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The purpose of this study was to examine Black adoptive families' characteristics
and the relations between child risk, social cognitions, and adoption outcomes.
Participants were 73 Black adoptive mothers and 66 of their adopted children.

Mothers' average age was 48 years. Approximately 36% had earned at least a
bachelor's degree, 75% were employed, and 51% were not living with a spouse or
partner. Children averaged 9.5 years old; 55% were female. Their average age was 1.7
years at first foster care placement, 3.7 years when first placed in adoptive mothers'
home, and 5.9 years at adoption. They experienced an average of 2.9 foster care moves.
Many of the children experienced abuse (47%) and neglect (85%). Mothers reported that
about 62% of the children currently had attention deficits, 57% had behavior problems,
49% had learning problems, and 30% had developmental delays.

Of particular interest in this study was the relation between child risk, mother and
child social cognitions, and mother and child perceptions of adoption outcomes. Mothers
of children with less risk characteristics, those who believed that adoptive families were
more similar to non-adoptive families, and those who had lower levels of conflict-
promoting attributions for their children's misbehaviors reported higher satisfaction with
the adoption and greater warmth in their parent-child relationships. Also, mothers who
had higher levels of parental self-efficacy had a more warm relationship with their child.
Parental self-efficacy also moderated the relation between child risk and mothers'
adoption satisfaction. Parental self-efficacy appeared to be important for those mothers

who had children with more risk characteristics. Mothers with higher levels of parental self-efficacy were more satisfied with the adoption than mothers who had lower levels of parental self-efficacy.

Child risk was not associated with child-reported adoption outcomes. Children with higher levels of self-esteem and those who reported receiving higher levels of support from their adoptive family were more satisfied with their adoption placement.

ADOPTION ADJUSTMENT IN BLACK ADOPTIVE FAMILIES

by

Nerissa Inez LeBlanc Gillum

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Approved by

_____
Committee Chair

To My Almighty Father, Family, and Friends

Thank You Very Much for Your Love

APPROVAL PAGE

This dissertation has been approved by the following committee of the

Faculty of the Graduate School at The University of North Carolina at Greensboro.

Committee Chair_____

Marion O'Brien

Committee Members _____

Andrea G. Hunter

_____

C. Chris Payne

_____

L. DiAnne Borders

_____

Date of Acceptance by Committee

_____

Date of Final Oral Examination

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CHAPTER I

INTRODUCTION

Nationally, Black children represent approximately 42% of the children who await adoption in the public foster care system (U.S. Department of Health & Human Services, 2004). A significant proportion of these children are age 3 and older (U.S. Department of Health and Human Services, 2004). Children around this age are typically categorized as "older children" (Berry, 1989; Brodzinsky, Smith, & Brodzinksy, 1998; Pinderhughes, 1998), and the number of these children in foster care is rising (Cowan, 2004). Black families who are not related by blood or marriage to the older Black children have formally absorbed them into their homes (Billingsley, 1992; Hill, 1999).

Within the Black culture, there are strong beliefs that family is important and members are to sacrifice for one another (Gwaltney, 1980; Martin & Martin, 1978; Wilson, 1991). In particular, children are to be cared for and protected; this is the responsibility of both the family and the community (Billingsley, 1992; Hill, 1999; Jackson-White, Dozier, Oliver, & Gardner, 1997). Black families have cared for children, related and non-related, by informally and formally adopting them. Of interest in the present study are the formal, non-relative adoptions. There is little current research that has a specific focus on these adoptions in Black families. Non-relative adoptions are believed to be different experiences in comparison to relative adoptions because prior to foster care or adoption there is usually not any link between the adoptive parent and adopted child.

Previous adoption research has shown that older adoptees and their adoptive families experience challenging times during the transition (Martin, 1998; Rosenthal, 1993). A portion of those studies has involved the investigation of how the adopted children's characteristics are associated with adoption outcomes (McGlone, Santos, Kazama, Fong, & Mueller, 2002; Pinderhughes, 1998; Rosenthal & Groze, 1991). Older adoptees usually have unpleasant birth and/or foster care histories, behavioral problems, emotional problems, cognitive delays, and/or medical problems, and these characteristics tend to be negatively associated with outcomes (Berry & Barth, 1989; Festinger, 2002; Groze, 1996; Pinderhughes, 1998). There has been research on the relation between adoption outcomes and the adoptive parent and adoptive family characteristics of age and education of adoptive parent, income, adoptive family structure, and number of children in the adoptive home; summaries of these results have revealed mixed results regarding these relations (Festinger, 2002; Rosenthal, 1993).

Considering that about 36% of the children adopted in the U.S. are Black (U.S. Department of Health and Human Services, 2004) and the results of prior research indicate difficulties within these families (Berry & Barth, 1989; McDonald, Propp, & Murphy, 2001; Rosenthal, 1993), research on Black families' adoption experiences needs to be conducted. This study was designed to contribute understanding of the factors that are related to positive outcomes within Black adoptive families who formally adopt children who are not related to them.

Along with examining the adoption experiences of Black families, this investigative approach differed from much of previous research in other ways. Cognitions

such as parental self-efficacy and attributions have received little attention in the adoption literature (Bugental & Happaney, 2002; Martin, 1998). These cognitions have been informative in understanding the interactions in other parent-child relationships (Bugental & Johnston, 2000; Daggett, O'Brien, Zanolli, & Peyton, 2000; Miller, 1995). Thus, these cognitions were investigated to understand their relations to adoption outcomes. Research has involved the examination of the direct links between the adopted children's, adoptive parents', and adoptive families' characteristics and outcomes (Berry & Barth, 1989; McDonald et al., 2001). In this study, direct relations between adoptive parents' and adopted children's social cognitions and outcomes were examined. In addition, social cognitions were investigated as moderators between child risk and adoptive parents' and adopted children's adoption outcomes. This provided information about the impact of cognitions as a buffer against the potential negative effects of risk. Research has commonly used adoptive parents' and caseworkers' reports of outcomes, excluding the adopted children's perspectives (Sherrill & Pinderhughes, 1999). Both the adopted children and adoptive parents were included as participants in this study. Multiple respondents provided different perspectives of what was occurring within the adoptive family.

The goal was to examine the challenges involved in adoptions and the characteristics within Black adoptive families that are related to positive outcomes. This information can be used to inform the selection and preparation of adoptive parents and can be directly applicable to the design and implementation of culturally appropriate post-adoption services to enhance adopted children's and adoptive families' outcomes.

Thus, the results obtained from this research are expected to make a long-term contribution to the welfare of Black adopted children and their adoptive families.

CHAPTER II

THEORETICAL FRAMEWORK AND LITERATURE REVIEW

Social Organization of Black Families and Social Cognition

The functioning of Black adoptive families was examined within the context of

distinct features of the social organization of Black families, such as fictive kin,

intergenerational caregiving, and extended families. These features, which have been

instrumental in demonstrating the importance of family (Billingsley, 1992; Hill, 1999;

Hunter & Taylor, 1998), were examined within a social cognitive framework.

Social cognition is a useful theoretical framework because it allows for the

examination of cognitions and behaviors (Bandura, 1986). It proposes that individuals

construct their own meanings towards themselves and others in their environment and

interpret their realities accordingly. Their constructed realities have an effect on emotions

and behaviors (Bandura, 1986). Therefore, cognitions play an influential role in social

relationships (Bugental & Johnston, 2000; Grusec, Rudy, & Martini, 1997; Miller, 1995).

Environments and experiences are suggested to be important in the development

of cognitions (Bandura, 1986; Bugental & Happaney, 2002). A main source of Black

families' cognitions is the Black culture's beliefs and values about family. Families are

responsible for their own survival and maintenance (Hill, 1972; 1999). These beliefs

about families have been demonstrated within the distinct features of Black families,

many of which have been identified by Hill (1972; 1999) as strengths of Black families. The cognitions associated with these features are proposed to have a connection with adoption and can be used in understanding adoption outcomes. Specifically, beliefs and attributions are believed to be informative in understanding Black adoptive experiences.

Within a social cognitive framework, a person's rational and irrational beliefs about the self, others, and relationships are hypothesized to affect personal behaviors and interactions with others (Bandura, 1986). Self-perceptions of self-efficacy and self-esteem are types of beliefs. Self-efficacy has been shown to be related to behaviors (Bugental & Johnston, 2000; Coleman & Karraker, 2000). The rationale is that if people do not believe that they are capable of performing a task than their behaviors will reflect those beliefs (Bandura, 1986; Coleman & Karraker, 1997; Machida, Taylor, & Kim, 2002). In the case of adoptive parents, beliefs about competency in parenting an adopted child who has a history of abuse or neglect or behavioral problems would be associated with how parents interact with the child and their perceptions of the relationship. The importance of beliefs about parental competency has been demonstrated in the literature on the intergenerational caregiving by Black grandmothers, who have been common providers of care for their grandchildren (Burton & Dilworth-Anderson, 1991; Hunter, 1997; Jones, 1973). Grandmothers have parented their grandchildren who have experienced challenging situations and who exhibit problematic behaviors (Burton, 1995; Martin & Martin, 1978). Grandmothers who assume this critical role are likely to believe that they have the ability to parent these children. This belief is assumed to be a force in promoting respectful relationships between grandparent and grandchild. In the case of

adoptive parents, high parental self-efficacy would also be expected to be associated with successful parent-child relationships. Positive self-esteem is believed to be a defense in overcoming challenges (Hill, 1998; Rutter, 1995). For adopted children who have experienced abuse, neglect, and other adverse situations, high self-esteem may contribute to their positive development. Those who have beliefs of being worthy to be loved and to belong in a family would be more likely to experience positive outcomes.

A set of social cognitions within an adoptive relationship is the beliefs about formal adoptions by persons not related to the adoptee. This type of adoption, which is a way to have children or provide a home for children who need one, is similar to a fictive kin relationship. Fictive kin believe their relationship with one another is similar to that of one established by blood or marriage (Chatters, Taylor, & Jayakody, 1994). Parents and children who have positive beliefs about being part of an adoptive family would be more likely to have positive outcomes.

Attributions, which are explanations for one's own or another person's behaviors, also impact interpersonal relationships (Brody, Arias, & Fincham, 1996; Miller, 1995). An example of the relation between a perceiver's explanation for a person's actions and the perceiver's behavior can be extrapolated from the literature on Black extended families. In the work of Stack (1974), when a family member believed that a relative was able to help the family but refused or did not provide adequate support, the family member looked unfavorably upon his relative (Stack, 1974). An assumption about adoption outcomes would be that if an adoptive parent believes that the child has the ability to behave appropriately, then the parent would be more likely to respond to the

adopted child in a negative manner. Also, children who have negative perceptions about their parents' behaviors would report poor outcomes.

Social support from family, spirituality, and religiosity is common in the lives of Black families (Chatters, Taylor, & Neighbors, 1989; Dilworth-Anderson & Marshall, 1996; Hill, 1999), and their perceptions of these supports have been related to their emotions and behaviors (Taylor, Chatters, Hardison, & Riley, 2001). Help has come in financial, instrumental, and emotional forms (Dilworth-Anderson & Marshall, 1996). Perceptions of support revolve around its availability and helpfulness. If positive perceptions exist, then successful outcomes would be more likely.

Distinct features of the social organization of Black families help to provide an understanding of the outcomes of formal adoptions. Examination within a social cognitive framework allows for families to be investigated at a closer level (Bandura, 1986). Variables in interpersonal relationships that are associated with healthy or dysfunctional relationships can be identified and examined. Thus, for Black adoptive families, one can understand which cognitions are important in understanding family outcomes.

Constructs of Interest

Following is a literature review on the dependent variables of this study—adoption outcomes—and the independent variables—child characteristics and cognitions of parents and children. First, information is presented on four types of adoption outcome variables: disruption, satisfaction with adoption, parent-child relationships, and family functioning. Second, individual characteristics of the adopted child—race, age at

placement, gender, behavioral problems, and foster care and placement history—are discussed. Prior research has shown relations between these characteristics and adoption outcomes. Lastly, research on cognitions of adoption beliefs, parental self-efficacy, child self-esteem, attributions, and social support is presented.

Adoption Outcomes

Formal adoption is a means by which Black families are formed and maintained (Billingsley, 1992; Jackson-White et al., 1997). Black families are sensitive to not breaking the family bonds of biological families; thus informal adoption is usually the preferred choice among families (Wilson, 1991). Yet, there are those circumstances in which biological families are incapable of caring for their children, and formal adoption by persons not related to the children becomes a salient option due to a belief that the Black community is responsible for caring and protecting children (Hill, 1999; Jackson-White et al., 1997; Wilson, 1991).

