this as ultimately leading to the loss of her children:

And then to be put back in the care system and have your whole world turned upside down to then be abandoned by Social Services, the Local Authority, to then them come back in your life and then take away your kids. Like I think the whole system is so messed up (M13).

Conversely M18 presented **an idealised version of adoption** as a defining turning point leading to a happy family life: “I was adopted at the age of six and I grew up from there with the most amazing two adopted parents ever. They’ve always been on by my side no matter what”. But her **narrative about adoption lacked coherence** as she also described high levels of conflict with her adoptive parents, having to leave home at a young age, a lack of support when in great difficulty, and current low levels of contact with her adoptive parents.

For F05 who was adopted as a baby, he felt part of his adoptive family and loved, but he struggled with feelings of **loss, anger and rejection** relating to his relinquishment. He felt he could not share these feelings with his adoptive parents:

Obviously it goes through my head every day, like, what if it was different, if I had my mum, stuff like that? But I don’t like to think

about it because I feel like if I'm thinking about that, I'm letting my adopted parents down.

Birth family connections were largely unresolved. Two parents were looking into their records, or thinking about making contact with birth relatives. One father had met some members of his birth family, but was now estranged from them.

3.4.2. Parenthood in the life story

Being a parent was a highly valued aspect of identity, but **parenting led to high and low points in their life**. M13 said that having children was the highlight of her life, *“the most proudest thing I've ever done and I'll probably ever do”* but the loss of her children was a devastating blow: *“it feels like someone has ripped my heart out.”* Addressing the master narrative of ‘breaking the cycle’, all had a strong sense of their **parenthood having been unfairly lost or stolen**. All had a sense of not having been helped enough to overcome difficulties and they felt their troubled backgrounds meant they were prejudged by professionals.

I could have been a brilliant dad... I could have been a bad dad. Or I could have just been like mediocre, you know what I mean? But like, I don't know.....they've robbed me of that chance pretty much (F05).

Relationships with their child(ren)'s other parent were portrayed as adding to this risk of losing their children. The two mothers had violent partners. F05's partner also had disabilities, and F06's felt his ex-partner's abuse history was held against her: *“my son's mum was subject to sexual abuse when she was a child right and social services turned round and said because that happened to you as a child, you'll do that to your own child”*.

Living apart from their children, these parents struggled to balance their strong sense of parental identity with **a lack of day-to-day opportunities to parent**: *“I'm his dad but I've got no say in anything ... Like a back-seat dad, ...that's the hardest thing about being a parent”* (F05). These parents all **strove to maintain a sense of connection to their children**. F06 had tattooed his children's names on his body and fought legal battles to ensure his status as their father. M13 and M18 hung on to the very limited contact they were permitted with their children who had been adopted, and F05 continued to try and negotiate a role in his son's life.

Despite describing a series of difficult and distressing life events with very recent experience of struggling with unresolved traumas/losses (e. g. “every day is a battle”, M18), these parents resisted casting their life stories as entirely contaminated or pessimistic. They often created **idealised ‘redemptive’ stories**, presenting themselves as survivors, and with a sense of over-optimistic hopes for the future, including the hope of being able to have and keep further children: *“All I know is it's made me a stronger person. So basically, everything that's bad's happened, I turn into a positive because of that experience”* (F05).

4. Discussion

The focus of this article was to explore how adult adoptees experience and feel about their adoption once they become parents, and to understand how they talk about the intersection of adoption and parenting in the context of their whole life story. The study had an equal representation of men and women, and approximately two thirds of the sample had been adopted through the care system, thus it fills gaps in the literature relating to the voices of male adoptees and care experienced adoptees. Although people's life stories were very varied, we identified four different types of life story (“continuously stable”, “pulling through”, “still struggling”, and “robbed of parenthood”). These were based on an analysis of a number of narrative aspects and narrative identity features and each type of life story suggested a different way that adoption and parenting could intersect. This intersection and its implications for practice are here considered in greater detail.

4.1. Parenting issues for adopted adults

The potential for parenting to **reawaken adoption-related issues** was the first theme highlighted in previous research (Despax and Bouteyre, 2019; Field & Pond, 2018; Conrick, 2020). This theme was prominent for most, though not all, in our study. In particular, for those in the “pulling through” and “still struggling” groups, strong adoption-related feelings (usually negative) could be triggered such as fears of failing as a parent, a sense of rejection by the birth parent and/or fear of rejecting or being rejected by their own child. For many, particularly for those who were adopted at older ages and/or who had more open adoptions, thinking about their identity and their membership of two families had begun well before becoming a parent. Thus feelings arising at the parenting stage were an additional layer of reflection about adoption (‘what does my background/history mean for me as a parent?’) rather than the triggering of a search for identity (‘now I am a parent I need to know more about my background’). Because many adoptees had a history of abuse and neglect, thinking about their birth parents often raised anxieties that they would parent their own child poorly. The flipside of this was the determination to try and break cycles of abuse, meaning that for many (particularly those in the “pulling through” group) becoming a parent was a positive turning point in the life story. For others, the intensity of adoption related feelings triggered on becoming a parent posed serious threats to their parenting and these feelings overlapped with mental health problems. Parents in the “still struggling” group felt deeply troubled by negative adoption related feelings affecting their parenting role.

