Support Experiences of Church-Going Christian Foster and Adoptive Families of

Children with Special Needs

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Abstract

Much research is done on the populations of families of children with special needs,

church-going Christian families, and foster and adoptive families, but little exists on the

families who fall into all three categories. This thesis seeks to help remedy this problem

by studying the support experiences of these families. Existing research on foster and

adoptive families, families with special needs, and disability in the church is reviewed. A

phenomenological study of five parents' lived experiences was completed through

interviews, where three main themes emerged: the importance of informal support, the

need for formal support, and the integral role of faith. The significance of these findings

is discussed and recommendations are given.

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As influential people in Christian circles such as Russel Moore, Steven Curtis Chapman, and David Platt push for "creating a culture of adoption" (Moore, 2015, p. 172), it is important that the support needs of church-going Christian families who are fostering or have adopted children with special needs are understood. The researcher decided to pursue a phenomenological study of this population to understand their experiences with formal and informal supports.

Purpose of the Study

The purpose of this study is to examine the support experiences of church-going Christian families who have adopted or are fostering children with special needs. While much research exists on the supports needed and used by adoptive families, foster families, and families that have special needs children, little examines the experiences of this particular population with the intersection of church-going Christians, adoptive and foster families, and families who have children with special needs.

Research Questions

The research questions developed for this study were:

1. What types of supports have these families experienced?

2. What role does the church and God play in their lives?

3. What supports did these families not receive that could have been beneficial?

Definitions

The following definitions have been used for the purposes of this study:

Christian: A person who professes belief in the Protestant Christian faith.

Church-going: A person or family who regularly goes to and participates in a Protestant Christian church.

Special needs: A mental, intellectual, or physical disability, drug or alcohol exposure in utero, behavioral problems, or a history of trauma.

Support: Assistance provided to help a person or family.

    Informal support: Assistance provided informally, often in the form of family and friends.

    Formal support: Assistance provided formally through organizations, agencies, and professionals.

Review of the Literature

The review of the literature looks closely at foster care and adoption and what it entails, the stresses and support needs of foster, adoptive, and special needs families, and the Bible and church's relation to foster care, adoption, and disability.

Adoption and Foster Care Information

According to the Code of Federal Regulations (2012), adoption is

The method provided by State law, or for a Tribal title IV–E agency, Tribal law, which establishes the legal relationship of parent and child between persons who are not so related by birth, with the same mutual rights and obligations that exist between children and their birth parents. (p. 272)

Families turn to adoption and foster care for many reasons. For adoption, these include wanting to provide a home for a child who needs a family, struggling with infertility, and wanting to expand their family (Vandivere, Malm, & Radel, 2009). A family can adopt a child through three different avenues. The first is through the child welfare system,

known as adopting from foster care. These are children who have been removed from their homes and currently live in foster care. They are typically older children who have experienced abuse and neglect. Some families become foster parents and adopt children in their care who become legally free for adoption, while other families do not become foster parents first but rather adopt a child who is already legally free for adoption. The second is private domestic adoption. This is the adoption of a child, typically an infant, though a private agency or lawyer. The third is international, or intercountry adoption. This is adopting a child from a country outside of the United States (Child Welfare Information Gateway, 2015). According to the 2010 census data, 2.3 percent of children in the US were adopted (Kreider & Lofquist, 2014). In the United States, 119,514 children were adopted in 2012, a number that has been steadily decreasing since 2001 (Child Welfare Information Gateway, 2016b).

Foster care is defined by the Code of Federal Regulations (2012) as "24-hour substitute care for children outside their own homes" (p. 272). In 2014 an estimated 415,129 children were in foster care in the United States, which can mean living in foster homes, with relatives, in group homes and residential homes, and other living situations. About half of children in foster care return to their biological families, while the rest are adopted, live with relatives or other guardians, or age out. The median length of time spent in foster care was 13.3 months, and the median age of children in foster care is eight years old (Child Welfare Information Gateway, 2016a).

Special needs. The definition of special needs in adoption and foster care varies. In foster care and children adopted from foster care, a special need is anything that would make it more difficult for a child to be adopted. These can include having a physical,

mental, or emotional disability, being an older age, belonging to a racial or ethnic minority, or being part of sibling group. In international and private adoption, a special need is more likely to refer to a disability, or the possibility that the child could develop a disability. This includes common disabilities such as Down syndrome and cleft lip, as well as possible drug and alcohol exposure in utero and a family history of mental illness (Child Welfare Information Gateway, 2010). Of adopted children, at least 37% have some sort of special need (Kreider & Lofquist, 2014). Adopted children are also more likely to be in special education, and a study found that 59% of adoptive parents reported their child was having trouble in school (Cooper & Johnson, 2007).

Adopting a child with special needs is often a positive experience. The 2008 National Survey of Adoptive Parents of Children with Special Health Care Needs reported that 78% of parents would choose to adopt the same child again, if given the chance (McKlindon, Welti, Vandivere, & Malm, 2011). Several factors result in positive adoption outcomes for children with special needs. These include good communication between the parents and social worker and the parents and their child, a good match between the family and the child, social workers that are aware of the child's needs and can relay that information to the adoptive family, adoptive parents who have a strong commitment to the child and to the success of the adoption, parents who have a strong marriage and who are stable and mature, parents who are willing to seek professional help and have a strong support system, parents who have previous parenting experience, especially parenting children with special needs, parents who have realistic expectations for their child, are flexible, and are positive, and families that are involved in the outside community through activities such as clubs and church (McRoy, 1999).

