An Exploratory Study of Individuals’ Transition to Adoptive Parenthood

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**BACKGROUND**

Occupational therapists are equipped to support clients through transitional phases. They can do this by adapting environments, modifying tasks, and assessing clients’ daily routines and occupations (AOTA, 2020). Literature shows that the transition to adoptive parenthood can be accompanied by hardships (Tasker & Wood, 2016). According to the Child Trends Database, in 2018 there were 1.8 million children who had been adopted in the U.S. (Child Trends Database, 2018). This signifies a large population linked by a common experience: the adoption process.

**PURPOSE**

The purpose of this study was to explore individuals’ transition to adoptive parenthood through an occupational therapy lens. More specifically, this study aimed to investigate how individuals’ performance patterns and daily occupations change through this transition. Ultimately, the purpose of this study was to gain insight into this transition. The results bring attention to this population and give a voice to individuals’ lived experiences. The results help to illustrate the role OT could play within this population and contribute to the limited research available connecting OT to the private, domestic adoption process and population.

**METHODS**

- Survey (n=40) recruited from adoption related social media groups (groups=9)
- Interview (n=6) process conducted over Zoom
- Transcribed through the Microsoft dictation tool and data organized in Dedoose
- Member checking
- Braun and Clarke (2006) thematic analysis method, 3 themes identified and supported through the data

*Acknowledgement: A very special thank you to my mentor, Devon Ayres, for your support & guidance

<table>
<thead>
<tr>
<th>THEMES</th>
<th>DESCRIPTORS</th>
<th>QUOTES</th>
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<tr>
<td>Centered on Child</td>
<td>During the transition to adoptive parenthood, there is a shift of performance patterns and occupations from being centered on self to center on child. Less time for: self-care, home management, leisure. Changes in sleep and eating routines, professional roles &amp; routines</td>
<td>“Sleep schedules were completely changed. Mornings used to be pretty lazy. We both worked from home but now we get up by eight o’clock and make milk for her, turn on tv and the day starts. Everything is centered around her now, so she comes first and then all of our things we need to do come when we have time.”</td>
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<td>Increased Realistic Information and Education</td>
<td>Increased realistic education and information is needed throughout the adoption process. Child’s past, effects of adoption on mental health, navigating open relationships, feeding, trauma, attachment, emotional strain for birth family</td>
<td>“They did not require, in my opinion, any education that was actually pertinent. I think that that is a huge missing piece of adoption. I don’t think any agencies or home study providers make you do enough education”</td>
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<td>Advocate for Child</td>
<td>Through the transition to adoptive parenthood, individuals assume the role of advocate for their child. Legal processes, services &amp; intervention, best interest of the child</td>
<td>“Our son actually has two diagnoses. I always knew it, but was told that I was crazy and I was “looking for things” and that he didn’t need occupational therapy...He’s going to kindergarten, and I know I’m going to have to fight for services.”</td>
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**RESULTS**

- Large variability in length of adoption process. Majority reporting between 6 months - 1 year, demonstrating the “unknown” of the process
- 54% reported feeling “extremely prepared for parenthood, 41% reported feeling “somewhat prepared”, and 5% reported feeling “not prepared”
- 97% reported child’s arrival impacted their daily activities, routines & habits

**DISCUSSION**

Changes in parents’ performance patterns & occupations are evident. Parents manage both their own and their child’s performance patterns & occupations by putting their child first, completing their own when there is time. The occupational need for this population is finding occupational balance and healthy performance patterns, which appear to come with time and with scheduling. The results brings attention to this population and give a voice to individuals’ lived experiences. The results help to illustrate the role OT could play within this population and contribute to the limited research available connecting OT to the private, domestic adoption process and population.

**IMPLICATIONS FOR OT**

- Results help describe the occupational needs of this population & contribute to limited body of research
- Using this data, OTs can support clients in establishing healthy performance patterns to create occupational balance when integrating their child into their home
- Therapists can support parents’ role competency when assuming the role of advocate by providing education on available services (post placement supports)
- OTs can provide education on topics within OT’s scope: attachment, childhood trauma, sleep and eating routines (pre-placement education)
- Demonstrates that OT has a role in supporting this population for a smoother transition
- Adoption agencies can hire OTs as consultants. OTs can work directly with clients (pre and post placement) or indirectly by reviewing & contributing to curriculum
- Results provide data that could be used to support a position paper topic to further illustrate OT’s role within this population

**DISSEMINATION**

- Provides education on OT in general, and the support OT can offer to this population
- Provides reassurance and give a voice to their experiences
- Adobe Spark webpage created to share with participants

**Participants’ Responses When Asked How Prepared They Felt For Parenthood**

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<tr>
<th>Extremely Prepared</th>
<th>Somewhat Prepared</th>
<th>Not Prepared</th>
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<tr>
<td>45%</td>
<td>34%</td>
<td>21%</td>
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