Formal adoption by non-relatives is a respected practice that commonly occurs (Billingsley, 1992; Hill, 1999). The research into older adopted children and their adoptive families has been of interest to adoptive families, adoption agencies, and other professionals who work with adopted children and their adoptive families due to the union of different child and family experiences and expectations that may create challenges for the families (Brodzinsky & Schechter, 1990; Pinderhughes, 1996; Rosenthal, 1993; Schmidt, Rosenthal, & Bombeck, 1988). Results have indicated that if the transition is unsuccessful, then there can be problems within and outside the family such as conflictual relationships, stress, depression, exacerbation of child misbehaviors,

and academic problems; and/or the adoption could be terminated (Barth & Miller, 2000; Berry & Barth, 1989; Kramer & Houston, 1998). Separate analysis of the experiences of Black adopted children and their adoptive families is missing from much of the current adoption research. Considering the potential difficulties that can occur within these families, investigation into the lives of Black adoptive families is needed to obtain knowledge of the factors that contribute to positive outcomes. Outcome variables that have been investigated in previous research are disruption rates, satisfaction with adoption, parent-child relationships, and family functioning. Following is a review of the literature on these four outcome variables.

Disruption. Disruption is the termination of an adoption before it is legally finalized (Barth, Berry, Yoshikami, Goodfield, & Carson, 1988; Hollingsworth, 2003; Rosenthal, 1993). According to a review of the literature on disruption, results have been mixed on the relation between ethnicity and disruption, with more studies evidencing no relation between the two (Rosenthal, 1993), and there is little current research on the topic. An assumption is that the rate of disruption in Black adoptive families would be low. This is based on the literature on intergenerational caregiving, which is perceived to be necessary to maintain family life. Children adopted by persons not related to them is a form of intergenerational caregiving that extends outside the family system and reaches into the realm of those who are not related by blood or marriage. Participation in these adoptions could be perceived by adoptive parents as a form of survival and maintenance of the Black community that encourages their willingness to help. They may prioritize their commitment to the children and believe that difficulties that arise can be overcome.

Steadfastness during and triumph over difficult times are threads within Black family life (Billingsley, 1992; Hill, 1972; 1999). Thus, the perceptions of the importance of these relationships would decrease the possibility of disruption.

Summaries of the research on disruption have shown disruption rates of children placed when older are higher than those of their younger counterparts (Cowan, 2004; Festinger, 2002; Hollingsworth, 2003; Rosenthal, 1993). There are concerns about the impact of disruption on children and families (Elbow & Knight, 1987; Hollingsworth, 2003) and about a possible increase in disruption rates (Barth & Miller, 2000).

Both the children and the families who experience disruption must deal with losses and make transitions (Cowan, 2004; Elbow & Knight, 1987; Valentine, Conway, & Randolph, 1988). The child experiences another loss of family members and a home; the belief of being unlovable or unadoptable could be reinforced; and disruption can be perceived as another form of rejection (Elbow & Knight, 1987; Smith & Howard, 1991). For the family, there is the loss of a child and feelings of failure, shame, and guilt (Schmidt et al., 1988; Smith & Howard, 1991; Valentine et al., 1988). All family members have to restructure their lives (Elbow & Knight, 1987).

Another concern has been that the disruption rate will escalate with an increase in the numbers of foster children being adopted (Barth & Miller, 2000). This concern is partly based on the assumption that older children will be quickly moved into homes in which the child and family have not been properly matched, thus problems may arise (Barth & Miller, 2000).

Disruptions have been associated with child characteristics and parent and family characteristics (Festinger, 2002; Hollingsworth, 2003). Child characteristics that have been positively related to disruption are age at adoption (McDonald, Lieberman, Partridge, & Hornby, 1991), existence of behavioral problems (Barth, Berry, Carson, Goodfield, & Feinberg, 1986), number of placements (Rosenthal, Schmidt, & Conner, 1988), and prior abuse and neglect (McDonald et al., 1991). Reviews on disruption have reports of mixed results on its relations with parent and family characteristics of ethnicity, age, education, and income (Festinger, 2002; McDonald et al., 1991; Rosenthal, 1993). Lower rates of disruption for minority families have been reported, but more studies have conclusions of no relation between ethnicity and disruption (Rosenthal, 1993; Festinger, 2002). Studies have reported older age, higher levels of education, and higher incomes to be related to increased risk of disruption, whereas in other studies, there are results of no association between these variables and disruption (Rosenthal, 1993; Festinger, 2002).

Disruption has negative ramifications for both the children and the families. Understanding which factors are related to this adoption instability can help in preventing its occurrence. Results have consistently revealed that various child characteristics are related to disruption. In this study, attention will be focused on child characteristics to understand its relation to adoption outcomes.

Satisfaction with adoption. Parents have usually reported on the satisfaction of the adoptive placement. Researchers have defined satisfaction with adoption in terms of the parents' perceptions of the impact of the child's adoption on the family (Berry & Barth, 1989; Pinderhughes, 1998; Rosenthal & Groze, 1991), decisions to adopt again or adopt

the same child (Berry & Barth, 1989; Lightburn & Pine, 1996; Pinderhughes, 1998), expectations of the adoption in relation to the actual experience (Berry & Barth, 1989), and feelings of competence in dealing with the placement (Pinderhughes, 1998).

Information about satisfaction with formal adoption of children not related to their adoptive parents can be inferred by investigating the literature on informal adoptions among members within Black families. Black households tend to have flexible boundaries that allow members to be absorbed into the household for temporary or permanent residency (Dilworth-Anderson & Marshall, 1996; Hill, 1999; Littlejohn-Blake & Darling, 1993). Informal adoptions tend to occur due to parental experiences of not being economically, physically, and emotionally mature enough to care for their children; marital separation and divorce; difficulties disciplining their children; and other parent circumstances of illness, drug abuse, imprisonment, and death (Boyd-Franklin, 1989; Martin & Martin, 1978).

Absorbing unrelated children into one's home is likely to occur because of the cultural beliefs about commitment to children and the community (Jackson-White et al., 1997; Stack & Burton, 1993). As in any relationship, there will be conflict, but the adoptive parents would realize the importance of caring for and protecting these children whose biological families were not able to fulfill their parental responsibilities. Because of their beliefs about helping children, adoptive parents would be likely to have high levels of adoption satisfaction.

Results of studies are that child behavioral problems have been negatively associated with the parents' perceptions of the impact of the children's adoption on the

family (Berry & Barth, 1989; McDonald et al., 2001; Rosenthal, 1993). Lower levels of externalizing behavior problems of the children have been associated with higher levels of maternal satisfaction (Pinderhughes, 1998). When children have been sexually abused, adoptive parents have reported that the adoption experience was worse than they had expected (Berry & Barth, 1989). Lastly, high levels of adoption satisfaction have tended to be reported by adoptive parents (Glidden, 1991; Rosenthal & Groze, 1991; Pinderhughes, 1998).

The adoptive relationship is similar to a fictive kin relationship. Fictive kin are persons who are chosen to be and are perceived as relatives; there are not any consanguineous or marital ties (Chatters et al., 1994). Persons with a fictive kin status are expected to assume the responsibilities that accompany family membership (Chatters et al., 1994; Stack, 1974). Children who are part of this type of relationship may be more likely to be satisfied with their adoptive placement.

One of the few studies that has focused on children's adoption satisfaction is Pinderhughes (1998) study of children adopted after age five. Items assessed the children's perceptions of comfort in the family, parental treatment, and existence of fewer problems since coming to live with their new families. In general, children reported high levels of satisfaction. Their satisfaction was not significantly correlated to either mothers' or fathers' satisfaction with adoption. Children's severity of disability was negatively associated with their adoption satisfaction, whereas stability of their birth parents was positively related with their satisfaction (Pinderhughes, 1998).

Both parents and children have reported high levels of adoption satisfaction. Factors that are related to this outcome appear to differ for both parent and child. To obtain a more comprehensive understanding of adoption outcomes, both parent and child perceptions need to be investigated.

Parent-child relationships. Within Black families, there has been an emphasis on respect for elders and the maintenance of strong family bonds (Hill, 1999). Bonds that have received attention in the Black literature are that of the mother and child and grandmother and grandchild. These relationships, which include informally adopting children, have been described as close and respectful (Billingsley, 1992; Martin & Martin, 1978). A similarly positive relationship may exist within families that have formally adopted children who are not related to them. Problems within the adoptive parent-adopted child relationship could result if the older adopted child still feels loyalty to her biological family.

Researchers have usually obtained information about the adoptive parent-adopted child relationship from the adoptive parents' (Barth & Needall, 1996; Dance, Rushton, & Quinton, 2002; Rosenthal & Groze, 1994). The quality of these relationships has been negatively correlated with children's placement age and child behavioral problems and has been positively associated with support of family, helpfulness of the social worker, and religion (Rosenthal & Groze, 1990). Longitudinal studies have results of the quality of the parent-child relationship becoming less positive over time (Rosenthal & Groze, 1994) and the relationship remaining the same or improving over time (Groze, 1996).

Overall, parents have reported positive perceptions of their relationship with their child, and the outcomes have been related to both child characteristics and social support. Adopted children are likely to enter families with different beliefs and experiences about parent-child relationships. Research on children's perceptions is needed to understand how they view the relationship with their parents and what factors are related to their outcomes.

Family functioning. Lastly, measuring family functioning is another method used to assess adoption outcomes. Considering the union of different experiences and expectations of both the child and family, examination of family functioning can provide useful information regarding how the family responds to family changes (Erich & Leung, 2002).

Literature on the functioning of Black families can be instrumental in understanding the experiences of Black adoptive families. Hill (1972; 1999) has described strengths of Black families; these characteristics enable the family to tend to the needs of the family and any demands from external forces. Examples of family strengths are strong kinship bonds, flexible family roles, strong religious orientation, strong achievement orientation, and strong work orientation (Hill, 1972; 1999). These resources could aid in the family functioning of adoptive families.

Researchers have measured various dimensions of family functioning, including cohesion and adaptability (Groze, 1996; Rosenthal & Groze, 1994), family health (Erich & Leung, 1998; 2002), and family pride and accord (Glidden, 2000). Family functioning has been found to be positively related to mothers' religious participation (Erich &

Leung, 1998), spousal or partner support (Leung & Erich, 2002); and negatively related

to adoption of sibling groups (Erich & Leung, 2002; Leung & Erich, 2002), child

experience of sexual abuse (Erich & Leung, 2002), behavioral problems (Leung & Erich,

2002), maternal depression (Glidden, 2000), relative support other than spouse or partner

(Leung & Erich, 2002), and children's age at adoption (Leung & Erich, 2002).

Similarly to the other outcomes, parents' perceptions of family functioning are

related to child characteristics and social support. Research is lacking on children's

perspectives that is believed to contribute further understanding of adoption outcomes.

Child Characteristics Related to Adoption Outcomes

A number of child characteristics have been associated with adoption outcomes

(Brodzinsky et al., 1998; McDonald et al., 2001). These include race, age at placement,

sex, behavioral problems, and birth family and foster care histories.

Race/ethnicity. Due to cultural diversity, separate analysis of racial groups or

ethnic groups is important in understanding what each group perceives as challenges and

how they manage these challenges to foster healthy development. The current literature is

mixed with regard to race. Race has not been associated with adoptive placement

experiences, such as satisfaction with the adoption (McDonald et al., 2001) or disruption

(Barth et al., 1988). Yet, other research has indicated that minority or biracial children

have a more positive impact on the adoptive family than White children have on their

adoptive families (Rosenthal & Groze, 1990). Black children have reported more

satisfaction with their adoptive placement than have White children (Pinderhughes,

1998). Additional research is needed to understand these differing results.

Age at adoption. Age of the child is considered one of the strongest predictors of adoption outcomes (Brodzinsky et al., 1998; Groze, 1986; Leung & Erich, 2002; Rosenthal, 1993). Studies have reported that older children are more likely than their younger counterparts to experience disruption (Barth et al., 1988; Groze, 1986) and other negative aspects of adoption outcomes (Groze, 1986; Leung & Erich, 2002; McDonald et al., 2001; Rosenthal & Groze, 1990). These findings have been supported by the older children's experiences, such as multiple moves and development of behavioral problems that may challenge their transition into their new family system (Brodzinsky et al., 1998).

Sex. Adoption outcomes have not been consistently found to differ based on child sex (Brodzinsky et al., 1998). Sex was not related to the impact of adoption on the family (Rosenthal & Groze, 1990) or with other parent experiences with the adoptive placement (McDonald et al., 2001). However, in one study, males tended to experience more adoption disruption than females (Barth et al., 1988).