Stress and Family Functioning

Families who foster or adopt face many stressors, which can decrease family functioning. In a study done on the stress levels of adoptive parents of children with special needs, twice as many of the adoptive parents reported high levels of stress compared to the rest of the population (McGlone, Santos, Kazama, Fong, & Mueller, 2002). This stress stayed relatively the same between the placement of the child and a year after placement. A wide variety of stressors can result from adopting a child with special needs. Often it is a pile-up of stressors that begin to affect family functioning (Bird, Peterson, & Miller, 2002; Eanes & Fletcher, 2006). Many different variables can result in high stress levels.

One situation that could be a stressor for some families is a lack of time. Foster parents spend an average of 55 minutes a day more caring for their children than those who were not foster parents (Forbes, O'Neill, Humphreys, Tregeagle, & Cox, 2011). Parenting stress can also result from a lack of support from family members (Bird et al., 2002; Eanes & Fletcher, 2006), difficult behaviors from the child (Atkinson & Gonet, 2007; Forbes & Dziegielewski, 2003), attachment difficulties (Atkinson & Gonet, 2007), isolation, financial difficulties because of the child (for example, having to pay for therapy out of pocket), grief that they could not protect their child from traumatic events in the past, and struggles with others not understanding what they are going through (Forbes & Dziegielewski, 2003). Using emotions-based coping strategies, which are focused on changing negative emotions in difficult situations, rather than problem-based coping strategies, which are focused on changing the situation, was also related to higher parental stress (Bird et al., 2002). Other factors that are related to lower adoptive family

functioning are adopting children with a history of abuse (compared to a history of only neglect), adopting a sibling group or multiple children at one time (Bird et al., 2002; Erich & Leung, 2002), and adopting older children (Bird et al., 2002).

Stress can result in negative outcomes for foster and adoptive families. High levels of stress is associated with lower feelings of parenting competence (Bird et al., 2002; Eanes & Fletcher, 2006; Forbes & Dziegielewski, 2003), marriage issues (Reilly & Platz, 2004), anger, and physical manifestations of stress (Forbes & Dziegielewski, 2003).

Supports

Support from both formal and informal avenues help foster and adoptive parents better care for their family and result in better outcomes. Formal supports are provided through an organization or agency, while informal supports are often provided by family and friends. Informal supports seem to be especially important in improving family functioning. In a study of the meaning of informal support to parents who have children with a disability, Lindblad, Holritz-Rasmussen, and Sandman (2007) discovered three important themes. The first was the opportunity informal support provides the child to have relationships with others. The second theme was that the parents were "provided a room for sorrow and joy" (p. 243). The final theme was the ability to live a life that was spontaneous and not overly burdensome. These informal supports allow the families to draw close with others and form a community that the researchers call "a life enriching togetherness" (p. 238).

The availability of supports for foster and adoptive families varies. In a survey of publically funded post-adoption support services, Smith (2014) reported that only 17 of

the 50 U.S. states had substantial programs in place for families, although 19 had what

qualified as moderate services. Access to supports is important because, as already stated,

unmet support needs result in decreased family functioning. An estimated 20-30% of

children adopted from foster care could benefit from adoption competent therapeutic

counseling services (Maza, 2014). Wind, Brooks, and Barth (2007) found that support

needs of adopted children tend to increase as the children grow older.

The most common unmet support needs are adoption-competent counseling,

support groups, respite (Atkinson & Gonet, 2007; Reilly & Platz, 2004), and educational

services (Atkinson & Gonet, 2007; Brown, Moraes, & Mayhew, 2005). Other common

unmet needs include support in the community, financial resources to meet the child's

needs and access to comprehensive medical care, education, and a good relationship with

social workers (Brown et al., 2005).

Three supports that should be looked at more closely, which are support groups

being with people who "get it," respite care, and education. Foster and adoptive parents

place much importance on being with people who have been through the same

experiences as they have. Support groups with other parents in similar experiences was

listed as the top most beneficial support in a survey of adoptive parents by Atkinson and

Gonet (2007). Having a support group presents learning and teaching opportunities for

the parents, as well as a supportive, inclusive community where the parents can feel

understood.

Respite care is when a child is taken care of by someone outside of the home to

give the rest of the family a chance to relax. In a study of parents of children with

intellectual disabilities, parents who used respite services felt renewed, had increased

confidence in caring for their child, and had a chance to relax, do activities that were not

possible with their child around, and spend time with others. The parents also felt that the

respite benefitted their children by giving them the chance to have fun and make friends

(Wilkie & Barr, 2008). Respite can be informal – provided through an organization or

through some formal arrangement – or informal – provided by friends and family. In a

study of the benefits of respite for foster and adoptive families, a mix of formal and

informal respite had the greatest results, followed by formal respite care alone. Informal

respite care alone resulted in the least benefits for the families (Madden et al., 2016).

Some sort of education on foster care or adoption and the difficulties families

might face is typically required before parents can foster or adopt, although the amount

and type of information varies (Adopt Us Kids, 2017; Child Welfare Information

Gateway, 2015). According to Sar (2000), parent adoption education was the most useful

task for preparing to adopt a child with special needs. However, measuring the

effectiveness of adoption education is difficult. The more difficulties an adoptive family

faces, the lower the levels of perceived parent preparation (Egbert & Lamont, 2004;

Paulson & Merighi, 2009).