The importance of parenthood in prompting a reworking of the life story, previous seen in mothers, was also evident in in our study for fathers. In the main identity issues raised by men and by women were very similar, suggesting men's narrative processing of adoption and parenthood are just as salient as women's. As is perhaps culturally more an option for mothers than fathers, for some participants (particularly those “pulling through” and “still struggling”), motherhood was narrated as a total identity: their single, seemingly redemptive purpose and only mission in life which meant putting significant pressure on themselves to parent perfectly. The embodied and relational issues raised by mothers and fathers are also understandably different. For women, pre-adoption experiences and adoptee status heightened the stakes around conception, carrying a pregnancy to term, giving birth, breastfeeding and bonding, with difficulties threatening maternal confidence and security. For fathers, cultural norms around the primacy of the maternal-infant dyad could be perceived as threatening exclusion and triggering loss.

The second issue raised in previous research was the **specific challenges that adopted people may face as parents**. Previous reviews highlighted issues such as attachment security, belonging and genetic resemblances and anxiety/ increased levels of rumination (which we have discussed above). Here we give reference to the to higher levels of adverse life experiences (which often preceded adoption) and which had often profoundly affected adoptees' development and relationships from childhood onwards. Many reported problems with mental health, education and employment, substance misuse, relationships with parents and partners. Often these problems were ongoing when they became a mum or dad, threatening their parenting and playing into their most significant fear: that as parents they may repeat negative cycles of neglect or abuse with their own children. These types of life challenges and fears were reported by the majority of adoptees in our sample (the “continuous stability” group being the exception) but at the same time parenting often provided fresh and compelling motivation to get their lives on an even keel. This suggests that the transition to parenthood may pose important opportunities to support adopted adults in addressing their problems, as has been found in the literature on care experienced parents, though many adoptees feared that asking for help and expressing worries would lead to scrutiny of their parenting.

For parents who had been judged unable to look after their own

children, not ‘breaking the cycle’ was devastating. The overrepresentation of parents who have been in care or adopted amongst the population of parents who lose their children to care or adoption is noted in other research; as suggested by Roberts (2017) this may represent both a failure to adequately prepare and support very vulnerable adoptees for parenthood, and/or may reflect professional attitudes which see intergenerational cycles of abuse and state care as inevitable.

The theme that parenthood can be a *catalyst for change in relationships with adoptive and birth parents* was also evident in various ways. In the “continuous stability” group parenting did not alter generally supportive, harmonious and open relationships with adoptive parents and for most it did not trigger a review of birth family relationships, these generally being seen as less important than adoptive relationships. Parents in the “pulling through” group evidenced most change in their relationship with birth and adoptive families. For some becoming a parent heralded better relationships with adoptive parents, particularly where adoptive parents reached out to offer their support as grandparents, the grandchild ‘bringing the family together’. For others, their goal was to move away from unhelpful or damaging influences in their life to protect their children. So distancing in relationships was also apparent, sometimes with birth family members, but also with adoptive family members where the adoption had been unhappy. Instead of parenthood prompting a search for birth family members as has been noted in previous research, several of those who were already in contact with birth relatives sought to move away from these relationships in order to focus on and/or protect their children (though relationships seen as supportive, often with birth siblings, could be strengthened or retained). For adoptees whose life stories were of “still struggling” or who felt they were “robbed of parenthood”, becoming a parent had not typically triggered changes in adoptive or birth family relationships, as sadly many people described difficult or absent relationships relating to both types of family.

The final theme in the existing literature, the identification of *positives of becoming a parent* was prominent in most life stories, particularly for the three groups whose life stories featured high levels of struggling/adversity. A biological connection with their children was highlighted as a particularly treasured experience by those in the, “pulling through” group and was linked to their renewed motivation to resolve their problems. It’s striking however that for adoptees in the “still struggling” group their undoubted love for and commitment towards their children was contaminated by powerful feelings of distress that made the parenting role particularly challenging. Finally, for those who felt they were “robbed of parenthood” although being a parent was seen as central aspect of their identity, these mothers and fathers all had serious constraints on the extent to which they could exercise their parenting role; being a mum or dad entailed huge losses.

