

Indian families adopting Indian children: Adoptive parents' perceptions of the adoption process and post-placement services

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Abstract

This article summarizes qualitative and quantitative data from a study of Indian families adopting Indian children. Using a random sample, mailed survey data were collected from 230 families and interview data from 113 families. The response rate was 56% for the mailed questionnaire and 82% for the face-to-face survey. Overall, while excellent progress is being made with regard to domestic adoption in India, several post-placement services could be improved or developed to better meet the needs of adoptive families.

Key words: adoption, adoptive parents, India

Overview

Little is known about the experiences of Indian families who have adopted, including their experiences with the adoption process, how they deal with birth family issues, or the services they use after placement. Much of the information currently in use relies on practice wisdom and anecdotes, with few publications in peer-reviewed journals that use social science research methods. This project, designed as a program evaluation, was a collaborative research project between an Indian Nongovernmental Agency (NGO) placing children for adoption and an adoption researcher from the United States. This article builds from an article that described the program (Stiles, Dhamaraksa, dela Rosa, Goldner & Kalyanvala, 2001).

Background

Children form almost one third of the population of India. About 4% are estimated to be orphaned (over 1,200,000 children) and over 100,000 are in institutions (Bharat, 2002). According to Raju (1999), the number of destitute children is growing due to poverty. In addition to poverty, a large percent of children are abandoned or relinquished because of being

born to a single mother. There are strong social mores and values against unwed mothers that result in abandonment (Baig & Gopinath, 1976; Narang, 1982).

In India, adoption is as old as Hindu law (Chowdry, 1980). It is part of Indian mythology (Stiles, et al., 2001) and the histories of kings (Baig & Gopinath, 1976). Traditionally, Hindus adopted male children when they had no heir. The adopted son was usually a relative and a similar caste (Baig & Gopinath, 1976). Children abandoned were not adoptable because nothing was known of their family and background. Since the 1980s, adoption in India has changed from this historical pattern. Adoption of non-relatives and children from whom little or no background information is known is new in India and the numbers of these types of adoptions have been increasing since 1995 (CARA, 2000). The Indian government did not play a monitoring or regulating role in adoption until 1984 (Apparao, 1997). Consequently, there are few published studies on Indian domestic adoptions.

One of the first studies (Narang, 1982) examined case records of 116 adoptions from 1971 to 1980. Only 76 records (66%) had complete information. The purpose was to describe adoptions and adoption procedures. At the time of adoption, adoptive fathers averaged 38.7 years old and adoptive mothers averaged 34.3 years. Most adoptive parents were highly educated (83% of adoptive fathers and 87% of adoptive mothers). Most adoptive fathers were working in professions (95%); similar data were not reported on adoptive mothers. Most adoptive families were Hindus (90%). The major reason families adopted was to have a male heir, followed by infertility. Over one-fourth of the adoptive families wanted to keep the adoption a secret. Adopted children were available for adoption mostly due to being born out of wedlock (75%); only 4 were abandoned with no background information known. The majority (69%) was placed within the first three weeks after birth. About 60 of the adoptees were male. The placement of females took longer than that of males. Since the study was an analysis of case records, there was no report of post placement functioning of children. Families were encouraged to return to the hospital if they had any medical concerns about the child. Narang concluded that families would benefit from counseling and guidance long after adoption.

Apparoa (1997) offers an analysis of the developments in adoptions in India. While predominantly focusing on international adoptions, she offers an analysis of overall trends. In particular, she reports there is an inverse relationship between domestic and international adoptions. As international adoptions increase, domestic adoptions decrease and vice versa. She reports that adoptions progress were the most developed in Maharashara State (Bombay and Pune Counties). Boys were favored for domestic adoptions and girls were favored for international adoption. She concludes by suggesting that a uniform adoption law would strengthen services to children available for adoption and the best interests of the child.

Two recent studies examined attitudes about adoption. Raju (1999) studied community attitudes towards adoption. She found class differences in views towards adoption. In particular, upper income families express a preference for female children while lower income families prefer males. She suggests that lower income families may be more traditional in the way they approach adoption.

Banyal (1999) examined the attitudes of 25 couples at an out-patient obstetric and gynecological clinic. She found that slightly over half (56%) favored adoption. Support for adoption was mostly likely found in couples with a higher education and income, and those with primary infertility (as opposed to secondary infertility), especially if it was the wife that was infertile. However, the study did not actually follow these couples to determine who adopted. Also, while 100 of the couples knew about adoption, only 20 knew of an adoption agency.