Unmet support needs, such as counseling, respite, and support groups, can

negatively impact family functioning (Reilly & Platz, 2004). This could result in the

breakdown of the foster placement or adoption. Two words are used to describe adoption

failure, which are disruption and dissolution. Adoption disruption means that the

adoption process is ended after the child is with the adopting family, but before the

adoption is legally finalized. Adoption dissolution means that the adoption is terminated

after it is legally finalized, severing the legal ties between the child and the family (Child

Welfare Information Gateway, 2012). Many factors contribute to the failure of adoptions and foster placements, one of which is a lack of vital supports (Smith, Howard, Garnier, & Ryan, 2006). In Khoo and Skoog's 2014 study on foster parents' experiences of foster placement failure, the lack of needed supports was one of the significant factors that lead to the breakdown of the placement.

The Role of the Bible and the Church

The Old Testament contains two recorded stories of adoption. The first is the adoption of Moses. After the Egyptian Pharaoh ordered all Hebrew baby boys killed, Moses' mother instead hid him for three months and then placed him in a basket in the river, where he was discovered by "Pharaoh's daughter, who adopted him as her own son" (Exodus 2:10, NLT). The second account is the adoption of Esther. "When her father and mother died, Mordecai [Esther's older cousin] adopted her into his family and raised her as his own daughter" (Esther 2:7).

The primary verse used in relation to adoption is James 1:27: "Pure and genuine religion in the sight of God the Father means caring for orphans and widows in their distress and refusing to let the world corrupt you." While the verse's focus is not on adoption and is instead on caring for those who are vulnerable and without families, adoption as orphan care fits under the umbrella of this verse. Parallels are often drawn between the act of adoption between parents and a child and the adoption of Christians by God. Paul used adoption many times in his epistles to explain the relationship between God and his children. One such verse is Ephesians 1:5: "God decided in advance to adopt us into his own family by bringing us to himself through Jesus Christ. This is what he

wanted to do, and it gave him great pleasure." Other similar references include Romans

8:15, Romans 8:23, Romans 9:4, and Galatians 4:5.

The Bible teaches that all people are made in the image of God, including those

people with disabilities (Genesis 1:26-27; 5:1; 9:6). According to Genesis, the world was

originally perfect (Genesis 1:31), and no disability existed. However, when the fall

happened and sin entered the world, so did disability (Genesis 3:14-19). Theological

difficulties arise in Exodus 4:10-12 and Isaiah 45:5-7, that seem to suggest that God is the

cause of disabilities, saying that God "'decides whether people speak or do not speak,

hear or do not hear, see or do not see'" and that he brings "good times and bad times"

respectively. Other examples are found in Ecclesiastes 7:13-14 and Lamentations 3:38.

The Old Testament includes many examples of people who had a disability.

Moses possibly had some sort of speech impairment (Exodus 4:10), and the man of who

began Israel and gave it his name walked with a limp (Genesis 32:35-32). When

Sampson defeated the Philistines he was a blind prisoner (Judges 13-16). The prophecies

about the Messiah included passages about how he would gather those who were

oppressed and those with disabilities to him and bless them (Micah 4:6-7; Zephaniah

3:19-20).

In the New Testament, Jesus was often seen with marginalized people. He often

healed the sick, lame, and blind (Luke 5:12-13; Luke 5:17-26; Luke 18:35-43; John 5:1-

14; John 9). In John 14:15-24, Jesus tells his disciples through a parable that Christians

are supposed to seek out those with disabilities who have been cast off to the margins of

society and bring them to God's banquet. The apostle Paul wrote that there are many

strengths in one body in 1 Corinthians 12:12-27. Some parts may seem lowly or useless, but every person is important to the functioning of the body of Christ.

The church and disability. The inclusiveness and accessibility of the church often leaves much to be desired. Adults with disabilities are less likely to attend church than those without disabilities (50% vs. 57%), with very little improvement made from 2004 to 2010 (National Organization on Disability, 2010). In a survey of parents of children with special needs, O'Hanlon (2013) found that while the majority of responders reported that their church experiences were mostly positive, over half said that their child had had a negative experience, over half said that their child had been excluded from church activities, and over a third had considered switching churches. Ault, Collins, and Carter (2013) reported that the parents of children and adults with special needs were generally dissatisfied with their church experiences. Turnbull and Ruef (1997) interviewed families of children with behavior problems and found that it was almost impossible for the families to participate in religious activities. Many decided it was too hard to find an inclusive church and just gave up.

Sometimes a disconnect can seem to exist between what services churches offer and what families need. Parents of youth with intellectual and developmental disabilities (IDD) reported that the most common supports offered by their churches were building accessibility and spiritual counseling, and the least available supports were family resources and advocates. However, the same parents rated a support group for parents, congregation-wide disability awareness efforts, resources for families, a church advocate to work with the families, and respite care to be the most helpful supports a church could offer (Carter, Boehm, Annandale, & Taylor, 2016). According to Griffin, Kane, Taylor,

Francis, and Hodapp (2011) there are several characteristics that result in an inclusive

faith community. The organizations made greater use of educational resources to address

disability related issues, featured religious teachings that positively portrayed people with

disabilities, had closer relationships with disability organizations, and demonstrated

greater commitment to promoting social justice through community activities (Griffin et

al., 2011).

Methodology

For this study phenomenology was chosen as the method of investigation.

Phenomenology is a qualitative method that explores the lived experience of participants

– that is, how they experience and understand a phenomena (van Manen, 1990). This

phenomenology explored the experiences of foster and adoptive families in order to

understand how they have experienced support.

Research Design

Phenomenology seeks to examine "the meaning for several individuals of their

lived experiences of a concept or a phenomenon" by "describing what all participants

have in common as they experience a phenomenon" (Creswell, 2007, p. 57-58).

Interviews were used to explore the support experiences of the participants.