4.2. Challenges in the lives of adopted adults and pathways to resilience

Against a background of adversity, many adoptee parents told redemptive life stories of overcoming challenges in order to build a positive future for themselves and their children. Resilience is not a characteristic of the individual, but an acquired status built through a combination of protective factors in a person’s life (Rutter, 2013). Factors seen as having helped manage difficulties varied from person to person but several factors stand out and suggest implications for practice.

4.2.1. Recognising the diversity of adopted adults’ life stories and supporting narrative meaning making

This research illustrates the diversity and fluidity of adopted adults’ life stories, and the importance to parenting of being able to construct a coherent narrative about adoption. For some being adopted was seen as a pathway to resilience, for others it was mostly negative, but for many they identified both losses and gains through adoption. As noted by

McSherry et al, in the introduction to a special issue on adoption and trauma (2022, p.3) “the representation of adoption as a response to early trauma, and of adoption as trauma, are both valid and mutually inclusive perspectives”. As Brodzinsky et al. (2022, p.7) argue, it is important to explore, hear about and respect people’s narratives about adoption, otherwise “it can lead to feelings of marginalization, diminishment, fragmentation of self, and emotional destabilization. And for some, it can also feel traumatic.” We echo the importance of listening to individuals’ own versions of their life story, avoiding the imposition of master narratives emphasising either positives (such as the adopted person as ‘lucky’, ‘special’ or ‘rescued’), negatives (the adopted person as ‘unwanted’ or ‘damaged’ or ‘bound to repeat abuse’), or which see adoption as ‘a clean slate’ or ‘fresh start’ (Merritt, 2022; Samuels, 2022).

Gaining insight and making meaning from difficult experiences either through supportive personal relationships or adoption sensitive therapy was instrumental for some parents in pulling through their difficulties. Finding ‘the good within the bad’ and using meaning making processes contributes to healthy narrative identity development (McLean and Pratt, 2006). Parents who were “still struggling” often appeared stuck in and hampered by cycles of rumination about adoption. This was also noted by Grotevant et al (2017, p. 2201) who argued adoption therapy should “be personalized to address the aspects that are uniquely distressing for the adoptee” (Grotevant et al, 2017). Affordable adoption-competent therapies for adult adopted people are often sadly lacking (Adoption UK, 2023) and development of and funding for such services is a pressing need. Newton (2022) proposes a ‘consciousness framework’ where adoptees who feel harmed by their adoption experiences are supported to heal from this through accessing adoptees spaces, culture or mentoring or hearing from other members of the adoption triad about their experiences.

4.2.2. Intervening early to help adoptees cope with the impact of adverse experiences

The high levels of difficulties that many adopted adults in our study experienced, and which potentially threatened their parenting, point to the importance of trauma-informed support for adoptive families (McSherry et al, 2022) particularly early interventions (i.e. during childhood, preventing escalation in adolescence or adulthood) and help specifically at the parenting stage. Support for adopted adults with mental health problems is a particularly pressing need, as parental mental health problems are a strong mediating factor in the link between childhood adversity and compromised parenting (Christie et al, 2017). Other key problems adults needed help with were substance misuse and domestic violence.

Many parents worried that aspects of their parenting were not optimal, particularly in terms of barriers in getting close to their children, or an overinvolved or permissive parenting style. Similarly Despax et al. (2021a) describe how some adopted parents show “massive investment” in relationships with their children, which could be associated with insecure attachments and heightened parenting stress. In such cases parents may benefit from early family support services that can assist them in avoiding these negative parenting strategies, and developing more positive ways of parenting (Greene et al, 2020). However, where there is a history of trauma, offers of help can be seen as threatening, pathologizing or critical (Siverns & Morgan, 2019). Service providers need to be sensitive to adoption-related issues (and those linked to pre and post adoption adversities) that can be experienced by both mothers and fathers, but without pre-judging or making parents feel prejudged. In the highest risk cases, where parent’s problems may pose threats to their children’s welfare, preventative intensive multi-disciplinary services are needed to support parents to break cycles of abuse (Lotto et al, 2023).

Almost a quarter of parents in this study were not living with their children, and managing non-residential parenting was a key challenge for these parents, this having extra resonance because of their own losses. Hence services to support parents not living with their children

(including those who have lost their children to care/adoption) to cope with their loss and manage the non-residential parent role are needed, including services aimed at preventing repeat removals (Broadhurst & Mason, 2020; Neil et al, 2010).

4.2.3. Promoting openness in adoption

Adoptive parents being “communicatively open” (Brodzinsky, 2005) and supporting birth family contact where appropriate was valued by adopted people across all four narrative types. Openness, particularly with adoptive parents, seemed vital in strengthening adoptees’ trust in their adoptive parents and building an adoption narrative, and promoting both these types of openness needs to be a priority when placing children and preparing, assessing and supporting adoptive parents. The need for postadoption support in making sense of and managing birth family relationships extends into adulthood and may be particularly needed at the parenting life stage where birth family relationships often come under review.