With so few published studies on Indian domestic adoptions, research and practice writing from other countries offer cues about issues to consider in Indian adoptions. One factor is the ecological context after adoption (Hartman, 1984). All families live and interact with their environment. The ecological perspective examines the way that families affect and respond to their environment as well as how the environment affects families. Understanding the social environment of adoptive families, particularly as it relates to the service system, is a critical component in understanding the overall functioning of the family as a complex social system

(Hartman & Laird, 1983; Pilisuk & Parks, 1983). In a longitudinal study of families who adopted children through the public child welfare system in the U. S., Groze (1996) found that adoptive families used both formal and informal sources of social support. Their involvement with formal support services (i.e., therapy services) increased over time. Informal supports, such as a support group for adoptive parents, was not used very often, although those who did participate in them found them to be very helpful. Families perceive a great deal of support for the adoption from families and friends and this support remained consistently high over time. In addition, families report a high rate of involvement with and appreciation for professional service providers. Professionals were frequently relied on for information and advice, and were just as likely to be a source of emotional support as were family members.

In sum, it is important to understand the role of services in the life of adoptive families. The service system plays a role in the life of adoptive families from the time of inquiry about adoption, during the home study and evaluation process, at placement and beyond. Understanding how families perceive the adoption process and post-placement services will have implications for improving adoption service delivery and practice in India.

The purpose of this project was to provide research-based information about the experiences of Indian families who adopted Indian children as part of program evaluation. The evaluation was organized around the following questions:

- What are the issues families face related to the adoption?
- What post adoption resources have they found/would like to find?
- How could the adoption program be improved?

Methodology

In India, according to the data provided by Central Adoption Resource Agency (CARA), there has been a steady increase in adoptions due largely to the increase in domestic or incountry adoptions. For example, of the 2660 adoptions in 1995, 1424 were from domestic, incountry adoptions (54%). In 2000, of the 3234 adoptions, 1870 were domestic, in-country adoptions (58%).

In the last 20 years, Bharatiya Samaj Seva Kendra (aka BSSK), the agency involved in this study, has placed over a thousand Indian children with adoptive parents in India. The in-country breakdown used in this project was 1046 total in-country adoptions with 374 families in Pune City and 672 families in other parts of India.

A random sample of families was selected to take part in the study. To obtain a random sample, from a master list of families, every other family was chosen to be solicited to participate in the study. Once selected, every family received a unique ID number. Both a mailed survey and face-to-face interviews were used to collect data in Pune. Families living outside of Pune participated only in the mailed survey.

When the random sample of Pune families was drawn from the 374 placements, 187 families were in the sample. However, no address could be located for 49 families (26% of families), so one hundred and thirty eight (138) families from Pune received a survey in the mail and were invited to participate in an interview in their home or office. The location of the interview was chosen by the family.

When the random sample of 336 out of 672 families living outside of Pune was drawn, 63 had no address (19% of families). Two hundred seventy three (273) families were the sample drawn from families living outside of Pune.

Mailing addresses were missing or families were not included in the sample for the following reasons: (a) families had not informed the agency of their new address; (b) the adoption was a secret and the family had requested the agency never to contact them; (c) some families moved out of the country for work; and, (d) death or disruption of the adoptee.

While English is a common language, a significant percent of families are more comfortable with Marathi. Therefore, letters and questionnaires were translated into Marathi.

Mailed surveys were returned in an enclosed, stamped envelope. Surveys were mailed 6 weeks before interviews were to begin. A reminder notice was sent to families to prompt them to return the questionnaire. No individual family response was tracked back to a specific family.

The interview format was structured, but in a face-to-face interview we could probe the issues and experiences of families. The Indian staff conducting interviews were volunteers for or staff at BSSK. They had no ongoing contact with the adoptive families and provided no services to these families. The interviewers who were not BSSK staff were professional people with an interest and commitment to child welfare. A one day of training/team building about basic interviewing skills and the project protocol, including confidentiality and the safeguards for human subjects, was conducted prior to interviews. The interviewers were reminded that they are prohibited from discussing identifiable results obtained from family interviews. Most of the volunteers had minimal experience in conducting research interviews.