Behavioral problems. Child behavioral problems have also received research attention. According to reviews of the research on disruptions, children with behavioral problems are more likely to experience disruptions (Brodzinsky & Pinderhughes, 1998; Hollingsworth, 2003; Rosenthal, 1993). Adoptive parents of children with behavioral problems tend to indicate poorer adoption outcomes (Berry & Barth, 1989; Dance et al., 2002; Leung & Erich, 2002). Researchers have analyzed categories of behavioral problems, which are divided into externalizing and internalizing behaviors (Berry & Barth, 1989). Externalizing behaviors refer to interpersonal exchanges such as fighting, stealing, and arguing; internalizing behaviors are anxiety, depression, and withdrawal.

Parents who report higher levels of externalizing problems in their children have been more likely to have negative perceptions of the adoption experience (Pinderhughes, 1998; Rosenthal & Groze, 1990). Furthermore, children who have experienced disruptions tend to have high externalizing behavior scores (Berry & Barth, 1989).

Birth family and foster care experiences. Older adopted children are likely to have experiences of some form of abuse and neglect (Berry & Barth, 1989; Erich & Leung, 2002; Logan, Morrall, & Chambers, 1998). These children have been more likely to have higher behavior problem scores (Berry & Barth, 1990; Logan et al., 1998), and their experiences of abuse and neglect have been related to poor outcomes (Dance et al., 2002; Erich & Leung, 2002; Rosenthal & Groze, 1990). In some studies, years in foster care, number of foster care placements, and prior disruption have not been found to be associated with negative outcomes (Dance et al., 2002; Groze, 1986; Pinderhughes, 1998). Other research has reported children with multiple pre-adoptive placements and previous adoptive placements to be more likely to experience adoption instability (Barth et al., 1986; 1988). Adoptive parents of children who resided in a group home or psychiatric placement prior to their adoptive placement were more likely than adoptive parents of children who did not have these placement experiences to report that the adoption had a negative impact on the family (Rosenthal & Groze, 1990).

Researchers have noted that previous studies have had flaws, which have had an impact on conclusions (Borders, Black, & Pasley, 1998; Brodzinsky, 1993; Grotevant, Ross, Marchel, & McRoy, 1999; Haugaard, 1998). Certain problems have been challenging to control for (Borders et al., 1998). One of the major problems within

adoption research is the lack of attention to race or ethnicity. When Blacks are part of a study, they tend to be analyzed together with the other ethnic groups. This absence of separate analysis of race or ethnicity does not allow for the examination of cultural differences that exist and may account for adoption outcomes. Other problems have included samples of children with a wide age range, different placement ages, no separation between non-relative and relative adoptions, no child responses, no differentiation between types of special needs, and no indication of foster care adoptions versus non-foster care adoptions. These are challenges that future research will have to address in order to contribute to the understanding of the outcomes of older child adoptions.

Social Cognitions of Parents and Children

Four types of social cognitions are examined in the present study: perceptions of self, adoption beliefs, attributions for others' behaviors, and social support.

Parental self-efficacy. Self-efficacy is the belief in one's ability to perform a task competently (Bandura, 1986). Persons with a high sense of self-efficacy are characterized as having confidence, viewing problems as challenges, feeling less arousal of negative emotions, and persevering when faced with challenging situations (Coleman & Karraraker, 1997). Research has expanded the investigation of this construct into the parenting realm. Parental self-efficacy beliefs include the knowledge of behaviors involved in rearing a child and the confidence in one's competency to execute effective parental behaviors (Coleman & Karraker, 1997; Machida et al., 2002).

An understanding of parental self-efficacy beliefs in Black adoptive families can be obtained from the literature on Black grandmothers. There has been extensive literature on the intergenerational caregiving of Black grandmothers (Burton & Dilworth-Anderson, 1991; Hunter, 1997; Martin & Martin, 1978). Their parental competency has been demonstrated in their roles as primary caregivers in informal adoptions (Hill, 1999). Values of discipline, religious beliefs, and work ethic have been a part of their parenting practices (Martin & Martin, 1978). Relationships with their grandchildren has usually been a respectful one, which can be assumed to be due to their parenting abilities (Martin & Martin, 1978). In addition, grandmothers have been a source of guidance to their own children (Hunter, 1997). Thus, an assumption is that Black adoptive parents with high parental self-efficacy would tend to have positive adoption outcomes.

Black mothers' reports of parenting efficacy has been related to their developmental goals for their children (Brody, Flor, & Gibson, 1999). Research on ethnically diverse samples have shown that self-efficacy is positively linked to parenting satisfaction (Coleman & Karraker, 2000) and behaviors (Wells-Parker, Miller, & Topping, 1990), and negatively related to parents' psychological well-being as indexed by depression and stress (Cutrona & Troutman, 1986; Hastings & Brown, 2002; Wells-Parker et al., 1990) and perceptions of child difficulties (Halpern, Anders, Coll, & Hua, 1994; Teti & Gelfand, 1991).

Considering the relations between self-efficacy and these parenting behaviors, it is clear that parental self-efficacy of Black adoptive parents may have an impact on adoption outcomes. Coleman and Karraker (1997) have emphasized that future research

is needed on the association between parental self-efficacy and other potentially challenging circumstances. The adoption of an older child, which involves changes within a family system that includes a child who may have experienced abuse and neglect, have emotional and behavioral problems, and/or have developmental difficulties, is an area of research that should include the examination of parental self-efficacy and adoption outcomes.

Child self-esteem. With the challenges that exist to achieve success, high self-esteem is an important characteristic encouraged within Black families (Billingsley, 1992; Littlejohn-Blake & Darling, 1993). High self-esteem is believed to be a defense against obstacles and a help in fostering a productive existence (Barbarin, 1993; Hill, 1998). Thus, adopted children with high levels of self-esteem would be expected to experience more positive adoption outcomes.

Self-esteem has been investigated in research on adoptions that are transracial or transethnic (Andujo, 1988; Burrow & Finley, 2004; McRoy, Zurcher, Landerdale, & Anderson, 1982), international (Friedlander, 1999; Yoon, 2004), and open (Wrobel, Ayers-Lopez, Grotevant, McRoy, & Frederick, 1996). Generally, levels of self-esteem of children who have experienced these types of adoptions are not significantly different from the self-esteem levels of their counterparts (Andujo, 1988; Grotevant et. al, 1996; McRoy et al., 1982; Vroegh, 1997).

Other research on self-esteem has shown adopted children to be at risk for low self-esteem (Berry, 1992). Children whose families had reported more problems in the adoption had low self-esteem scores and had a greater interest in knowing about their

biological families (Kaye & Warren, 1988). Also, children who had higher levels of negative feelings about birth parent loss reported lower self-worth (Brodzinsky et al., 1998).

In studying Black older adopted children, research is needed to understand the relations between self-esteem and adoption outcomes. Older adopted children tend to have a history of negative experiences that may cause problems within the new family (Brodzinsky & Pinderhughes, 1998; Erich & Leung, 2002; Pinderhughes, 1998). Despite these experiences, some children may have high self-esteem that may help to buffer the potential negative effects from their birth and foster care histories. Research into self-esteem from this perspective could contribute to our knowledge about the strengths of child characteristics.

Beliefs about adoption. Even though Black families strongly believe in preserving biological family bonds, formally adopting children who are not related to them is favored when biological families are unable to care for their children (Hill, 1999; Wilson, 1991). The family and community view this as a form of communal self-help, especially with the number of Black children who are part of the foster care system (Hill, 1999; Jackson-White et al., 1997).

Adults who have taken the role of the caregiver in a fictive kin relationship realize the responsibilities attached to that role (Hill, 1999). Sometimes, these unrelated adults provide more help to children than the children's blood kin. Because these relationships exist to maintain the family system, there are commitments and obligations among the members that influence their behaviors in helping their families (Chatters et al., 1994;

Hill, 1999). Thus, adoptive parents' perceptions of the importance of these relationships could play a role in how the parents interact with their adopted children.

Children's perceptions of adoption beliefs are important in understanding adoption outcomes. Of interest are their perceptions of belonging within their adoptive family. Belonging is a concept that has been proposed to differentiate the experiences of long-stay foster care and adoption (Triseliotis, 2002). An understanding of belonging has been drawn from the interactions that occur within fictive kin relationships. When persons are designated as fictive kin, they are given the rights of relatives (Chatters et al., 1994). When children are fictive kin, their rights include protection and nurturance by adult family members. This form of involvement can encourage a sense of belonging, symbolizing a connection in the family. Belonging is important to adopted children who have experienced unstable environments. Because of these environments, adopted children may find it difficult to trust their new families and may feel that they do not belong within the family. Their insecurities may influence disruptive behaviors. Therefore, if adopted children believe that they belong in their adoptive family, then they would be more likely to have positive outcomes.

Research has involved the examination of adoption beliefs of both adults (Dave Thomas Foundation for Adoption & The Evan B. Donaldson Adoption Institute, 2002; Miall, 1987; 1996) and children (Brodzinsky, Singer, & Braff, 1984; Sherrill & Pinderhughes, 1999; Singer, Brodzinsky, & Braff, 1982). Results of the National Adoption Attitudes Survey reveal that most participants had favorable opinions about adoptions, believed adoptive parents were very likely to love their adopted children as

much as biological children, and believed that adoptive parents receive as much satisfaction from rearing adopted children as rearing biological children (Dave Thomas Foundation for Adoption & The Evan B. Donaldson Adoption Institute, 2002). In another study, most of the participants indicated that adoptive parenthood is basically the same as biological parenthood, adoptive parents have the same parental feelings for their children as biological parents have for theirs, and adopted children do not pose a greater risk than biological children (Miall, 1996). Perceptions of societal beliefs about adoption have included that the biological bond between parent and child was important for bonding and love, adopted children are inferior to biological children because of their unknown genetic background, and adoptive parents are not real parents to their adopted children (Miall, 1987).

Sherrill and Pinderhughes (1999) investigated older adopted children's and non-adopted children's understanding of adoption. Non-adopted children perceived more similarities between adopted and non-adopted children. Adopted children were more likely to explain the meaning of adoption from a child's perspective (e.g., " 'First you got to come to their house and spend the night with them, see if you like them, and if you do, you gotta sign all the papers," whereas non-adopted children discussed it from a parent's perspective (e.g., " 'When a mom and dad get a kid from a foster home and take care of it. They love it.' ") (p. 35). Differences between adopted children were also revealed. More children who were in the adoptive home longer than those who were in the home for a shorter amount of time indicated that the foster care system not the biological mother could disrupt the placement (Sherrill & Pinderhughes, 1999).

Singer et al. (1982) examined the adoption beliefs of adopted and non-adopted children. Adopted children's beliefs about adoption became less positive as they became older, whereas non-adopted children's beliefs became more positive. This difference was significant at 6-7 and 8-9 years of age. Explanations given for these differences are that when adopted children are younger, they are given positive feedback from their families about their adoption status but as they become older they may become aware of challenges that arise due to their adoption status, and they may receive negative feedback from their peer groups. As a result, adoption beliefs may become less positive. On the other hand, younger non-adopted children are less exposed to adoption information, and with their increasing age, they become exposed to adopted children and obtain more knowledge about adoption. Their beliefs about adoption become less negative. By 10-11 years of age, there were not any significant differences between the adopted and non-adopted children's adoption beliefs (Singer et al., 1982).

In another study of adopted and non-adopted children, their understanding of adoption was examined (Brodzinsky et al., 1984). With increasing age, children indicated the following motives for adoption: joy of watching a child grow, influence on children's development and/or parents' lives, infertility, and concern for child's welfare/empathy. The most frequent motives that children gave for individuals adopting a child were to give love to a child, to give the child a good home, and to help a child grow up (Brodzinsky et al., 1984).

Researchers have continued to show the importance of cognitions on behaviors (Bugental & Johnston, 2000; Grusec et al., 1997). There is a need to investigate the

relations between adoption beliefs and adoption outcomes. This belief has been emphasized within the adoption literature by Singer et al. (1982) who indicated that along with child factors such as age and foster care experiences, beliefs about adoption may be important in understanding the outcomes of adopted children.

Attributions. Attributions have received little attention in adoption research. The foundational understanding of attributions, explanations for one's own or another person's behaviors, has been from the work of Heider (1958). Attributions have been shown to have an influence on emotions and behaviors (Bugental & Happaney 2002; Heider, 1958; Miller, 1995).