Data Collection

A total of five people participated in this study. The participants were found using

criterion sampling, which ensures that all the participants had experienced the phenomena

that was being studied (Creswell, 2007). The criteria for this study was that a participant

had to be a Christian who attends and participates in activities at a Protestant Christian

church at least twice a month and is currently parenting a foster or adopted child with

special needs. Those who do are not a Christian, do not attend and participate in activities at a Protestant Christian church, or are currently not the foster or adoptive parent of a child with special needs did not meet the criteria. Because the aim of the study is to investigate the phenomena of the support experiences of church-going Christian families who are fostering or have adopted a child with special needs, anyone who does not meet the above criteria will not have experienced the phenomena and therefore could not provide the information that is being sought. The researcher contacted people that she knew were involved in foster care and adopted and sent them an email asking if they knew anyone who might be interested in participating in the study (see Appendix B). Potential participants were then sent an email explaining the study and eligibility and asking if they would like to participate (see Appendix C).

Each participant signed an Informed Consent form (Appendix D) that was also signed by the researcher to indicate that they understood the purpose, risks, and benefits of the study, that the study was voluntary, and to agree to being voice recorded during the interview. The participants were interviewed over the phone, Skype, or Facetime, and each interview was voice recorded. The interviews were semi-structured with an interview guide (see Appendix E) of open ended questions; however, the focus of the interviews was allowing the participants to tell their experiences, not gain answers to a preset list of questions, as recommended by Seidman (2006). The interviews lasted from 30 to 45 minutes. After each interview was completed, the researcher transcribed the voice recording and created the participant profile, which was sent back to the participant to ensure that their words had been interpreted faithfully and that nothing of a sensitive nature was shared. All interviews were placed under pseudonyms and were not linked to

the corresponding signed informed consent documents. All materials gathered from the

interviews were kept on a flash drive in a secure location.

Data Analysis

The researcher immersed herself in the data, listening to the interviews and

reading the transcriptions multiple times. Next, all "significant statements" that revealed

how the participants experienced the phenomenon were highlighted and grouped together

to form several themes (Creswell, 2007, p. 159). Finally, the themes were fully written.

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Findings

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Overview of the Participants

A brief overview of each participant is provided to provide background for the

findings. All five participants were Caucasian women. One participant had only fostered,

while the other four had each fostered in the past but were not currently, and adopted

children. Two of those families had adopted internationally. All five of the women had

biological children. The participants' adopted and foster children had a wide variety of

special needs, from physical and intellectual disabilities to past trauma and mental illness.

They were located in three regions of the United States – three participants were from the

Midwest, one participant was from the Northeast, and one participant was from the

South. Each participant has a pseudonym to protect the identity and privacy of the

participants.

Jane

Jane does foster care and is a single mother. She has a biological daughter and is

currently fostering a preschool-age girl, although she typically fosters teenage girls. Jane

is a physical therapist and lives in the Midwest. She lives far from any extended family.

Kaylee

Kaylee is the mother of five boys. Two are biological and three were adopted through foster care, although her family is no longer fostering. She lives in the Midwest with her husband, who travels often for his agriculture job. Kaylee manages their family farm. They also have one young man who lives with them but is not in foster care. Kaylee is very close to her sister who lives nearby.

Samantha

Samantha has seven children – two biological daughters, two sons who were adopted internationally, and two daughters and a son who were adopted through foster care. She lives with her husband in the South, though they longer a foster family. She has close friends whom she learns on for support.

Erin

Erin lives in the Midwest with her husband and five children. Her two youngest children were adopted from foster care, but they are no longer a foster family. She has two biological daughters, a biological son, and an adopted son and daughter. Currently her youngest daughter is living in a residential treatment center to help her work through prior trauma. They live in a very rural area away from extended family.

Cheryl

Cheryl lives with her husband and children in the Northeast. She has four biological children who are grown and no longer live at home and five sons who joined their family through international adoption and adoption after disruption/dissolution. They also had one son whose adoption was dissolved who is doing well in another family. Before adopting, Cheryl and her family did foster care. She relies on close friends

and church family. They have moved multiple times in order to make space for their growing family, and have attended several different churches as a result.

Themes

Van Manen (1990) defined a theme in phenomenological research as "the experience of focus, of meaning of point" that "is the form of capturing the phenomenon one tries to understand" (p. 87). Three themes emerged over the course of the five interviews, which were the importance of informal support, the need for formal support, and the integral role of faith. Each of these themes had several subthemes. The subthemes for the importance of informal support were support from family and close friends, accessibility and acceptance in the church, and the need for others who "get it." The subthemes for the need for formal support were the desire for respite and the importance of education. Finally, the subthemes for the integral role of faith were the desire to live out their faith, and faith as a motivating factor in the foster care/adoption decision. These themes were very explicit in some interviews, with the participants outright naming them, while remaining more subtle in others, seen only in stories or side comments made during the interview. These themes were also very interrelated. For example, the subtheme of respite can be either a formal or informal support, but is placed under formal support because it is primarily discussed in the context of foster care, where respite is a formal support necessitated by foster care regulations. Similarly, support from the church could also count as formal support, but is a subtheme under informal support because the churches provided this support in an informal manner.

Theme I: The importance of informal support. All the women interviewed spoke of the importance of informal support, either in their lives or as something that they

wished that they had. These informal supports came from many different places and offered assistance and acceptance. Family and close friends were the most common sources of informal support. Some of the participants received support from the church, where their family was accepted, although others did not have that experience and wished for a more accessible church. The interviews also revealed the importance of being with people who "get it" – people who not only accept and support the foster and adoptive family, but who know what they are going through because they have had similar experiences.