Adoptive families from Pune were interviewed after written consent was obtained. Each interview was expected to last approximately 60-90 minutes. Half way through the interview the interviewer reminded the participant that they could terminate the interview at any time without consequence. Interviewers made summary notes about from the interviews and added any additional impressions they had about the interview once after the interview was complete. Once a week, the interview team processed each interview to highlight what they had learned and what they felt the implication for policy and/or practice were as a result of the interview. Because of a mailing mistake, many families received a copy of the questions that were structured for the interviews before the interviews took place. Some made written comments and these were given to the interviewer at the time of the interview or included with the questionnaire that was mailed back to the agency.

To analyze interview summaries and written comments, two research assistants independently read comments and developed mutually exclusive categories for classifying the responses. When there was a marked difference (greater than 5) in categorization, both percents are recorded in parenthesis. When there was little difference, the percent established by the first reviewer was used due to her advanced training.

Measures

In previous research, we used a similar questionnaire as the one developed for this project for adoptive families in the United States and Romania (see Groze, 1996; Groza & the Bucharest Research Team, 1999). The questions about parents' report on the services they received after adoption were taken or adapted from a survey of adoptive families of special needs children in the United States (Marcenko & Smith, 1991). For the interviews, questions were adapted from the Minnesota/Texas Adoption Research Project conducted by Grotevant and McRoy (1987). For this project, the focus was not on hypothesis testing but on understanding and describing adoptive family life and issues, searching for ways to improve adoption policy, practice and service delivery in India.

Results

Response rates

Out of 138 families from Pune solicited to participate in the mailed questionnaire, 94 responded to the mailed survey (a response rate of 68%). Out of the 273 families from outside

Pune solicited to participate in the mailed questionnaire, 136 responded to the mailed survey (a response rate of 50%). Our overall response rate is 56% (n = 230) for the mailed survey. Mangione (1995) and Salant and Dillman (1994) raise concern about the quality of data when response rates are 60% or lower. In contrast, Babbie (1973) indicates that a response rate of 50% is adequate for analysis and reporting, a rate of 60% is good, and a rate of 70% or more is excellent. Visser and colleagues (2000) indicate that the response rate for mailed surveys is often less than 50% and techniques to increase rates are complex and costly, seeming to indicate that responses of less than 50% are not problematic. Thus, there are multiple ways to evaluate the response rate for the mailed survey.

Of the 138 families from Pune solicited to participate in face-to-face interviews, 113 families agreed to be interviewed (a response rate of 82%). The response rate of 82 is considered very good (Mangione, 1995; Salant & Dillman, 1994). Only a few families participated in the interview component of the project only and did not return the survey (n = 5).

We consider the response rate for both components of the study to be quite good for several reasons. First, this is the first time this approach has ever been used so it is innovative for both the agency and the families. Answering mailed surveys and participating in interviews is not a cultural norm and likely affected response rates. Second, the mail service was not as reliable as we expected. Many families who received a reminder post card indicated that they never received the survey, so another survey was mailed to them. The estimate of the number of families successfully contacted is probably exaggerated, which would mean that the response rate of successfully contacted families is higher. However, this is no way to determine the exact number of families that did receive a questionnaire.

The data presented in this paper is combined from the information collected from mailed surveys and the face-to-face interviews. Table 1 summarizes how each major category of data was collected.

Table 1 Category of data by method of data collection

	Mailed survey	Face-to-face interview
Family and child demographics	X	
Motivation to adopt		X
Child early behavior		X
The adoption process		Х
Discussing adoption		X
Birth family information		X
Service use and need	X	

Description of the adoptive families

The questionnaires were completed mostly by the adoptive fathers (55%), with one-third (33%) completed by adoptive mothers, and both parents completing the questionnaire together for the remaining surveys (12%). On average, adoptive mothers were 35.5 years old (SD = 5.5) at the time of adoption and 41.2 years old (SD = 7.5) at the time of the study. On average, adoptive fathers were 38.6 years old (SD = 5.8) at the time of adoption and 46.7 years old (SD = 7.3) at the time of the study.

Most families did not have other children in the home (80%). For the families with other children, 10% had other adopted children and 10% had birth children. Twelve percent of families

had another child in the home prior to adoption. These were typically birth children. About 8% of the families had another child after the child included in the study entered their home. These included mostly other adopted children.