Examination of family interactions within Black extended families can be useful in understanding the relations between cognitions, emotions, and behaviors. In Stack's (1974) research, families dealt with poverty by connecting with their kin. This was demonstrated through caring for one another's children and the exchanging of goods and services. Family members maintained connections with kin whom they perceived would help them. This support was built upon a system of reciprocity. When reciprocity was believed to be occurring, then the family members continued the process and benefited from the support. If they believed that an able member was not fulfilling her duty of reciprocity, then negative interactions between kin were likely to occur, such as decreasing the amount of exchange or discontinuing the act of reciprocity (Stack, 1974). In the study by Martin and Martin (1978), if a family member believed that his contributions to the family were being distributed to a member who did not need the help or the support was being misused, then stress within the family was likely. In the case of

adoptive parent-adopted child relationships, if the members have negative perceptions about the explanation of one another's behaviors, then they are expected to have negative outcomes.

Research conducted within the area of biological parent-child relationships has provided evidence that supports the importance of the relations between attributions and emotions and behaviors (Bugental & Happaney, 2002; Miller, 1995). Parent attributions for children's behaviors have been associated with their parental affect and behavior towards their children (Daggett et al., 2000; Miller, 1995; Slep & O'Leary, 1998). Parents with high levels of negative attributions tend to experience psychological distress (Harrison & Sofronoff, 2002) and engage in punitive behaviors (Grusec et al., 1997; Pinderhughes, Dodge, Bates, Pettit, & Zelli, 2000). In addition, parents' negative attributions have been related to their children's conduct problems at home (Synder, Cramer, Afrank, & Patterson, 2005). Attributions may be influenced by parental history, parent-child interactions, and lack of child development knowledge (Bugental & Happaney, 2000).

Research has also been conducted on children's attributions for their parents' behaviors (Bugental & Johnston, 2002). Children's conflict-promoting attributions about their mothers' and fathers' behaviors were positively related to ineffective communication with their parents (Brody et al., 1996) and ineffective arguing between parent and child (Fincham, Beach, Arias, & Brody, 1998). Mothers and sons who perceived hostile intent in one another's behaviors were more likely to have aggressive relationships (MacKinnon-Lewis, Lamb, Arbuckle, Baradaran, & Volling, 1992).

As attributions play an important role in determining emotions and behaviors within biological families, research into adoptive parent and adopted child attributions could contribute additional knowledge about these families. From the adoptive parent's perspective, knowledge of how the parents interpret the adopted children's behaviors would give further understanding of how parent cognitions can impact adoption outcomes. Parents who are not knowledgeable about the impact that abuse and neglect have on normal child development may have unrealistic expectations that could influence negative beliefs about the explanation for the adopted children's behaviors, which could affect outcomes. In addition, adopted children's attributions for their adoptive parents' behaviors would provide additional knowledge of how they conceptualize their adoptive parents' behaviors and how these cognitions affect their parent-child relationship.

Social support. Black families have tended to rely on their spirituality and religiosity and on their extended families (Billingsley, 1992; Hill, 1999). Both parent and child cognitions about spirituality and religiosity and family support are proposed to be important in providing a clearer understanding of adoption outcomes.

Beliefs in higher powers have helped Black family members to manage their personal and family lives (Barnes, 2001; Billingsley, 1992; Hill, 1972; Randolph, 1995). Religiosity refers to the beliefs and practices of a religion; spirituality involves beliefs that the universe is nonmaterial and interconnected or beliefs in a Supreme Being (Mattis & Jagers, 2001; Musgrave, Allen, & Allen, 2002; Wilson, 1991).

Both religiosity and spirituality have been positively related to Black adults' sense of control and social support (Jang & Johnson, 2004), family and life satisfaction (Beale,

1997; Taylor et al., 2001), children's self-regulation (Murry & Brody, 1999), mother-child relationship quality and maternal involvement in children's school activities (Brody & Flor, 1998), and fewer stressful life events (Wiley, Warren, & Montanelli, 2002). Adults have reported that religion and spirituality have provided emotional support (McAdoo, 1995), helped to develop a positive sense of self and provided them with a sense of control and a social support network (Wallace & Bergeman, 2002), and helped to accept reality and spiritually surrender (Mattis, 2002).

Spirituality and religiosity are believed to be important resources of Black children who overcome difficult situations (Hill, 1998). Religious involvement has been related to the coping strategies of both boys and girls; and girls' religious involvement has appeared to buffer the effect of stress on their internalizing symptoms (Grant et al., 2000).

Religiosity and spirituality continue to be vital features within the Black family (Mattis & Jagers, 2001). These beliefs would appear to have positive influences on both the parents' and children's adoption outcomes by promoting positive emotions and providing effective coping strategies.

Religion appears to be a source of help for adoptive families (Berry & Barth, 1990; Erich & Leung, 1998; Glidden, 1991). Adoptive parents have tended to rely more on their church or religious affiliation than on the adoption agency or other service agencies in the areas of parental activities and skills and emotional support in relation to adoption (Rosenthal, Groze, & Morgan, 1996). In addition, mothers who regularly

attended religious activities were more likely to report higher levels of positive outcomes (Berry & Barth, 1990; Erich & Leung, 1998).

The extended kinship system symbolizes familial obligation and responsibility (Chatters, Taylor, Lincoln, & Schroepfer, 2002; Wilson, 1989). This system includes relatives and fictive kin who provide emotional, social, and economic support to its members to help them during situations of economic difficulties, divorce, and illness (Martin & Martin, 1978; Stack, 1974; Taylor, Chatters, & Jackson, 1997; Wilson, 1989). Opportunities exist for multiple members to help in parenting children (Hunter, Pearson, Ialongo, & Kellam, 1998).

Family members have tended to rely on their relatives for help. Adults with positive perceptions of family support have had higher levels of self-esteem, more positive parenting practices (Taylor & Roberts, 1995) and fewer depressive symptoms (Dressler, 1985). Family support has been negatively related to children's reports of depressive symptoms (Overstreet, Dempsey, Graham, & Moely, 1999) and positively related to parental involvement in schooling (Taylor, 1996). In regard to adoptive families, parents may need emotional support or help with child care; the child may need another person to talk to. Adoptive parents' and adopted children's perceptions of the help they receive from their family would be expected to have an impact on their adoption outcomes.

Research has shown that support provided by family members has been beneficial to adoptive families (Brodzinsky et al., 1998; Leung & Erich, 2002; Rosenthal, 1993). Information about social support is usually reported by adoptive parents. Adoptive

parents have been more likely to use informal supports of spouse or other relative more than formal supports for emotional support and help with parenting (Rosenthal, Groze, & Morgan, 1996).

Research Questions

Descriptive data of adopted children's life histories and adoptive family demographic characteristics will be examined. The following research questions will be addressed.

1. What is the relation between child risk and parents' and children's adoption outcomes?

    Hypothesis: Lower levels of risk will be associated with more positive adoption outcomes as reported by both mothers and children.

2. What is the relation between parents' social cognitions and parents' adoption outcomes?

    Hypotheses:

    a. More positive social cognitions will be associated with more positive adoption outcomes as reported by mothers.

    b. More positive social cognitions will weaken the negative relation between child risk and adoption outcomes.

3. What is the relation between children's social cognitions and children's adoption outcomes?

Hypotheses:

a. More positive social cognitions will be associated with more positive adoption outcomes as reported by children.

b. More positive social cognitions will weaken the negative relation between child risk and adoption outcomes.

CHAPTER III

METHOD

Participants

Adoptive families were contacted through the Division of Social Services (DSS) of the North Carolina Department of Health and Human Services. Thirty-one counties participated in identifying families to participate in the study and mailing the recruitment packets to families. A total of 482 initial recruitment packets were mailed, and 369 follow-up packets were sent. Participation rate of identified families was difficult to calculate exactly because there were incidences of more than one packet sent to families. One hundred and twenty-seven families expressed interest in participating. Of these families, 88 families met the study criteria: (a) Black adoptive parents and adopted child, (b) non-relative adoption, (c) child adopted age of about 3 years or older, and (d) child age of 7 to 12 years at time of data collection. Data were collected on 73 adoptive mothers and their adopted child. Data were not collected on the other 15 families due to inability to schedule visits during the data collection period. Of the 73 children, 66 (88%) children participated; child data on two of the participating children could not be used because they did not comprehend the questions. The remaining seven children were not interviewed because parents did not grant permission ($n = 4$), children were not able to understand the questions ($n = 2$), and child refused participation ($n = 1$). Data on 64 children were analyzed.

Procedure

Families were contacted through the agencies of the North Carolina DSS. Initially, the state office was contacted to obtain approval for county officials to help identify families who fit the study criteria: (a) Black adoptive parents and adopted children (b) non-relative adoption (c) child adopted age of about 3 or older and (d) child age of 7 to 12 years at time of data collection. After approval was received, directors of selected county agencies were contacted.

Letters describing the study and asking for their assistance in identifying families were mailed to the directors. Approximately a week after the letters were mailed, directors were called to discuss the study and obtain a verbal consent. Directors referred the researcher to an agency representative who either directly helped the researcher or who assigned another individual to participate. Criteria for the families were then sent to them. Once the number of families who fit the criteria was identified, the researcher mailed that number of packets to the agency. To protect the identities of the adoptive families, agency representatives addressed and mailed the recruitment packets to the families. Recruitment packets contained a letter describing the study, parent questionnaire, and a postage-paid envelope. After about two weeks after the initial recruitment packets were mailed, a follow-up recruitment packet was sent to families who had not responded. Follow-up packets contained similar items as the initial recruitment packets.

Interested families completed the parent questionnaire and mailed it to the researchers. They were contacted via telephone to ensure they met the study criteria and

to schedule a visit with their families. Most families were visited in their homes; however, other arrangements were made for families ($n = 3$) who preferred to meet at another location.

At the beginning of the visit, parents and children were given information about the study both orally and in written form. Mothers signed a written informed consent statement, and children were asked for verbal assent to participate. Mothers were given a packet of questionnaires to complete, and the researcher interviewed the child in a private area of the home. Mothers were interviewed towards the end of the visit to obtain information about their adopted child's history and their own adoption experiences. These interviews were audio-taped. Mothers received a $20 gift card for their time, and children received a gift packet containing items such as a pen, pencil, small notebook, and toys.

Measures

Data were obtained from two sources: the adoptive mother and the adopted child. In this section, measures were organized according to the way they were used in analyses: (1) family demographics, (2) child risk index, (3) child and mother self-perceptions, adoption beliefs, attributions, perceptions of social support, and (4) mother and child perceptions of adoption outcomes.

Family Demographics

Mothers completed a questionnaire on information about each member of the household (age, sex, relation to adopted child), mother and father educational and occupational status, family income, and marital status.

Child Risk

To develop the child risk index, mothers were asked about child characteristics that have been negatively related to adoption outcomes: children's experiences of abuse, neglect, age at initial placement into adoptive mother's home, prior adoption disruption, behavior problems, and developmental problems. This information was obtained from mothers who completed a questionnaire about their child's health and were interviewed about their adopted children's birth family and foster care history. For each category of risk, children received a 1 if they experienced that problem. For the category of age at initial placement into adoptive mother's home, scores ranged from 0 "age less than 3 years of age" to 1 "age greater than or equal to 3 years of age." Age 3 and older has been commonly identified as older ages among children awaiting adoption, and children around this age are more likely to have histories of adverse experiences and have behavioral problems that have been shown to have negative relations to adoption outcomes (Berry, 1989; Brodzinsky et al., 1998; Pinderhughes, 1998). Scores from the 6 categories were summed to calculate an index of child risk. Total range of scores was 0 to 6, with higher scores representing greater risk.

Mother and Child Social Cognitions

Mothers' parental self-efficacy. Mothers completed the Parent Self-Efficacy (PSE; Machida et al., 2002) scale. To make the measure more appropriate for the adoptive families, the terms "adoptive parent" replaced "parent," and "adopted child" replaced "child." This 4-item scale was used to index mothers' beliefs about their parenting capabilities. Each item was scored from 1 "strongly disagree" to 4 "strongly

agree." A high score indicates high parent self-efficacy. Sample items are "I am able to take care of my adopted child's needs" and "The kinds of toys and experiences I provide for my adopted child will help him/her to be successful as an adult." Coefficient alpha reported by Machida et al. (2002) was .58. For this study, alpha was .53. Mean score were used in analyses.

Children's self-esteem. The global self-worth subscale of the Self-Perception Profile for Children (SPPC; Harter, 1985) was used to index child self-esteem. One question was re-worded to make it easier to comprehend. The 6-item scale ranged from 1 to 4, with a 4 representing high self-esteem. Questions assessed the extent to which children are happy with themselves, like the kind of person they are, and like the way their lives are going. Each item contained descriptions of two types of children. Respondents were read the descriptions, asked to choose the one that was more like him or her, and asked to select whether the description was "really true" or "sort of true" for him or her. Reverse scoring was done for negatively worded items. Harter (1985) reported coefficient alphas ranging from .78 to .84. Coefficient alpha in this study was .55. Average scores were used in analysis.