4.2.4. Supporting adoptees’ relationships with partners

For some adopted people the importance of a supportive partner was key in managing their parenting role, though for others relationships with partners could be strained or violent and 40 % of parents were not currently in a relationship. Thus addressing the impact of adoption and early adversity on adult romantic relationships (including the co-parenting relationship after separation) will be a key need for some adoptees. It is important to consider how to work with couples when supporting parents who have experienced childhood trauma (Rassart et al, 2022) and ‘high support and high challenge’ models for working with fathers and with couples is needed (Philip et al, 2020).

4.2.5. Support for adoptive families into adulthood

The role of adoptive parents in supporting the adopted person ‘no matter what’, including providing intensive scaffolding in early adulthood and when the adoptee became a parent, was key in building resilience for many, as also noted by Ward et al. (2022). The lifelong impact of adoption needs to be emphasised from the beginning in work with adoptive parents. As adoptees approach adulthood, how to support adult sons and daughters may be an important topic for training and support. For highly involved adoptive grandparents, their role was particularly challenging as they strove to balance supporting their adult children who often had ongoing problems, with playing a protective role in the lives of their grandchildren (see also Hunt, 2018). It is also important to recognise that not all adoptees will have this buffer of support from their adoptive family; support services are therefore particularly vital for adoptees who experience a breakdown in relationships with their adoptive parents. Racial and class differences between adopted people and their adoptive parents also created challenges for adopted people. Training, support and reflective opportunities to manage these differences are needed for adoptive parents at multiple points in children’s development (Pinderhughes et al, 2021).

4.3. Limitations

Limitations of the study are that the sample was non-random and self-selecting. Adopted adults with a connection to adoption organisations or for whom adoption and parenting are highly salient may be overrepresented. Adopted adults for whom adoption is a less dominant theme in their life story, or conversely who have very high levels of difficulties and who find talking about these very painful, could be underrepresented, although parents from both of these groups were included. Although equal numbers of men and women were recruited, the two groups differed somewhat in terms of men tending to be adopted at earlier ages (and in some cases earlier historical periods). It is not easy to disentangle the effects that may be due to gender and those that relate to the adoption pathway.

Although four types of life story were identified, not all adopted

parents will necessarily fall into one of these types, the proportions in each group may not be representative of the wider adopted population, and people’s life stories and narrative identities will not remain static. Narrative identities are situated and evolving (Crossley, 2000) and the four groups represent different ways our interviewees presented their stories in the particular context of the research interview, to a particular audience (the researcher) at one point in their life.

4.4. Conclusion

This paper explored an important aspect of the lifelong impact of adoption, the experiences of adopted people when they have their own children. Their life stories clearly demonstrate that adoption experiences continue to unfold and affect adopted individuals, their children and their birth and adoptive families in various ways across the lifespan. The study adds complexity and nuance to existing literature reviews of adopted people as parents, importantly in relation to care experienced adoptees and adopted men as fathers. The life-story interview method, particularly in its inclusion of the prompt ‘to consider what that tells us about you and your life story’, gave us profound data, often of meaning making in action/process, allowing adopted adults a space to tell us their own life stories giving adoption and its impact differential valency. Indeed, the schedule was often noted as producing an emotionally demanding but valued experience for participants (who were followed up regarding their welfare following the interview).

In terms of future research, the parenting practices, rather than identities of adoptee adults remains a sensitive but important issue to research further. Likewise, the perspectives of the children of adopted people is a gap in the literature and research is warranted given the intergenerational effects reported by the parents in the current study. Most importantly, understanding what interventions may help adopted adults overcome difficulties that impact their parenting is needed. Given what is known about the vulnerability in adolescence and adulthood of adoptees who have experienced high levels of adversity (see also Edwards et al 2023), the need to do more to address the consequences of early harm and support people to effectively parent their own children is, as Roberts (2017, p.360) argues, “a moral imperative”.

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CRediT authorship contribution statement

Elsbeth Neil: Methodology, Funding acquisition, Formal analysis, Investigation, Data curation, Writing – original draft, Writing – review & editing, Supervision, Project administration. **Julia Rimmer:** Methodology, Formal analysis, Investigation, Data curation, Writing – original draft, Writing – review & editing, Supervision, Project administration. **Irina Sirbu:** Methodology, Formal analysis, Investigation, Data curation, Writing – review & editing.

Declaration of Competing Interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

Data availability

The research data have been archived and are available to users registered with the UK Data Service, subject to the permission of the data owner: <https://reshare.ukdataservice.ac.uk/855382/>.

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