Family income ranged from 9,550 rupees per year to 500,000 rupees per year; the salary of 500,000 rupees was very unusual with only one family reporting such income. On average, families made 306,665 rupees per year. Median family income was 150,000 rupees per year. About 60% of interviews were conducted at the residence of the family. Based on the interviews, the primary reason families adopted was infertility (80%). Infertility often resided with the mother (63%, 45%). Infertility in the father was identified in less than 15% of the interviews. A humanitarian desire to adopt, unrelated to infertility or age, was expressed in about 15% of the families. Only one parent reported that she was adopted and another parent reported that her father had been adopted.

The following example of the reasons for adoption is typical of the stories around infertility:

After the couple married, they had problems conceiving. They were taking fertility treatments for 17 years. The doctor said they were normal and might conceive some time. They decided not to continue to wait and made the choice to adopt.

Description of children and their history

Over half of the children were female (53%). At the time of the study, children ranged in ages from under 1 year of age to 21 years of age and were 7.3 years old, on average. They had been placed from infancy to age 7; average age at placement was 8 months. Over 40% had been placed as infants (under the age of 1) and 93% had been placed under the age of 2. The children had been in their respective adoptive placements from 1 to 5 years; average length of time in their adoptive homes was 6.6 years.

The majority of the children (95%) had been in an orphanage or institution before placement, for an average of 4.6 months. About 10% of the children had spent time with their birth family before adoption, with an average of 1.9 months. About 16% of children had been in a foster family prior to adoption, with an average of 3.5 months.

In describing the child's early behavior after placement, most families were very positive (73%). Most families could easily describe how the child was like them (over 90%). Many families could not find dissimilarities (47%, 35%). Only one family didn't feel that the child fit well into the family. Overall, families talked easily about the many positive aspects of their children.

The adoption process

In making the decision to adopt, many families talked to other family members (34%, 20%) or friends (5%) or reported talking to both family and friends (13%). Most often families reported that they had no idea of what to expect about the adoption process (47%, 35%).

Most adoptive parents experienced support from their families about their decision to adopt (67%, 58%). Over time, adoptive parents experienced more positive support from their families (97%). A minority of families (less than 10%) reported that relatives were negative about their adoption initially but the negativity had virtually disappeared over time. Initially, families reported that about one-fourth of their relatives had mixed feelings about their adoption at placement; this had decreased over time to less than 10%. Upon adoption, about half of the families reported that neighbors and/or their family had a party or special event to mark their adoption.

Many families felt that they were prepared for the adoption and the changes that adoption would incur. However, about 20% did not feel prepared and about 23% did not anticipate the

changes in their lives once the child arrived. Most couples (70%, 63%) did not discuss how their relationship might change. Even without the anticipation, most families were positive about changes and less than 10% reported that the adoption caused disputes or adjustment difficulties. As one adoptive mother commented about how preparation could be improved:

Adoptive parents need to know that the first month is a period of adjustment for the parents and the child. The child cries a lot because it is adjusting to a new environment. Parents need to bring their social life to a complete halt for the first few months in order to be less tired and enjoy their new baby.

An adoptive father suggested that parents who have adopted should meet with parents applying to adopt to get first hand knowledge from a parent perspective. This would enhance the services provided by the agency. Many families commented on the need for more visitations between parent and child before placement.

The majority of families were satisfied with the adoption process (53%) and reported it went as they expected (57%). About 14% were not satisfied and found the process more difficult than they expected. A significant percent (43%) reported that their child had some type of medical problem that occurred during the first 3 years of the adoption. Thirty eight percent reported no problems. The vast majority of families (91%) reported that the child fits very well into the family.

In examining what single thing would have been most helpful if done differently, the following is an example of comments made by parents:

The waiting period to completion of the adoptions should be less. If this period is less, children will not have to spend time in an institution and they will get the love at an earlier stage.

Talking about adoption and birth family information

At the time of adoption, adoptive families are given all non-identifying information that is known about the biological parents by the agency. It is given both verbally and in written form. During interviews, families were probed about birth family information. When the child was abandoned (25% of cases), the families had no information. In about 10% of the interviews, families refused to share birth family information with the interviewer. For those who had information about the birth mother, she ranged in age from 13 to 35 at the time of the child's birth; on average she was 20.9 years old (SD = 6.0). About 25% of birth mothers were under the age of 17 at the time the child was born and 50% were under the age of 20. About 20% of birth mothers were students at the time of birth, 37% were laborers, 20% were unemployed, and 20% worked as domestics or were a housewife. Education status of the birth mother ranged from illiterate to 15th grade; average grade was 7.6 (SD = 4.1). Most birth mothers (63%) were single and about 18% were married at the time of the child's birth.