Mothers' beliefs about adoption. Mothers responded to the Adoption Belief Scale (ABS; Talen, 1996). Eight items from the 41-item scale were excluded because of difficulties in interpretation or irrelevance to the research question. Wording was changed to be more appropriate for the participants. Mothers completed the 33-item scale indexing the extent to which they viewed adoptive families as similar to or different from non-adoptive families. Sample items are "My adopted child can be expected to be as well

adjusted as a nonadopted child"; "It is more challenging to raise my adopted child than it would be to raise a nonadopted child"; "My adoptive family members feel closer to each other than family members in a nonadoptive family." Items are rated on a 6-point scale, ranging from 1 "strongly disagree" to 6 "strongly agree." Some items were reverse scored. Higher scores indicate higher levels of differences between adoptive and non-adoptive families. Coefficient alpha was .83. Scores were averaged.

Children's beliefs about adoption: A 10-item scale constructed for this study was used to assess adopted children's views of the permanency of adoption and the degree to which adopted children belong in their adoptive families. Sample items are "When a family adopts a child, that child will always be a part of the family"; "An adopted child is safe in his/her adoptive family." Scores ranged from 1 "no, very untrue" to 4 "yes, very true." Higher scores represent more positive beliefs about adoption. Coefficient alpha was .78. A mean score was computed for each participant.

Mothers' attributions. Mothers responded to the Attribution Style Measure for Parents (ASMP; O'Brien & Peyton, 2002). Mothers responded to two situations regarding the explanations for the misbehavior of their adopted child. They were presented with two scenarios of common child-rearing situations: "child did not do something you wanted done even after asked several times" and "child whined and complained." Alternative situations—"child interrupted when busy" and "child refused to go along with a daily activity" were presented if mother did not respond to the other situations. They were asked to think of a specific recent time when these situations occurred. For each situation, they answered six questions based on a scale ranging from 1 "strongly

disagree" to 6 "strongly agree." Sample questions are "Do you think your child should be punished for not doing what you asked?" "Do you think your child whined and complained on purpose to hurt your feelings or make you mad?" Higher scores represent more conflict-promoting attributions. Coefficient alpha for this sample was .74. Scores from the two situations were computed into a mean score.

  Children's attributions. Children completed an adaptation of the Children's Relationship Attribution Measure (CRAM; Fincham et al., 1998). Items were reworded to be age-appropriate. Children's attributions for their adoptive mothers' behaviors were measured by asking children to think of a recent negative event. Children were to respond to two situations: "mother got mad at you" and "mother yelled at you." An alternative situation of "mother not pleased with something you did" was presented if they did not respond to one of the other events. Each situation had six items that were based on a 6-point rating scale, ranging from "strongly disagree" to "strongly agree." Higher scores represent more conflict-promoting attributions. Sample questions were "Do you think your mom got mad at you on purpose to hurt your feelings?" and "Do you think your mom yelled because of something about her—because she was tired or because she was in a bad mood or because that's the way she is?" Two questions were eliminated from analysis because children had difficulty understanding the items. Coefficient alpha for the remaining items was .76. Scores from the two situations were averaged into a single score.

  Mothers' spirituality. Mothers responded to the religious well-being subscale from the Spiritual Well-Being Scale (SWBS; Ellison, 1983). The 10 items were used to

examine mothers' relationships with their God. Sample items are "I believe that God loves me and cares about me"; "I don't find much satisfaction in private prayer with my God." Negatively worded items were reverse scored. Scoring of items ranged from 1 "strongly disagree" to 6 "strongly agree," with higher scores representing perceptions of higher levels of spirituality. Ellison (1983) reported an alpha coefficient of .87 (Ellison, 1983). For this study, the alpha was .69. An averaged score was used in analysis.

Children's spirituality. A 5-item measure was created by the researchers to assess children's level of spirituality. The scale ranged from 1 "no, very untrue" to 4 "yes, very true." Sample items are "God cares about me," and "I can count on God when I have a problem." Coefficient alpha was .62. A mean score was calculated.

Mothers' perceptions of family support. The nuclear family and formal kinship subscales of the Family Support Scale (Dunst, Jenkins, & Trivette, 1984) were used to assess the extent to which these support resources are perceived by parents as helpful to them in rearing their children. Parents rated helpfulness on a 5-point Likert scale, ranging from 0 "not at all helpful" or "not available" to 4 "extremely helpful." An averaged score across the 5 items was used; alpha was .69.

Children's perceptions of family support. The family support scale of the Social Support Appraisals Scale (APP) of the Survey of Children's Social Support (SOCSS; Dubow & Ullman, 1989) was used to assess children's perceptions of how frequently they receive support from their family members. The 11-item scale was scored from 1 "never" to 5 "always." Sample items are "Can you count on your family for help or advice when you have problems?"; "Do you feel like you don't belong in your family?"

Negatively worded questions were reverse scored. Higher scores indicate more frequent

support. Dubow and Ullman (1989) reported a Cronbach's alpha for the subscales of the

APP to range from .78 to .83. Alpha for this study was .75. A mean score was computed.

Perceptions of Adoption Outcomes

   Mothers' adoption satisfaction. Mothers were assessed on their satisfaction with

the adoption placement by responding to the 16-item parent version of the *Adoption*

Satisfaction Questionnaire (ASQ; Pinderhughes, 1998). Sample items are "This adoptive

placement generally has been a positive experience for our family"; "I often feel

overwhelmed trying to make this adoptive placement work." Negatively worded

statements were reverse scored. Items were scored on a 4-point scale, with higher scores

representing higher levels of satisfaction. Adoption satisfaction was calculated into an

average score. Coefficient alphas for the subscales within the ASQ range from .80 to .92

(Pinderhughes, 1998). Alpha was .86 within this study.

   Children's adoption satisfaction. The 8-item children's scale from the *Adoption*

Satisfaction Questionnaire (ASQ; Pinderhughes, 1998) was used to examine children's

level of adoption satisfaction. Sample questions include "I am glad I live with my new

family"; "I have fewer problems since I came to live with my family." Items were scored

from 1 "no, very untrue" to 4 "yes, very true." A mean score was used in analyses, with

higher scores representing higher levels of adoption satisfaction. Children's scores were

averaged. Reported alphas for the subscales in the ASQ range from .80 to .92

(Pinderhughes, 1998). Alpha was .72 in this study.

Mothers' relationship quality with child. The Parent-Child Relationship Scale (Pianta, 1992) was used to assess mothers' perceptions of the relationship quality with her adopted child. A change made to the measure was the replacement of the word "child" with "adopted child." This 15-item measure uses a 6-point scale, with higher scores indicating higher levels of perceived warmth. Negatively worded items were reverse scored. Sample items are "I share an affectionate, warm relationship with my adopted child"; "My adopted child and I always seem to be struggling with each other." Alpha was .83 in this study. Mean scores were used in analysis.

Children's relationship quality with mother. Children responded to the psychological proximity seeking scale of the Relatedness Questionnaire (Lynch & Cicchetti, 1997). This 6-item measure gives an indication of the degree to which the children wish they were closer to their adoptive mother. Sample questions are "I wish my mom could spend more time with me"; "I enjoy the time I spend with my mom." Items were scored from 1 "no, very untrue" to 4 "yes, very true" with higher scores representing higher levels of wishing they were closer to their adoptive mother. Reported alphas ranged from .83 to .93 (Lynch & Cicchetti, 1997). Alpha was .68 in this study. This outcome variable was averaged.

The Relatedness Questionnaire contains two subscales: psychological proximity seeking and emotional quality. Only the psychological proximity seeking subscale was administered to the children. The subscale cannot be interpreted without the other subscale, emotional quality. In addition, the mean score of the psychological proximity

seeking scale was not associated with the variables of child risk and social cognition and the other adoption outcome variables. This variable was eliminated from further analyses.

Analyses

Descriptives of demographic, social cognition, and adoption outcome variables were examined. Zero-order correlations were run on social cognition, outcome, and select demographic data. Hierarchical regression analyses were used to examine predictors of both children's and mothers' perceptions of adoption outcomes and the potential moderating effect of their social cognitions.

CHAPTER IV

RESULTS

Descriptive Data

Family Demographics

Characteristics of participating mothers are shown in Table 1. Mothers averaged

48 years old at the time of data collection, and about 41% were 50 years old and older.

They were 44 years old at the time of their child's adoption. About 36% of the mothers

had earned at least a bachelor's degree. Majority of the mothers were employed, and most

of the employed mothers worked full-time, defined as 30 or more hours per week. One-

half of the mothers were not living with a spouse or partner.

Children's characteristics are displayed in Tables 2 and 3. Children were almost

10 years old. A little over one-half of the children were female. They were about 2 years

old when they were first placed in the foster care system; the range was 0 to 7 years.

About 45% of the children were placed at age 2 and older. Children experienced about

three foster care moves, range of 1 to 12. About 45% of them had experienced three or

more moves. They were initially placed in their adoptive mothers' homes at almost 4

years of age, range of about 7 days old to 10 years old; 63% were over 2 years old.

Children lived an average of 2 years (range of 0 to 7 years) in their adoptive mothers'

homes until adoption was finalized; about 40% were in the home for a year or less.

Average age at adoption was almost 6 years. Children's average length of time in their

adoptive home was almost 6 years, range of 1 to 10.5 years. About 47% experienced

abuse, and nearly 85% experienced neglect. Four common problems reported by mothers

were attention deficits (62%), behavior problems (57%), learning problems (49%), and developmental delays (30%).

Family characteristics are reported in Table 4. The household size of participating families averaged about 5 members, with nearly 3 of these being children. The average number of adopted children in the home was 2, and majority of the families did not have foster care children residing within their homes. Approximately 96% of the families received an adoption subsidy. Approximately 59% of the families had a total monthly income of $3,000 or more.

Child Risk

Results of the variables that compose child risk are reported in Table 5. On average, children experienced 3 (*SD* = 1.3) of the 6 situations; the median was 3. Two of the children had a score of 0, and one child had a score of 6.

Parental Self-Efficacy and Self-Esteem

Mothers' and children's results are displayed in Tables 6 and 7, respectively. Mothers reported high levels of parental self-efficacy. Their mean score was above 3.5 with a scale range of 1 to 4. Sixty-seven (92%) of the mothers reported their parental competency to be at 3.5 or above. Nearly one-half (48%) of the mothers scored the highest score of 4. One mother (1%) scored low on parental self-efficacy; her score was below 2.5.

Of the 64 children who completed the measure of self-esteem, the average score was above 3 on a scale of 1 to 4. Fifty-three percent of the children had scores of 3.5 and

above. Four (6%) of the children indicated low levels of self-esteem; their score was below 2.

Adoption Beliefs

Mothers' and children's results are reported in Tables 6 and 7, respectively. On average, mothers believed that they were more similar to than different from non-adoptive families. Mean scores were below 2.5 on a scale of 1 to 6. Only 4 (5%) of the mothers scored 3.5 and above.

Children had positive beliefs about adoptive families. The mean score of the 63 children who responded was above 3.5 on a scale of 1 to 4. Fourteen (22%) of the children rated their beliefs at the highest level of 4. Only one child indicated negative beliefs about adoptive families, with a score below 2.5.

Attributions

Mothers' and children's results are displayed in Tables 6 and 7, respectively. Mean score of mothers' conflict-promoting attributions for their child's behavior was above 3.5, on a scale ranging from 1 to 6. Approximately 62% of the mothers had scores of 3.5 and above.

The average score of the 59 children who responded to questions about conflict-promoting attributions for their mother's behavior was below 2.5 on a scale of 1 to 6. Five (8%) of the children scored above 3.5.

Spirituality

Mothers' and children's results are displayed in Tables 6 and 7, respectively. Mothers indicated high levels of spirituality. Their average score was above 5.5, on a

scale ranging from 1 to 6. Nearly two-thirds of the mothers (64%) reported the highest score of 6. Not any of the participants had a mean score below 3.

Children also reported high levels of spirituality. Mean score of the 64 children was above 3.5 on a scale of 1 to 4. Two-thirds of the children rated their spirituality at the highest level of 4.

Family Social Support

Mothers' and children's results are reported in Tables 6 and 7, respectively. Mothers rated the average availability and helpfulness of their social support at about 2 on a 4-point scale. Approximately 10% of the mothers had a score of 4.

Children indicated high levels of support from family members. Their average score was above 4 on a scale of 1 to 5. Almost 90% had a score above 3.5.

Adoption Satisfaction

Mothers' and children's results are displayed in Tables 6 and 7, respectively. Both mothers and children reported being generally satisfied with the adoption placement. Mother and child satisfaction averaged approximately 3.5, on a scale ranging from 1 to 4. Sixty-four percent of the mothers were highly satisfied, with scores ranging from 3.50 to 4.00. Four (5%) of the mothers reported low levels of satisfaction, with scores below 2.5.