Support from family and close friends. The importance of family and close friends was brought up in every single interview. Some of the interviewees said that family and friends were some of their top sources of support, while others listed them as supports that they wish they had. When asked what the most beneficial support Jane had ever received or witnessed was, Jane said foster families that are a two-parent household and have extended family nearby. As a single parent with no nearby extended family, Jane expressed a desire to have that same support system. She spoke about a foster family she knows of where the wife can get a few hours away from the children when her husband is home from work, and the grandparents can take the children. Jane noted that family not only provides support to the parents, but also the children, explaining that "A lot of kids come from a dysfunctional family or a lack of family and just so much of a need for love and care that they need a whole group of people to surround them and take care of them and help them."

Kaylee also brought up depending on family and friends for support, saying, "Once we started foster care it taught us as Americans that we become very independent

and we don't want to ask others for a hand. It's our family, we'll take care of business. But once we were in foster care and we had a lot of children it wasn't feasible." She went on to say that "it's really been an opportunity to broaden our relationships with others, because nothing brings people together like having to care for something else." Kaylee also said that because of the large amount of support her family received from family and friends that the supports the foster care system offered became overwhelming. "I can understand how it would be beneficial for people who need that, but for me I had family and I had people to be there" she said.

Cheryl's family has moved multiple times as her family has grown, but there have always been people for her to lean on. They have had friends support their family by helping with daily needs such as giving their family clothing for the five growing boys.

Accessibility and acceptance in the church. As one of the criteria for participating in this study was the involvement in a church, each of the participants had experiences with the church in three areas. The first was assistance from the church, where the church provided material and immaterial assistance to the participants' family. The second was the accessibility of church activities for the entire family of the participants. The third area was the acceptance and inclusion of the foster and adopted children by the church. For Kaylee, Samantha, Erin, and Cheryl, their church family makes up a large portion of their family and friend group, so church support and family and friend support overlap.

Assistance from the church. Two of the participants listed church assistance when speaking of ways that they had received support. Kaylee spoke of how she received a gift card in the mail to buy a stroller when her family was fostering babies. She does not

know for certain who it was from, but believes it was from her church family. Cheryl also

spoke about how the church had provided financial assistance in times of need. She told a

story of when they were in the middle of one of their adoptions:

> We had a pastor in one of our churches, the last church we were in, who was a
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> lawyer, our pastor was a lawyer, and he said, "Are you having to pay any legal
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> fees for your adoption?" And we said, Oh yeah, quite a bit." And he said "Well let
>
> me pay that for you."

They also had churches throw a spaghetti dinner to help raise funds for one of their

adoptions and give them food baskets every time they adopted a child.

> *Accessibility of church activities.* The accessibility of church participation was

brought up twice in the interviews. Jane spoke of how while she wishes she could go to

the Bible studies her church offers, they no longer have child care during the Bible study

hours. It is very difficult for her to find babysitters for her foster daughter because of state

regulations, so most of the time she cannot participate. Erin's family goes to a new

church in the area. She spoke of how her family does

> not have the emotional or any other kind of ability to pour into the church as
>
> much as it needs, because of having a kid in residential treatment and then trying
>
> to help the rest of the family cope with that difficult situation. So right now it's
>
> feeling a bit more like less help and a little bit more like a burden.

She was quick to point out that these difficulties were "Not because of the people in it.

They're great people." Their family situation at the time was causing the difficulty, not

the people at the church.

Acceptance and inclusion of children. All of the participants valued acceptance and inclusion of their children in the church. Kaylee and Cheryl both said that their churches did a wonderful job of including their children. Kaylee said that at her church "all the teachers in Sunday school and stuff like that have been very understanding and just looking and asking, 'How can we best help the boys?' 'What can we do to make them successful in our class?'" Cheryl reported a similar experience, saying that her church has invited her children to participate while telling the parents not to worry about behavior difficulties. As older parents Cheryl and her husband do not have as much energy as they used to, and their church has made sure that they understand that they do not have to be around when the boys are participating in church activities in the evenings and that their behavior difficulties are not a problem.

Jane, on the other hand, has not experienced the same inviting of her children into the church. She said that while she cannot say that her experience with her church has been negative, she "can't say that they're overly supportive" of her fostering and her children. Jane explained,

My sitters will sometimes will come and talk to me and ask me how I'm doing and how things are going and what's going on with the girls. But other than that I can't say anybody's really said anything or brought it up. They might ask how long they're staying or something like that, not in a bad way, but they might just ask general questions if there's a new girl. I guess it's like they know that they're not gonna stay long. They know that I'm not doing this to adopt, so they know they're not staying. So it's like they're there and they're nice to them, but it's not like they're trying to welcome them into the family.

The need for others who "get it." The importance of having people who "get it" in the lives of the parents to understand and empathize with in the struggles of raising foster and adopted children with special needs were seen very clearly in four of the five interviews. Samantha and Erin said multiple times that knowing others who understand what they are going through is a huge support during difficult times. Samantha said that "people who hadn't gone through [raising children who had been through trauma] couldn't fully understand what we were going through." Erin spoke of how she wished that there was somewhere parents could go where everyone understood what it was like to raise children who had been through trauma. For her, having another family who is going though similar struggles with their own adopted children has provided her a sense of community in a journey that can be "pretty lonely."