Less information was available on birth fathers. For those who had information about the birth father, he ranged in age from 21 to 50 at the time of the child's birth; on average he was 27.4 years old (SD = 8.1). One quarter of birth fathers were under the age of 22 at the time the child was born and 50% were under the age of 25. About 11% of birth fathers were students at the time of birth, 44% were laborers, 20% were professionals, 6% were unemployed, and 6% were in the military. Education status of the birth father ranged from illiterate to 12th grade; average grade was 7.8 (SD = 5.3). Most of the birth fathers were single (54%) and about 18% were married to someone else other than the birth mother.

About 60 of the children were available for adoption because the parents were unmarried and the child was born out of wedlock. As mentioned above, 25% were abandoned. About 7% of the children were placed for adoption due to poverty, 1% due to incest or rape, and 7% due to personal or social problems in the birth family.

Families were asked how they discuss adoption with their child. In many cases (38 in cases where child was old enough to understand but 70 in all cases), the children had not been told that they were adopted. In one-fourth of the families, the parents initiated discussion with the child. In one-fifth of the families, the adoption was disclosed at the BSSK office or through BSSK. In only about 14% of the families did the child initiate discussion and in 5% a relative initiated the discussion. However, many families (38%, 24%) reported that the child felt comfortable discussing their adoption, although only few children (10%, 18%) ever initiated conversation about their adoption. Nearly half of the children do not know what the term "birthmother" meant (47%). The conversation about adoption was anxiety producing for many families and many of them discussed how they needed assistance in talking about adoption with their child. They also commented about needing help as the child gets older in dealing with adoption issues. They struggled with the nature of discussions when children were at various ages and wanted more preparation and assistance in dealing with adoption issues over time.

Families were also asked about issues related to search, both for the child and for the child's birth parents. Most families (57%) felt that birth parents should have no information about their biological child after placement. While most reported (52%, 72%) that they would help or be supportive if their child decided to search for his or her birth parent, almost half (48%) would discourage their child. For those who would discourage it, half would do so because their feelings would be hurt. If the agency contacted the family because the child's birthmother wished to share information or pictures, over half (54%) would oppose such contact. The other 46% gave varying responses, from letting the child decide (14%, 6%), the adoptive parents would decide at that time (14%, 8%), allowing the agency to share some type of information (5%), or allowing this after the child was older (10%).

Like the issue around discussing adoption, issues around search and the birth family were anxiety producing for parents. Adoption practitioners report that the earlier a child is aware of adoption and made comfortable with the idea, the child fares better. The older a child is when told, or worse of all discovers it from someone other than the parents, the more difficult the process of acceptance. Several families relayed personal stories about the unfortunate consequences when this was the case.

Service importance, use and needs

Many families talked about the pre-adoption process without being prompted. Almost all the families commented that in retrospect, while they were frustrated by the wait and process at the time of application, it was helpful.

Importance of services to adoptive families

The questionnaire asked families to evaluate the importance of the following eight different types of services. Table 2 presents the list and descriptions of services families used in their evaluations.

Families were asked to evaluate the importance of each of these services. Many families (27%) did not respond to these series of questions. Table 3 presents the results for respondents. Only valid percents are used.

The majority of families evaluated most services as essential or very important, except for respite care and contact with other adoptive families, which they evaluated as somewhat or not important. Thus, the majority of services were considered to be important to families.

As families commented:

Parent education and counseling is of paramount importance in the adoption process and this should be made compulsory for adoptive parents. It is important because the process of adoption is complicated.

Post-adoptive services used and needed

Parents reported on the services they received after adoption, as well as services they needed but could not get. The results are presented in Table 4.