Of the 64 children who responded, 78% indicated high levels of satisfaction; scores were 3.5 and above. Over one-third (36%) of the children rated their satisfaction at the highest level of 4.00. Only one of the children reported a level of satisfaction below 2.5.

Relationship Quality

Mothers' results are reported in Table 6. Overall, mothers reported that they had a warm relationship with their child. They averaged above 4.5 on a scale of 1 to 6. Five (7%) of the mothers rated their relationship with their child as low, with scores below 3.5.

Correlations

Demographics and Child Risk

Mother, child, and family results are displayed in Table 8. Mother and family characteristics were not significantly correlated with child risk.

Children's age at initial placement into their mothers' home and age at adoption were positively related to child risk. Children who were older at placement into their mothers' home and at adoption were at higher risk. Length of time in their adoptive mothers' home was negatively correlated with child risk. Children who were in the home for a shorter period of time had more risk characteristics. Children's current age and age at first foster care placement were not significantly associated with child risk.

Demographics and Mother and Child Social Cognitions and Outcomes

Mothers' results are reported in Tables 9 and 10. Mothers' age was negatively related to their family support. Younger mothers perceived more helpfulness from family members. Education was only associated with mothers' attributions. Mothers with more education were more likely to have more conflict-promoting attributions. There were not any significant relations between mothers' characteristics and mothers' outcomes. Mothers' characteristics were not associated with children's cognitions or adoption satisfaction.

Children's results are reported in Tables 11 and 12. Both child age at initial placement into adoptive mothers' homes and age at adoption were positively related to mothers' adoption beliefs. Children who were older at initial placement into their mothers' homes and those who were older at adoption had mothers who believed that adoptive families were more different than non-adoptive families. Length of time in mothers' homes was positively correlated with mothers' spirituality and negatively associated with mothers' adoption beliefs. Children who were in the home longer had mothers who reported higher levels of spirituality. Children who were in the home for a lesser amount of time had mothers who believed that adoptive families were more different than non-adoptive families. No other relations were found between child characteristics and mothers' social cognitions or outcomes. Length of time in the home was negatively correlated with children family social support. Children who were in the home for a shorter period of time reported higher levels of family social support. Child characteristics were not related to any other child social cognitions or adoption satisfaction.

Family results are displayed in Tables 13 and 14. Number of children in the home was related to mothers' parental self-efficacy. Mothers with more children in the home had higher levels of parental self-efficacy. Number of foster care children in the home was positively associated with mothers' family social support. Mothers with more foster care children in the home were more likely to perceive that they received more help from their family members. Monthly income was positively to related attributions. Mothers with higher family incomes had more conflict-promoting attributions. Family

characteristics were not related to any of the children's social cognitions or adoption satisfaction.

Child Risk and Social Cognitions

Mothers' and children's results are reported in Table 15. Only mothers' adoption beliefs were positively correlated with child risk. Children with higher levels of risk characteristics had mother who believed that adoptive families were more different than non-adoptive families. No significant relations were found between child risk and children's social cognitions.

Child Risk and Adoption Outcomes

Mothers' and children's results are reported in Tables 15. Child risk was negatively correlated with mother-reported adoption satisfaction and relationship quality with child. Mothers whose children had high levels of risk characteristics reported lower levels of adoption satisfaction and less warmth in the relationship. Child risk was not significantly correlated with child-reported adoption satisfaction.

Social Cognitions and Adoption Outcomes

Mothers' results are reported in Table 16. Mothers' adoption beliefs and attributions for child behavior were negatively correlated with mothers' adoption satisfaction and relationship quality with child. Mothers who believed that adoptive families were similar to non-adoptive families reported higher levels of adoption satisfaction and more warmth in the parent-child relationship. Those who indicated higher levels of conflict-promoting attributions were less likely to be satisfied with the adoption and with the relationship. Parental self-efficacy was positively correlated to

adoption satisfaction and relationship quality with child. Mothers who perceived that they were more competent in their parenting role were more likely to indicate high levels of adoption satisfaction and more warmth in their relationship with their child. Spirituality and family social support were not significantly correlated with either adoption satisfaction or relationship quality.

Children's results are displayed in Table 17. Children's self-esteem, adoption beliefs, spirituality, and family social support were positively correlated with children's adoption satisfaction. Children were more likely to be satisfied with the adoption when they reported higher levels of self-esteem, more positive beliefs about adoptive families, higher levels of spirituality, and higher levels of family availability. Attributions for mother behavior were not significantly correlated with adoption satisfaction.

Mother and Child Social Cognitions and Adoption Satisfaction

Mothers' and children's results are reported in Table 18. Only mother spirituality and child spirituality were related. Mothers with high levels of spirituality were more likely to have children with high levels of spirituality. Mothers' perceptions of adoption outcomes were not significantly correlated with children's perceptions of outcomes.

Regression Analyses of Social Cognitions on Adoption Outcomes

Adoption Satisfaction

Mothers' results are reported in Table 19. Mothers' cognitions (parental self-efficacy, adoption beliefs, attributions, religiosity, and family social support) were entered as a single block to predict adoption satisfaction. The adjusted R^2 was .37, $F(5, 67) = 9.35$, $p < .001$. Univariate results indicated that mothers who believed that adoptive

families were similar to non-adoptive families and those with less conflict-promoting attributions were likely to be more satisfied with the adoption. Parental self-efficacy, religiosity, and family social support were not related to adoption satisfaction.

Children's results are reported in Table 20. All the children's cognitive variables were entered as a single block. The adjusted R^2 was .21, $F(5, 51) = 4.05$, $p < .01$. Univariate results indicated that children with high levels of self-esteem and beliefs that family was frequently available to them were more likely to be satisfied with the adoption placement.

Relationship Quality

Mothers' results are reported in Table 21. Mothers' cognitions of parental self-efficacy, adoption beliefs, attributions, religiosity, and family social support were entered in the same block. The adjusted R^2 was .33, $F(5, 67) = 8.17$, $p < .001$. Univariate results showed that mothers with high parental self-efficacy, beliefs that adoptive families were similar to non-adoptive families, and less conflict-promoting attributions were more likely to have a warm relationship with their child. Spirituality and family social support were not related to relationship quality.

Hierarchical Regression Analyses to Examine the Moderating Effect of Social Cognitions Between Child Risk and Adoption Outcomes

Adoption Satisfaction

Mothers' results are reported in Table 22. Child risk, mothers' cognitions (parental self-efficacy, adoption beliefs, and attributions), and interactions between child risk and mothers' cognitions were each entered as a separate block; mothers' cognitions

and child risk were centered to create the interaction terms. Mothers' spirituality and family social support were eliminated from analysis because they were not significantly correlated with mothers' adoption satisfaction. Child risk accounted for 9% of the variance ($p = .01$). When children experienced more risk, mothers were less satisfied with the adoption. When cognitions were added in the second step, they accounted for 34% of the variance ($p < .001$). Adoption beliefs and attributions were negatively related to adoption satisfaction. Interaction terms between child risk and the cognitive variables accounted for 8% of the variance ($p = .02$). The adjusted R^2 for the final model was .45, $F(3, 65) = 3.52$, $p < .05$. Only the interaction between child risk and parental self-efficacy was significant. Figure 1 displays the interaction. Mothers of children who experienced more risk experienced more adoption satisfaction when their levels of parental self-efficacy were high. Mothers of children with higher risk scores reported lower levels of adoption satisfaction when their levels of parental self-efficacy were low.

Moderating effects of cognitions between child risk and children's adoption satisfaction were not run because child risk and adoption satisfaction were not significantly correlated.

Relationship Quality

Mothers' results are displayed in Table 23. Child risk, mothers' social cognitions (parental self-efficacy, adoption beliefs, and attributions), and interactions between child risk and mothers' social cognitions were entered into separate blocks; mothers' cognitions and child risk were centered to create the interaction terms. Mothers' spirituality and family social support were eliminated from analysis because they were

not significantly associated with mothers' relationship quality with child. Child risk

accounted for 8% of the variance ($p = .02$). Mothers with children who have more at-risk

characteristics reported a less warm relationship with their child. Cognitions entered into

the second step accounted for 33% of the variance ($p < .001$). All three cognitive

variables were significantly related to relationship quality with the child—adoption

beliefs and attributions were negatively associated, and parental self-efficacy had a

positive relationship. The interaction terms between child risk and the three cognitive

variables were not significant ($p = .25$), indicating that the cognitive variables did not

moderate the relation between child risk and relationship quality with the child. The

adjusted R^2 for the final model was .38, $F(3, 65) = 1.39$, $p = .25$.

CHAPTER V

DISCUSSION

This study contributes to our understanding of adoptive families by examining their characteristics and the relations between child risk, social cognitions, and adoption outcomes and including the perspectives of both adoptive mothers and adopted children. The unique experiences of adopted children were revealed in this study. Their perceptions of self-esteem and family support were important to their adoption outcomes. Adoptive mothers' perceptions of parental self-efficacy, adoption beliefs, and attributions were relevant. Children's age at adoption and age at initial entry into their adoptive mothers' home were not related to mothers' adoption outcomes. These findings are contrary to a substantial amount of research that has concluded that older age at placement is related to parents' poor adoption outcomes. Social support was not associated with mothers' adoption outcomes. Social support remains an important cultural resource that needs future attention in the adoption research on Black families. The importance of these findings along with the other results will be discussed accordingly: (a) children's adoption adjustment (b) mothers' adoption adjustment.

Children's Adoption Adjustment

Overall, children were highly satisfied with their adoption placement. This finding replicates the conclusions of Pinderhughes' (1998) research on older adopted children.

The self-esteem and family support of the children in this study contributed to their adoption satisfaction.

Positive perceptions of self are emphasized within the Black community (Hill, 1998) and have been an important resource for persons who have experienced stressful events (Berry, 1989; Rutter, 1995). In the Family Model of Emotional Development of African American Children, Barbarin (1993) proposes that children's self-esteem is a resiliency characteristic that can positively affect children's developmental outcomes.

The children's level of self-esteem was above the midpoint, near the high end of the scale. This is similar to Harter's samples of children (Harter, 1985). Children with positive views of themselves believe they are worthy to belong in a family and may have greater ease in transitioning into their new environments. Hill (1998) reported that high levels of self-esteem are related to social competence. Probably, their positive self-esteem helped them to deal with stressful events by using effective coping strategies.

Also children depended on an external source of support—the help of their adoptive family members. The positive effects of family support in the lives of Black children have been reported by other researchers (Overstreet et al., 1999; Taylor, 1996); these supportive relationships are considered to be resilience sources (Walsh, 1998). Along with their adoptive mothers, on average, the children also had three other family members within their household to rely on. One of these members was another adopted child with whom the child could relate. For some children, the family circle could have included extended family members. Along with being separated from their biological families, many of these children experienced multiple foster care moves that may have

created a sense of instability. Perhaps, being able to rely on their adoptive family members gave them a sense of belonging and permanence in their lives; something that they lacked in their past (Cowan, 2004; Triseliotis, 2002). When they experienced stress, they believed they could depend on their families to help them overcome the distressing event.

Children's spirituality did not significantly contribute to the explanation of their adoption satisfaction. Despite this lack of relation, children's spirituality appeared to be important in their lives, as shown by their reports of high levels of spirituality. Similar to their adoptive parents, children were highly spiritual. Their spirituality was positively related to their mothers' spirituality. Living within a home where spirituality is important, children learn these practices (Hill, 1998). Also, their spirituality could have been developed in their past and may have helped them to handle difficult situations. Hill (1998) indicated that a strong religious orientation is a resiliency characteristic that is likely present within Black children who have overcome challenging circumstances. The children in this study may have viewed their God as the Being that has remained consistently present throughout their lives.

Child risk was not related to children's adoption satisfaction. In Pinderhughes' (1998) study that included adopted children as participants, children with a more severe disability reported that they were less satisfied with their adoption placement. Severity of children's disabilities was rated according to Pinderhughes and two adoption caseworkers. In this study, children's risk characteristics were reported by adoptive mothers. This insignificant finding could be a result of the lack of accord between

mothers' and children's perceptions of the children's well-being. A professional diagnosis may have been needed. Furthermore, for these children, maybe it is not the number of risk characteristics but the severity of their problems or specific aspects of the problem that may affect their adoption outcomes.