Struggles with those who do not understand. Part of that struggle is people who do not understand why a family would take on this sort of life or care for these children. Jane told about how she had difficulties with police officers when she had her teenage foster daughters in her home:

> The times when I had to call the police to help either find [my daughters] or deal with some issues, literally, after like the first two calls every time an officer would come out their first question to me would be when are they leaving? When are you getting rid of them? How soon can you get rid of them? And that absolutely blew my mind when I was looking for someone else, some other adult, to come alongside them and tell them, hey, you don't need to be doing this. You're worth it. And they were coming saying, when are they going? They're trash. Get rid of

them. And that floored me. They just wanted them to go somewhere else so they

didn't have to deal with them.

In a similar way, Erin talked about the struggle of being judged by the mental health

world when trying to get her daughter help for issues resulting from past trauma. She said

that

there is an assumption that you as the parent created this problem. And I'm sure

that's true, largely, and I'm sure there's mistakes we've made, but it would be

really helpful to be around people that understand that so much of what's going

on with our kids happened before we ever met them.

More specifically about the adoption process, Cheryl believes "that people don't see the

struggles that people go through when they adopt, because there's so, so many different,

so many things you have to do."

The desire for mentors. Because of the importance of people who "get it," both

Samantha and Erin listed some sort of mentoring program, as Erin put it, "where parents

who have walked further down the journey can mentor people who are more at the

beginning." Samantha wanted something "just like for any first-time mom but with the

specific understanding of adoption needs" where parents could ask "oh my goodness, my

kid's doing this! Is this normal? And what did you do when this happened?" She said that

a mentor "would have been invaluable for" her when she started adopting and fostering.

Theme II: The need for formal support. Formal support in the form of respite

and education were both brought up as important supports that the participants found or

would find beneficial.

The desire for respite. Respite, or the chance to rest away from the struggles of life, was an important subtheme, as was access to any childcare at all. When asked about how she would create a support system around families who were in a situation like hers, Cheryl immediately answered with paying for a babysitter so that the parents could get away by themselves. She also said that having someone take a more difficult child for a few hours would be helpful so that the parents could focus on each other and their other children. Jane spoke of the struggles of finding respite for her teenage foster daughters because most foster parents are not willing to accept teenagers. As a single mom, it is difficult for her to find people who are approved to watch her children, especially on short notice. She told a story of how she had to sleep overnight with a foster daughter and her biological daughter in a local hospital because her foster daughter had attempted suicide. Because she had no other childcare on short notice her other foster daughter and biological daughter had to stay with them overnight.

The importance of education. The formal support that was mentioned most often was the importance of education, especially education relating to trauma and attachment. Kaylee spoke of how even though at the time it was a pain go to all the trainings and continuing education required of her and her husband when they were foster parents, they value and use what they have learned. Samantha spoke of how she and her husband received very little education prior to their first adoptions, which were international adoptions, and were very unprepared for the realities of adoption.

Theme III: The integral role of faith. As all of the families interviewed were church-going Christian families, it was expected that their faith would play a part in their lives. All five families participated in a local church to different degrees, and all brought

up their faith in God in some way during the interview. As Kaylee said in a half-joking

manner, "Our world revolves around Jesus."

The priority of faith. Jane and Erin's previously shown desire to be part of church

activities despite their family circumstances typifies the priority that all five women place

on their faith. Each desired to be part of a church where their Christian faith was shared,

and looked for ways to express their faith and integrate it into everyday life. It is not

something that is an afterthought. The participants' Christian faith is integral to and at the

forefront of their lives. When asked how she found support through the struggles of

parenting her children, Cheryl immediately said "in God's Word." They also desired

resources and support services that shared their worldview. In particular, Erin expressed a

desire for resources from a Christian perspective on parenting children who have been

through trauma.

Faith as a motivating factor in the foster care/adoption decision. Three out of

the five women interviewed specifically spoke about their faith as a reason for why they

fostered or adopted. Cheryl recounted wondering what God wanted her and her husband

to do once their biological children were in high school, and how through prayer they

were lead to foster care and then adoption. Jane had a similar experience, saying "I found

myself with a lot of things in my life that were going on, finished, and I didn't know

where I was going from there. So I asked God what his thoughts were and he pointed me

to foster care, which is something I had never thought about." She was not open to the

idea at first, and "asked him for multiple confirmations on that and he obliged." She has

now been doing foster care for two years.

When faced with people who do not understand their family's choice to adopt children with a background of trauma and mental illness, Erin pointed to the Bible. "There's nowhere in Scripture that it says you're going to take care of orphans who behave well or come from this really easy background," Erin said, alluding to James 1:27. She also said that she wanted more places where she could find assistance that understood trauma while coming from a Christian perspective.

Discussion

Explanation of the Results

These five participants all have experienced a phenomenon that has rarely been examined. Christian parents of children with special needs and foster and adoptive parents of children with special needs have been studied, but not the families who fall into both of those categories as well as the category of being a church-going Christian. The five themes identified in this study show that these families have a need for support. Some families receive support and some do not, but all five needed support at some point.

Most, but not all, of the participants received support from close family and friends. Some of the participants did not have extended family nearby, which meant that they needed to find other places for support. All participants were very vocal about their beliefs and expressed positive feelings about their faith, but not all had the same feelings about their church. Some had very positive experiences with the church, while others' interactions with the church were very negative. Their churches were not willing to accept those with behavior difficulties or remove barriers to inclusion. This is consistent with research into the church experiences of families of children with special needs (Ault

et al., 2013; O'Hanlon, 2013; Turnbull & Ruef, 1997). It is important to point out that the

difficulties faced by the participants with children with behavior difficulties are the same

problems reported by Turnbull and Ruef twenty years ago. The desire for people who

"got it" was very present, and the frustration resulting from those who did not understand

was palpable, which matches the findings in studies by Atkinson and Gonet (2007) and

Forbes and Dziegielewski, (2003).