Many families used information provided by the agency about the child. Families were asked to evaluate their social contacts with other adoptive families. Almost half (44%) said they were very helpful, 39% said they were somewhat helpful, and 16% said they were not really helpful. Thus, for families who had contacts with other adoptive families, this was a resource. Families also reported participating in an adoption support group. Only 30% did so. Over half

 Table 2

 List of services and description of each service

Type of service	Description of service
Financial support	Adoption subsidy, insurance for health needs, financial help with needed services, etc.
Information about child	Information about the child's placement experiences prior to adoption as well as current health, educational, and social needs.
Information about services	Information about services and help in locating needed services such as subsidy, therapy, support groups, medical care, educational services, etc.
Medical and health services	Ongoing medical and dental care as well as specialized care to meet child's needs (medical care for disability, physical therapy, mental health services, etc.).
Educational services for child	Ongoing and specialized educational and academic services.
Parent education and counseling	Education or counseling about special-needs adoption including behavior management skills, helping the child adjust to a new family, dealing with a handicap, stresses and rewards of adoption, planning for child's future, etc.
Respite care and other "helping" services	Planning some time away from the child as well as parenting tasks such as transportation, inhome nurse care, day care, etc.
Contacts with other adoptive families	Adoptive parent support groups as well as informal contacts with families who have adopted

Table 3Parent evaluation of the importance of various services (percents)

Market State of the State of th	Essential	Very important	Somewhat important	Not important
Information about child	68 (n = 115)	23 (n = 39)	5 (n = 9)	3 (n = 5)
Information about services	36 (n = 59)	31 (n = 50)	23 (n = 38)	10 (n = 17)
Medical and health services	45 (n = 73)	36 (n = 59)	8 (n = 13)	11 (n = 18)
Educational services for child	37 (n = 50)	35 (n = 47)	13 (n = 18)	15 (n = 21)
Parent education and counseling	49 (n = 66)	28 (n = 38)	19 (n = 25)	4 (n = 6)
Respite care and other services	14 (n = 18)	20 (n = 27)	35 (n = 47)	31 (n = 41)
Contacts with other adoptive families	23 (n = 31)	18 (n = 35)	39 (n = 53)	20 (n = 28)

(53%) said they were very helpful, 32% said they were somewhat helpful, and 15% said they were not really helpful. There was a significant difference between location of families and helpfulness of support groups, with 72% of families living in Pune indicating they were very or somewhat helpful compared to 95% of families living outside Pune.

The questionnaire probed whether families had any contact with the agency since adoption. Eighty five percent of the families report contact. When asked to evaluate their contact, the majority (62%) said they were very helpful, 34% said they were somewhat helpful, and 4% said they were not really helpful. There was a significant difference between location of families and contact with the agency; only 43% of families from Pune had contact with the agency compared to 57% of families from outside of Pune. From these data, it seems that families living outside Pune relied more on the agency and evaluated the parent support group experience more positive than families living in Pune. This may, in part, be due to the fact that families living in a large metropolitan area such as Pune have access to a wider array of services and opportunities for support and assistance than do families who do not live in a metropolitan area.

From the questionnaire, no large gap in service was identified. For the services needed most often, contact with other adoptive families was reported as an unmet need. As one adoptive mother commented:

Adoptive parents need to be organized in many places so that thoughts and problems can be exchanged.

 Table 4

 Parent report of services used and services needed (percents)

Services used

Financial support

Information about child	44 (n = 97)
Information about services	21 (n = 47)
Medical and health services	16 (n = 36)
Educational services for child	8 (n = 17)
Parent education and counseling	17 (n = 38)
Respite care and other services	3 (n = 7)
Contacts with other adoptive families	12 (n = 26)
Services needed	
Financial support	2 (n = 4)
Information about child	2 (n = 4)
Information about services	1 (n = 3)
Medical and health services	< 1 (n = 1)
Educational services for child	3 (n = 6)
Parent education and counseling	2 (n = 4)
Respite care and other services	2 (n = 4)
Contacts with other adoptive families	5 (n = 10)

2 (n = 4)

A few families who adopted older children commented that the social worker providing postplacement services was supportive but too young and without sufficient professional experience to assist them when issue arose. They recommended making sure that the social workers providing post-placement services have maturity of experience when working with families who adopt older children. Additional resources need to be developed for those who adopt older children. As one mother wrote who adopted a boy who was 5 years old at placement:

It was quite a challenge to adopt a child with a traumatic past. I would have liked to read a few books to help the child. No book list was given or suggested.

One area of concern to many parents was the court system. Many felt that it was unpredictable. Some of the minority families (Christians, Parsees, etc.) were concerned that would be discriminated against in court. While their apprehension was not confirmed, it was still stressful for them. Many parents reacted negatively to the requirement imposed by the judge to put money in a trust for their adopted child. For some families, the insistence on a trust made families feel that their integrity and motivation to adopt were undermined. For some, the amount of money requested was a burden, particularly if it was required all at one time. Families may benefit from having a social worker accompany them to court and for the agency building stronger relations with the court system. Pre-adoptive support and training may also help reduce family apprehension.