Children had low levels of conflict-promoting attributions for their adoptive mothers' behavior with them, and their attributions were not related to their adoption outcome. Black children are taught the importance of respecting their parents by adhering to their rules and exhibiting appropriate behaviors. Perhaps, these children acknowledged that they knew how to behave and attributed the negative behaviors to themselves. In addition, Brody et al. (1996) explained that the weak relation between children's attributions for their parents' behaviors and ineffective communication found in their study may be due to children's limited control during parent-child interactions. As children have more control during parent-interactions, then their attributions may become more related to their parent-child communication (Brody et al., 1996). Their reasoning may also explain the non-existent relation between child attributions for their adoptive mothers' behaviors and child adoption outcome found in this study.

Mothers' Adoption Adjustment

Overall, mothers reported positive adoption outcomes. Similar results have been reflected in the findings of other adoption research (Lightburn & Pine, 1996; Pinderhughes, 1998). Adoption outcomes for parents who had children with more risk characteristics were dependent on their parental self-efficacy. Overall, mothers indicated that they had high levels of parental self-efficacy. A strong sense of self is emphasized

within Black families (Littlejohn-Blake & Darling, 1993). Similar to Black grandmothers who assume the parenting responsibilities of their grandchildren because they believe they are capable of rearing them, these mothers probably knew they would have to have a strong belief in their parenting abilities to care for these children who are likely to have adverse histories and current developmental problems. Mothers who did not believe that they had the competency to parent their adopted child experienced negative outcomes in comparison to their counterparts who had confidence in their parenting skills. These results are similar to other findings on the relations between parental self-efficacy and outcomes (Coleman & Karraker, 2000; Cutrona & Troutman, 1986; Wells-Parker et al., 1990). These older children entered their adoptive parents' lives with histories and characteristics that challenge the success of the adoption outcome. According to Bandura (1986), self-efficacy influences how people respond to distressing events. Perhaps, mothers with a strong sense of parental competency believed that they could influence their children's lives. They were probably less likely to perceive their children's experiences as stressful, and this resulted in a more positive outcome. Those with lower levels of parental self-efficacy could have undermined the adoption outcome by creating emotional barriers between themselves and their children because they did not believe they could have an impact on their children's lives.

Children's placement ages were not significantly related to mothers' adoption outcomes. Prior research has shown that older age at placement is related to negative outcomes because of the children's birth family and foster care histories that can be problematic for parents (Barth et al., 1988; Leung & Erich, 2002). Parents may have

learned how to manage difficulties that arise because of their children's past. Also,

Pinderhughes (1998) has suggested that the knowledge that parents have of their

children's pre-placement experiences may be less important to their adoption outcomes,

suggesting parents may be more concerned about children's post-placement functioning.

Neither spirituality nor family social support was significantly associated with

adoption outcomes. Lack of relations may be due to measurement problems. This was a

highly religious group. Nearly two-thirds of the mothers reported the highest score of 6,

and none of the mothers reported low levels of spirituality. Thus, there was little variation

among the mothers. Despite the insignificant relation to their adoption outcomes,

attention must be focused on the mothers' high levels of spirituality. Black individuals'

relationship with a Higher Power has been reported in the literature innumerable times

(Hill, 1972; Mattis 2000; McAdoo, 1995); in particular, Black women are known for their

intense focus on spirituality and religiosity (Mattis, 2000). A relationship with their God

probably provided support to these mothers during challenging times, especially those

situations they perceived to be out of their control (McAdoo, 1995; Wallace &

Bergeman, 2002). These mothers may have used their spirituality to help them confront,

accept, and cope with their difficult life events (Mattis, 2002; Wallace & Bergeman,

2002). In essence, their spirituality was what may have guided them in how to handle

their lives (Mattis, 2002; McAdoo, 1995; Wallace & Bergeman, 2002).

Mothers reported relatively low levels of family support, and their family support

was not linked to their adoption outcomes. Asking about the availability and helpfulness

of specific family members may not have been the most appropriate way to assess family

support for this group of mothers. Three of the five questions regarding family support did not apply to single mothers because these items pertained to a spouse or partner. A better way to measure family support may have been to use items that addressed specific types of social support—emotional, instrumental, and informational—and ask mothers to rate family support, regardless of who the family member was. In addition, these were a group of relatively older parents; approximately 41% of the mothers were age 50 years and older. The older they were the less likely they were to perceive their family members as available or helpful. This finding is similar to other research that has shown that older Black individuals are less likely than their younger counterparts to receive support from family (Chatters et al., 2002). Kin resources are likely to decline with age. Possibly, older individuals are more likely to be the providers of support than the recipients of support (Taylor, 1986).

As hypothesized, adoption beliefs and attributions were linked to mothers' adoption outcomes. Mothers believed that adoptive families were more similar to than different from non-adoptive families, and mothers with these similarity beliefs reported more positive outcomes. These perceptions are similar to those in a fictive kin relationship in which members perceive their bond to be similar to that of a relationship by blood or marriage (Chatters et al., 1994). Researchers have reported that many participants believe that adoptive families are similar to biological families (Dave Thomas Foundation for Adoption & The Evan B. Donaldson Adoption Institute, 2002; Miall, 1996). The mothers in this study may have believed that indicating differences may suggest that one type of family structure is better than the other. Miall (1996) has

suggested that individuals who indicate similarities among adoptive and biological families may believe that the functioning and the level of commitment in families is more important than the formation of families and blood tie within families.

Overall, mothers did have relatively high levels of conflict-promoting attributions, evidenced by 62% of the mothers who agreed that the misbehaviors were attributable to their children. When Black parents instruct their children about appropriate behavior, they expect their children to be obedient. Therefore, when children misbehave, parents believe that their children know how to behave and have the ability to act appropriately. Those mothers who reported higher levels of conflict-promoting attributions were more likely to have negative outcomes. This finding is similar to other research on the relations between maternal attributions, emotions, and behaviors (Miller, 1995; Snyder et al., 2005).

Strengths and Limitations

This is one of the few studies that have focused on Black adoptive families, in which both adoptive mothers and adopted children participated. Families' unique experiences and the similarities and differences of mothers' and children's social cognitions and outcomes were revealed. Along with the investigation of the experiences of one ethnicity and children, other efforts to reduce flaws within this study were a sample that had adoptions that were non-relative and children with a relatively narrow age range and similar age at adoption. Along with these strengths, there are limitations to be discussed.

Because families were recruited through a third party—DSS—active recruitment efforts were limited. Recruitment was a multi-step process that affected the timeliness of obtaining data.

This was a small, convenience sample. Respondents chose to share their experiences, which were more likely to be positive. Families experiencing challenging adoptive placements may have been less willing to participate. Only adoptive mothers were used as the sources of information on children's birth family and foster care histories because adopted children's records were sealed. Adoptive mothers may not have had complete knowledge of their children's backgrounds. Even though differences among children's characteristics were narrowed by selecting children who were adopted at about age 3 and older and who were 7 to 11 years of age at data collection, differences still manifested. Children's length of time in the home varied. Results within this study showed that children who were in the home for a shorter period of time perceived higher levels of family support. There was not any differentiation between children who were adopted by their foster parents and those who were adopted by someone with whom they did not have a prior relationship; these children could have different experiences.

A couple of measures had to be created for this study because there was a lack of measures designed for Black families and adoptive families. Some of the measures used had low alphas; these results were due to a lack of variability between participants. Lastly, this was a cross-sectional study—a snap-shot in time. A comprehensive understanding of the developmental processes that are occurring within these families will require a more intensive and longer term research design.

Conclusions

Research on older adopted children and their adoptive families revealed their characteristics and the social cognitions that contributed to their adoption outcomes. In this study, both adoptive mothers and adopted children reported positive adoption outcomes. Positive perceptions of self, a strength within Black families, were important to the success of adopted children's and their adoptive mothers' outcomes. In addition, results revealed that there is a particular population who is likely to adopt older children.

Both children's and mothers' adoption outcomes were related to their self-perceptions. Children with high levels of self-esteem experienced more positive outcomes. These are children who had risk characteristics that had the potential to affect their adoption outcomes. Children with adverse backgrounds are especially vulnerable to have low self-esteem. Children's self-esteem must be nurtured. Reduction of risk impact can occur by providing these children with nurturing relationships and environments (Walsh, 1998). Children entering the foster care system need to be matched with a consistent, mature person who can be a stable presence as children endure multiple transitions. For children who cannot live with their biological families, being part of an adoptive family solidifies permanency and is beneficial to children in that it can have a positive effect on child development (Johnson, 2002).

These mothers adopted children who had experienced unfavorable experiences that were likely to cause difficulties within the adoptive families. The personal characteristic that helped parents was the positive perceptions of parental self-efficacy. This characteristic buffered the potential negative effects of risks. During the pre- and

post-adoption processes, parents need to be empowered. Their competency can be enhanced by providing them with knowledge about child development and information on how to handle behaviors and conditions that arise because of children's histories and obtain the services of additional resources. Equipping parents with the skills to rear their children is important in parents' adoption outcomes.

The adoptive mothers in this study were similar to other adoptive parents who have adopted older children (Maza, 2002; Pinderhughes, 1998); many of them were older and single. Recruiting strategies need to be directed towards this population. Agencies have sought to recruit families who are two-parent, middle income, without any children, and/or young (Hill, 1999). This narrow recruitment of adoptive parents has not appropriately targeted diverse family forms (Hamm, 1997). This practice tends to exclude single people, single parents, and grandparent families; these family structures are common in many Black families. These findings suggest that agencies need to be more flexible in recruiting adoptive parents.

More research on Black adoptive families and other ethnic groups will contribute to the understanding of these families. Self-esteem and social support have been considered resiliency factors for children who have experienced adverse conditions (Rutter, 1995; Walsh, 1998). In this study, self-esteem and social support were important in these children's lives. Research on the resiliency of adopted children is needed. Rutter (1995) has proposed that children's self-esteem can be nurtured through healthy relationships and successful accomplishment of tasks. Children's relationships with their adoptive father, biological sibling in the home, teacher, and/or peers and their

performance in school may be associated with children's self-esteem. Investigation on the potential protective mechanisms of parental supervision, coping strategies, and school experiences (Rutter, 1995) may help children to have positive outcomes. Spirituality appeared to be important in both mothers' and children's lives, as evidenced by their reports of high levels of spirituality. Further investigation will result in understanding how their spirituality operates in their lives. For parents, examine the specific dimensions of social support—emotional, instrumental, and information—and how these affect their adoption outcomes. Investigation of the adoption experiences of single and married fathers would contribute another dimension into understanding father-child relationships and other dynamics that are occurring within the family. Lastly, longitudinal research would provide a more comprehensive understanding of the processes that are occurring within these families.

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Appendix. Tables and Figure

Table 1

Descriptive Statistics of Mothers' Demographic Characteristics

Variable	N	n	%	M	SD
Age	71			48.00	9.53
Educational level	73				
Some schooling		8	11.0		
High school graduate		8	11.0		
Some college, no degree		16	21.9		
Associate's degree		15	20.5		
Bachelor's degree		8	11.0		
Some graduate work		8	11.0		
Master's degree		5	6.8		
More than one master's degree; doctoral degree		5	6.8		
Employment status	73				
Employed		55	75.3		
Marital status	73				
Married, living together		36	49.3		
Married but separated		1	1.4		
Single, never married		11	15.1		
Divorced		18	24.7		
Widowed		7	9.6		

Table 2

Descriptive Statistics of Children's Demographic Characteristics and Foster Care and Adoption Histories

Variable	N	n	%	M	SD
Participation	73				
Yes		64	87.7		
Sex	73				
Female		40	54.8		
Years of age	73			9.49	1.46
Years of age at first foster					
care placement	67			1.71	1.56
Number of foster care moves	67			2.81	1.92
Years of age at initial placement					
into adoptive mother's home	73			3.70	2.57
Years of age at adoption	73			5.92	2.14
Length of time in adoptive					
mother's home	73			5.80	2.52

Table 3

Frequencies of Children's Well-Being and Experiences of Abuse and Neglect

Variable	*N*	*n*	%
Well-being			
Attention	73	45	61.6
Behavior	72	41	56.9
Learning	72	35	48.6
Developmental delay	73	22	30.1
Experience of abuse	73		
Yes		34	46.6
No		24	32.9
Not known		13	17.8
Suspected		2	2.7
Experience of neglect	73		
Yes		62	84.9
No		5	6.8
Not known		6	8.2

Table 4

Descriptive Statistics of Families' Demographic Characteristics, N = 73

Variable	n	%	M	SD
Household size			4.59	1.75
Number of children in home			2.88	1.62
Adopted children in home			2.11	1.14
Foster care children in home			.30	.76
Total monthly income				
$1000-$1499	5	6.8		
$1500-$1999	9	12.3		
$2000-$2499	8	11.0		
$2500-$2999	8	11.0		
$3000-$3999	27	37.0		
$4000-$4999	5	6.8		
$5000-$5999	6	8.2		
$6000-$6999	2	2.7		
$8000-$8999	2	2.7		
more than $10000	1	1.4		