Respite and childcare was a need, which was consistent with findings that it is a

top unmet need for foster and adoptive families (Atkinson & Gonet, 2007; Reilly & Platz,

2004). Education was the other formal support brought up consistently in the five

interviews. Many of the participants felt that they were not given enough education to be

prepared for their child's special needs, despite findings that adopting education was the

most beneficial preparation task for parents adopting a child with special needs (Sar,

2000).

The participants reported their faith to be extremely important to them. This faith

was also a motivating factor in several of the participants' decision to become foster

parents or adopt. This is consistent with the emphasis the Bible places on caring for those

who are vulnerable in verses such as John 14:15-24 and James 1:27.

Recommendations for the Church

The church is very important to the participants in this study. Despite difficulty

and downright negative experiences, they continue to try to participate in church

activities. The church should be prepared to care for families like those of the five

participants interviewed. Through verses like John 14:15-24, the Bible makes it clear that

it is the duty of Christians to seek out those who are marginalized and include them in the

full life of the church. This includes those with special needs, as well as their families.

There are five ways that this researcher suggests that churches support families who are

fostering or have adopted children with special needs. These are creating a supportive

community around the family, providing accessible and inclusive church activities,

providing a place where those who "get it" can connect, providing respite and child care,

and helping locate educational resources.

Create a supportive community. There are many ways that churches can create

a community that supports families who are going through struggles. The first is

welcoming new children into the church. Instead of displaying the lack of welcome that

Jane's children experienced, churches can welcome new children into the family, no

matter how long they might stay. Churches can also provide material support in the form

of meals. In the same way that many churches provide meals for families who have

welcomed a new baby into the family or have recently been in the hospital, churches can

provide meals to families who have accepted a new foster placement or have had a child

who has struggled with severe mental illness. Other ways churches can accept and

support foster and adoptive families include inviting parents out to coffee, helping with

cleaning, and encouraging friendships between children.

Provide accessible and inclusive church activities. Do not worry about

providing accessible and inclusive activities for every possible need. Start with the

families in the church. Ask them what barriers they face in participating in church

activities like a typical family. Ask for the best ways that ministry leaders can effectively

include children with special needs. If a family says that it is best for one child to not

attend the children's ministry at the time, or that a child needs constant supervision, do

not question the parents' instructions. Some things seem crazy to parents of typical

children, but those who have experience parenting children with special needs understand

that those crazy things might be what is best for their child.

Educate the church on the special needs that are present in the congregation.

There are many organizations that exist to help churches in this area. One such

organization is Joni and Friends, which seeks "to communicate the Gospel and to equip

Christ-honoring churches worldwide to evangelize and disciple people affected by

disabilities" (Joni and Friends, 2017). They offer a wealth of resources for churches and

families. Another organization is Key Ministry, which "promotes meaningful connection

between churches and families of kids with disabilities for the purpose of making

disciples of Jesus Christ" (Key Ministry, n.d.). This organization has a special emphasis

on children with hidden disabilities (disabilities that are not readily apparent to the eye)

as well as children with special needs that are not typically served by disability

ministries, and has many resources for churches on children who have been through

trauma. There are many other ministries, websites, books, and more that are available to

churches who are willing to search for resources.

Offer a place where those who "get it" can connect. If there is more than one

family who is fostering or has adopted children with special needs, set up a way for them

to interact. This can be as simple as introducing families to each other. Churches with

small group Bible study programs could consider a small group that is comprised of

foster and adoptive parents. The church could also offer the building as a place where

foster and adoptive support groups can meet.

Provide respite and child care. Respite and child care can be provided in many ways. Willing church members can offer to babysit while the parents go out for an evening alone, or even just stay home to take a nap and catch up on household chores. This time can range from a few hours to a weekend. Church members can also provide typical siblings a chance to get away and be with friends, or can watch the child with special needs so siblings can get some alone time with their parents. Churches can even get as elaborate as providing planned nights with volunteers watching groups of children and providing games and crafts while parents have a fun night together.

For foster families, finding someone to provide respite and childcare can be a challenging process. For many states, children in foster care can only be watched by someone who is already approved by the state – a process that must be completed months in advance, including paperwork and background checks. Having a list of people in the church who have already completed this process and are available for foster families in the church means that these families can take a break while still complying with foster care regulations.

All church members who want to provide respite for foster and adoptive families of children with special needs should seek to educate themselves on the needs of the families they wish to help. Seeking out the resources mentioned above and asking the parents for information is necessary.

Help locate education resources. Foster and adoptive parents of children with special needs often want educational resources, and, based on this study, church-going Christian parents might want resources that address these topics in a faith-based way. Churches can be prepared for this by knowing where to locate these resources

beforehand. One such resource is Empowered to Connect, an organization founded by Dr. Karyn Purvis, a well-known authority on children who have been through trauma, which gives families and churches tools for addressing trauma through strategies grounded in neuroscience and developmental psychology with a Christian perspective (Empowered to Connect, 2017).

Through taking these steps, churches can assist foster and adoptive families with children with special needs.

Limitations

This study has several limitations. The first is that this study only looked at the lived experiences of five people, which means that the themes in this study may widely differ from of other church-going Christian families who are fostering or have adopted children with special needs. This study also had a wide variety of special needs present in the children of the participants, meaning that more specific data on, for example, participants parenting children with only intellectual disabilities may have different results. Similarly, this study included participants from both rural and urban areas. A study that focused on only one area might have different results. The participants in this study were all Caucasian females, meaning that there were no minority or male voices.