Conclusion

Similar to the recommendation made by Narang (1982) over 20 years ago, adoptive families need guidance and counseling long after the adoptive placement. Several post-placement services need to be developed or improved to better meet the needs of Indian adoptive families over the life cycle.

The biggest issue for families was how to discuss adoption with their child. Many families openly talked about their struggles with how and when to tell. Some wanted to use the interview as the opportunity to disclose the adoption to their child. Some refused to discuss adoption and had no plans to disclose the adoption to their children. The vast majority, however, struggle with how to discuss the issue, when to discuss it, what to do if a child didn't want to talk about it, what to do if the child wanted to talk about it all the time, and the issue of talking about adoption appropriate to the child's level of development. Some believed if it was mentioned when the child was young, there was no need to talk about it again. Dealing with adoption issues, including the birth family, were ongoing struggles for many Indian adoptive families. To assist families in dealing with these issues, more resources for children and families that have adoption themes as a metaphor need to be developed, such as story books and stories. One family shared the book that they had created in Marathi. Other parents, adoptees and artists/book writers should be encouraged to develop additional resources for different ages of children that can be read to and shared with adopted children. This would help families deal with the issue of talking about adoption issues.

There are no formal supports for the adoption and often families are very alone in their unique situations. Most of the families received informal support from their extended family and friends. For services needed most often, families suggested that they needed informal, social contacts with other adoptive families. Agencies must allocate resources to a variety of support services for Indian adoptive families. Families will use different types of services at various points in the family life cycle. The type and amount of service will be based on both family needs and family values. As such, families must have an array of formal and informal post adoption services from which they can choose.

One support that many families commented on was the need for parent seminars and education groups. They would like to attend groups about general parenting issues, child development, telling your child about adoption, and telling your family and friends about adoption.

In addition to ongoing training and parent groups, another way to develop post adoption support is through the use of newsletters, where families can read about issues, parenting tips, and events. The current newsletter used by BSSK should be continued and perhaps expanded. A newsletter can also serve as a marketing tool to recruit other families. In addition, a lending library that includes books on adoption, child development, and parenting would give families easy access to resources that some feel might be helpful.

Many of the current pre-adoption activities should be continued. If families who had adopted could be matched with applicants early in the process, some of the frustration could be less-ened as families meet and get support from other families who have been through the process. In addition, this helps begin informal support systems as other questions arise, both throughout the adoption process and after placement. One area that needs particular attention is the role of the agency in nonurban areas. In the absence of many formal services, the adoption agency plays multiple roles in supporting adoptive families. As such, adoption workers in rural areas need a multitude of skills, different than their urban counterparts, to be able to provide the best and most comprehensive services to Indian adoptive families.

There are many strengths in domestic adoptions in India. Adoptions are very stable and evaluated positively. Parent-child relations are constructive and it appears that family relations are very positive. Children are well assimilated into their families. In this study, we highlighted many of the positive accomplishments and outlined areas for improvement. In particular, we focused on the family ecology by examining issues related to the service system and particularly to the issue of adoption disclosure. Results for this study may be helpful in furthering strengthening adoption services in India.

There are limitations to this study. The data were collected from adoptive parents and from their recollections about issues and events. There may be differences in perceptions of adoptive parents and adoption professionals. Such differences were not examined. In addition, the adoptees' perspectives were not included in this study. Our intention is to explore the possibility of such a study in the future. The low response rate is a concern. There is no way to ascertain the experiences of families that did not participate in the study and caution is urged when generalizing results. Also, the completion rate for particular items on the questionnaire was low. In retrospect, the questionnaire was too long and we should have pre-tested it. Future projects should examine the length of questionnaire and pre-test the questionnaire when possible.

A final limitation relates to the cultural dimension of the project. A western approach to adoption services and post-adoption issues was the over-arching orientation. Survey questions were drawn from studies in the United States where survey respondents likely have some familiarity with the concept of receiving help from formal social services. Arguably, the Indian families in this study don't have same types of experiences with social services as do American families and, therefore, may lack a context for evaluating a question about whether they would benefit from any social services, including adoption services.

Note

1. CARA is an autonomous agency under the Ministry of Social Justice and Empowerment, Government of India. It was established in 1990 to deal with all matters concerning adoption in India. For additional information, see their website at http://www.adoptionindia.nic.in

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