Table 5

Frequencies of Child Risk Index

Variable	N	n	%
Abuse	73		
Yes		34	46.6
Neglect	73		
Yes		62	84.9
Age at initial placement into			
adoptive mother's home	73		
Age $\geq$ 3 years		42	57.5
Disruption	73		
Yes		7	9.6
Behavior problems	72		
Yes		41	56.9
Developmental problems	73		
Yes		51	69.9

Table 6

Descriptive Statistics of Mothers' Social Cognitions and Adoption Outcomes, N = 73

Variable	*M*	*SD*	Score range
Parental self-efficacy	3.77	.31	2.25 - 4.00
Adoption beliefs	2.42	.65	1.27 - 4.33
Attributions for child behavior	3.64	.79	1.79 - 5.57
Spirituality	5.75	.51	3.71 - 6.00
Family social support	1.97	1.13	.00 - 4.00
Adoption satisfaction	3.48	.44	1.81 - 4.00
Relationship quality with child	4.76	.78	2.20 - 5.87

Table 7

Descriptive Statistics of Children's Social Cognitions and Adoption Outcome

Variable	N	M	SD	Score range
Self-esteem	64	3.39	.53	2.33 - 4.00
Adoption beliefs	63	3.68	.35	2.40 - 4.00
Attributions for mother behavior	59	2.34	.91	1.00 - 5.13
Spirituality	64	3.86	.27	2.60 - 4.00
Family social support	63	4.24	.57	2.45 - 5.00
Adoption satisfaction	64	3.66	.36	2.25 - 4.00

Table 8

Correlations Between Child Risk Index and Mother, Child, and Family Characteristics

Variable	Child risk index
Mother	
Age	-.10
Educational level	.09
Child	
Current age	.00
Age at first foster care placement	.24
Age at initial placement into adoptive mother's home	.40***
Age at adoption	.30*
Length of time in adoptive mother's home	-.41***
Family	
Household size	-.05
Number of children in the home	-.14
Number of adopted children in the home	-.15
Number of foster care children in the home	-.05
Monthly income	.10

*$p < .05$. ***$p < .001$.

Table 9

*Correlations Between Mothers' Demographics and Mothers'
Social Cognitions and Adoption Outcomes*

Variable	Age	Education
Parental self-efficacy	-.07	-.08
Adoption beliefs	-.17	-.03
Attributions	-.07	.32[**]
Spirituality	-.09	.16
Family social support	-.34[**]	.11
Adoption satisfaction	.22	-.13
Relationship quality with child	.05	-.14

[**]$p < .01$.

Table 10

Correlations Between Mothers' Demographics and Children's Social Cognitions and Adoption Outcome

Variable	Age	Education
Self-esteem	.17	-.12
Adoption beliefs	-.03	.09
Attributions	-.16	.18
Spirituality	-.03	-.07
Family social support	.09	.00
Adoption satisfaction	.11	.06

Table 11

Correlations Between Children's Demographics and Mothers' Social Cognitions and Adoption Outcomes

Variable	Current age	Age at first foster care placement	Age at initial placement into adoptive mother's home	Age at adoption	Length of time in adoptive mother's home
Parental self-efficacy	.06	.03	-.03	-.04	.07
Adoption beliefs	.06	.17	.29[*]	.26[*]	-.26[*]
Attributions	-.07	-.05	.08	.10	-.13
Spirituality	.14	-.10	-.19	-.14	.27[*]
Family social support	.06	-.03	.07	.04	-.04
Adoption satisfaction	-.08	.00	-.21	-.12	.16
Relationship quality with child	-.17	-.16	-.18	-.09	.09

[*] $p < .05$.

Table 12

Correlations Between Children's Demographics and Children's Social Cognitions and Adoption Outcome

Variable	Current age	Age at first foster care placement	Age at initial placement into adoptive mother's home	Age at adoption	Length of time in adoptive mother's home
Self-esteem	-.09	-.24	-.22	-.18	.18
Adoption beliefs	-.20	.06	.03	-.01	-.15
Attributions	-.08	-.11	-.14	-.18	.10
Spirituality	.11	.04	.01	-.01	.05
Family social support	-.11	.06	.18	.15	-.26[*]
Adoption satisfaction	.01	-.04	-.10	-.04	.11

[*] $p < .05$.

Table 13

Correlations Between Family Demographics and Mothers' Social Cognitions and Adoption Outcomes

Variable	Household size	Number of children in the home	Number of adopted children in the home	Number of foster care children in the home	Monthly income
Parental self-efficacy	.09	.11	.27*	.00	-.06
Adoption beliefs	-.11	-.15	-.15	-.13	-.04
Attributions	-.12	-.18	-.15	-.02	.23*
Spirituality	.09	.05	-.03	-.01	.04
Family social support	.18	.06	-.00	.25*	.21
Adoption satisfaction	.15	.19	.15	.04	-.09
Relationship quality with child	.18	.20	.12	.20	-.12

*$p < .05$.

Table 14

Correlations Between Family Demographics and Children's Social Cognitions and Adoption Outcome

Variable	Household size	Number of children in the home	Number of adopted children in the home	Number of foster care children in the home	Monthly income
Self-esteem	.03	.04	.17	-.06	-.06
Adoption beliefs	.06	.06	.04	.10	-.08
Attributions	.08	.02	-.02	.04	.09
Spirituality	.02	.03	.03	.13	-.09
Family social support	-.18	-.13	.05	-.17	.02
Adoption satisfaction	.13	.17	.22	.10	-.09

Table 15

Correlations Between Child Risk Index and Mothers' and
 Children's Social Cognitions and Adoption Outcomes

Variable	Child risk index
Mothers	
Parental self-efficacy	.02
Adoption beliefs	.42***
Attributions	-.06
Spirituality	.10
Family social support	.13
Adoption satisfaction	-.30*
Relationship quality with child	-.28*
Children	
Self-esteem	-.10
Adoption beliefs	.11
Attributions	-.20
Spirituality	.02
Family social support	.08
Adoption satisfaction	.03

*$p < .05$. ***$p < .001$.

Table 16

Correlations Between Mothers' Social Cognitions and Adoption Outcomes

Variable	1	2	3	4	5	6	7
1.Adoption satisfaction	—	.68***	.26*	-.52***	-.43***	-.09	.04
2. Relationship quality with child		—	.33**	-.46***	-.43***	-.04	.02
3. Parental self-efficacy			—	-.23*	-.15	.04	-.17
4. Adoption beliefs				—	.16	-.08	.04
5. Attributions					—	.17	-.09
6. Spirituality						—	.02
7. Family social support							—

*$p < .05$. **$p < .01$. ***$p < .001$.

Table 17

Correlations Between Children's Social Cognitions and Adoption Outcome

Variable	1	2	3	4	5	6
1. Adoption satisfaction	__	.41**	.36**	-.09	.49***	.40**
2. Self-esteem		__	.23	-.08	.19	.21
3. Adoption beliefs			__	.06	.47***	.28*
4. Attributions				__	.09	-.34**
5. Spirituality					__	.21
6. Family social support						__

*p < .05. **p < .01. ***p < .001.

Table 18

Correlations Between Mothers' and Children's Social Cognitions and Adoption Outcome

Mother Variable	Child Variable	*r*
Parental self-efficacy	Self-esteem	.04
Adoption beliefs	Adoption beliefs	.11
Attributions for child's behavior	Attributions for mother's behavior	-.02
Spirituality	Spirituality	.34[**]
Family social support	Family social support	-.24
Adoption satisfaction	Adoption satisfaction	.00

[**] $p < .01$.

Table 19

Regression Analysis of Mothers' Social Cognitions on Mother-Reported Adoption Satisfaction, N = 73

Variable	B	$SE\ B$	β	ΔR^2
				.41
Parental self-efficacy	.17	.14	.12	
Adoption beliefs	-.30	.07	-.45***	
Attributions	-.18	.05	-.33**	
Spirituality	-.01	.08	-.08	
Family social support	.02	.04	.05	

Note. Adjusted R^2 = .37, $F(5, 67)$ = 9.35, $p < .001$.

** $p < .01$. *** $p < .001$.

Table 20

Regression Analysis of Children's Social Cognitions on Child-Reported Adoption Satisfaction, N = 57

Variable	B	SE B	β	ΔR^2
				.28
Self-esteem	.21	.08	.34[**]	
Adoption beliefs	-.02	.13	-.02	
Attributions	.00	.05	.00	
Spirituality	.34	.19	.23	
Family social support	.16	.07	.29[*]	

Note. Adjusted R^2 = .21, $F(5, 51)$ = 4.05, $p < .01$.

[*] $p < .05$. [**] $p < .01$.

Table 21

Regression Analysis of Mothers' Social Cognitions on Mother-Reported Relationship Quality With Child, N = 73

Variable	B	$SE\ B$	β	ΔR^2
				.38
Parental self-efficacy	.53	.26	.21[*]	
Adoption beliefs	-.43	.12	-.35[**]	
Attributions	-.34	.10	-.34[**]	
Spirituality	-.02	.15	-.02	
Family social support	.02	.07	.03	

Note. Adjusted R^2 = .33, $F(5, 67)$ = 8.17, $p < .001$.

[*] $p < .05$. [**] $p < .01$.

Table 22

Hierarchical Regression Analysis of Child Risk Index and Mothers' Social Cognitions on Mother-Reported Adoption Satisfaction, N = 73

Variable	B	$SE\ B$	β	ΔR^2
Step 1				.09
Child risk index	-.10	.04	-.30[*]	
Step 2				.34
Child risk index	-.06	.03	-.17	
Parental self-efficacy	.18	.14	.13	
Adoption beliefs	-.24	.07	-.36[**]	
Attributions	-.20	.05	-.36[***]	
Step 3				.08
Child risk index	-.08	.04	-.23[*]	
Parental self-efficacy	.41	.16	.29[*]	
Adoption beliefs	-.20	.07	-.29[**]	
Attributions	-.17	.05	-.31[**]	
Child risk X Parental self-efficacy	.23	.10	.26[*]	
Child risk X Adoption beliefs	-.07	.05	-.14	
Child risk X Attributions	-.03	.04	-.06	

Note. Adjusted R^2 for the Final Model = .45, $F(3, 65) = 3.52$, $p < .05$.

[*] $p < .05$. [**] $p < .01$. [***] $p < .001$.

Table 23

Hierarchical Regression Analysis of Child Risk Index and Mothers' Social Cognitions on Mother-Reported Relationship Quality with Child, N = 73

Variable	B	SE B	β	ΔR^2
Step 1				.08
Child risk index	-.17	.07	-.28[*]	
Step 2				.33
Child risk index	-.12	.06	-.19	
Parental self-efficacy	.57	.25	.22[*]	
Adoption beliefs	-.32	.13	-.26[*]	
Attributions	-.37	.10	-.37[***]	
Step 3				.04
Child risk index	-.14	.07	-.24[*]	
Parental self-efficacy	.87	.30	.34[**]	
Adoption beliefs	-.26	.14	-.22	
Attributions	-.33	.10	-.33[**]	
Child risk X Parental self-efficacy	.29	.18	.18	
Child risk X Adoption beliefs	-.09	.10	-.10	
Child risk X Attributions	-.01	.07	-.01	

Note. Adjusted R^2 for the Final Model = .38, $F(3, 65) = 1.39$, $p = .25$.
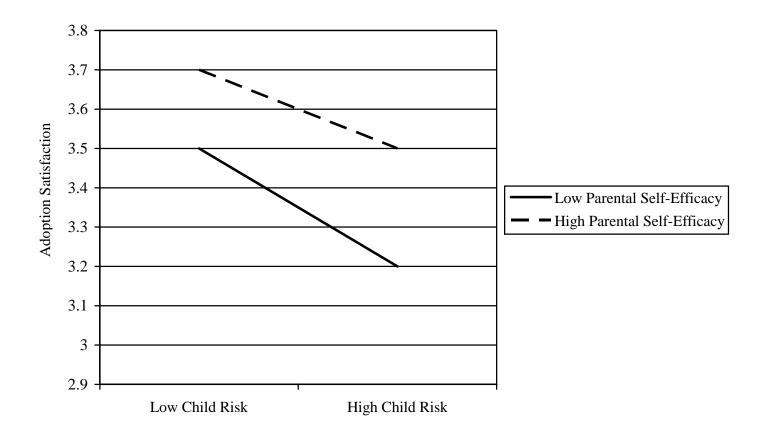
[*] $p < .05$. [**] $p < .01$. [***] $p < .001$.

Figure 1. Moderating Effect of Mothers' Parental Self-Efficacy Between Child Risk and Mothers' Adoption Satisfaction