Recommendations for Future Research

More research should be done on this population of Christian foster and adoptive and special needs families, as very little information is currently available which hinders the results of this study. Studies involving the makeup of the population, such as family ethnic and socioeconomic demographics, needs of the children, and denomination could be helpful. Studies that include the voices of fathers and children should also be

undertaken, as well as studies with more diverse participants. Studies on the effect of

supportive and unsupportive church communities on stress levels and family functioning

should also be addressed.

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Appendices

Appendix A: Institutional Review Board Approval

December 14, 2016

Taylor Weaver
IRB Approval 2732.121416: Church Support of Families Who Have Adopted Children with
Special Needs

Dear Taylor Weaver,

We are pleased to inform you that your study has been approved by the Liberty University IRB.
This approval is extended to you for one year from the date provided above with your protocol
number. If data collection proceeds past one year, or if you make changes in the methodology as
it pertains to human subjects, you must submit an appropriate update form to the IRB. The forms
for these cases were attached to your approval email.

Thank you for your cooperation with the IRB, and we wish you well with your research project.

Sincerely,

Grace Baker

G. Michele Baker, MA, CIP
Administrative Chair of Institutional Research
The Graduate School

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Appendix B: Letter to Find Potential Participants

Dear [Recipient]:

As part of my Senior Honors Thesis at Liberty University, I am conducting research on the lived experiences of families who have adopted or are fostering a child with special needs. I hope to learn more about the support they have received and obstacles they have faced.

Because of your involvement in the adoption and foster care community, I would like to ask you if anyone you know might be interested in participating in this study. Participants must be an adoptive or foster parent to a child with special needs, and must have attended a church pre- and post-adoption/fostering. Participants will be asked to complete a recorded interview in-person or over video chat.

If anyone you know might be interested and would not mind if you passed their email information along to me, I will send them an email that more fully explains this research and how to be involved. If you or anyone you know have any questions, please do not hesitate to contact me.

Thank you,

Taylor Weaver

Liberty University Honors Student

taweaver1@liberty.edu

567-674-9450

Appendix C: Recruitment Letter

Dear [Recipient]:

As a student in the Department of Individualized Studies at Liberty University, I am conducting research as part of the requirements for the Honors Program. The purpose of my research is to examine the lived experiences of families who have adopted or are fostering a child with special needs and the support they have received and obstacles they have faced. I am writing to invite you to participate in my study.

If you are foster or adoptive parents of a child with special needs, have attended a church pre- and post-adoption/fostering, and are willing to participate, you will be asked to complete a recorded interview either in person or over video chat. It should take approximately one hour for you to complete the interview. Personal information will remain confidential, and you will be in control of what information is shared.

If you have any questions at any time during the process, please do not hesitate to contact me at the number or email below. You may also contact my faculty advisor, Dr. Keith, at dlkeith@liberty.edu. If you would like to participate, please respond to this email to schedule an interview. A consent document will be given to you at the time of the interview.

Sincerely,

Taylor Weaver

Liberty University Honors Student

taweaver1@liberty.edu

567-674-9450

Appendix D: Informed Consent Document

CONSENT FORM
Church Support of Families Who Have Adopted Children with Special Needs
Taylor Weaver
Liberty University
Department of Individualized Studies

You are invited to be in a research study of the lived experiences of families who have fostered or adopted a child with special needs. You were selected as a possible participant because you attend a Protestant church and are fostering or have adopted a child with special needs. I ask that you read this form and ask any questions you may have before agreeing to be in the study.

Taylor Weaver, a student in the Honors Program at Liberty University, is conducting this study.

Background Information: The purpose of this study is to explore the lived experiences of families who are fostering or have adopted a child with special needs and look into the different supports families have received and obstacles they have faced.

Procedures: If you agree to be in this study, I would ask you to do the following things:
1. Complete an interview in person or over video chat about your family's experience. This interview will be recorded, and should take around one hour. This interview will be confidential. I will know who you are, but will use a pseudonym on all documents.
2. After I have written the record of our interview, I will send it to you to read over. If there is anything that you think I have misinterpreted, or anything of a private nature that you would like removed, you can tell me and I will edit the records.

Risks and Benefits of being in the Study: There is the risk that you may find some of the questions to be sensitive, or cause you to recall difficult past experiences. There is also the possibility that someone could guess your identity based on responses given during the interview. This risk is minimized by allowing you to review the transcript prior to publication.

There are no direct benefits to you for participating in this study. There is very little research done on the lived experiences of families who are fostering or have adopted a child with special needs and how they can be supported. This research will hopefully add to the current body of research and help other families and organizations.

Compensation: Each participant will receive a $10 Starbucks gift card.

Confidentiality: The records of this study will be kept confidential. Before publishing any data, you will have the chance to remove or change any information. You have authority over what is said about you, and can remove any information you think is identifying. This data will be included in the researcher's senior honors thesis and may be published. A pseudonym will be used to keep your identity confidential, but it is up to you what information you would like published.

Appendix E: Interview Guide

- Tell me about yourself.

  o person, life, family, etc.

- What led your family to foster care/adoption?

- Can you describe a typical day for your family, from waking up in the morning until the next morning?

- Can you describe the joys and struggles of adopting/fostering your child?

  o What ways has your family found support through the struggles?

    ▪ Formal/informal

    ▪ Supports pre-post-adoption

- Can you describe the most beneficial supports you have received or witnessed?

- Were there any supports that you did not receive that could have benefitted your family?

- Tell me about your church.

  o What church activities does/has your family participate in?

- If money was no object and you could build a comprehensive support system for families going through the same experience that yours has, what would that look like?