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Relational Permanence for Individuals Adopted from Care

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RELATIONAL PERMANENCE FOR INDIVIDUALS ADOPTED FROM CARE

A DISSERTATION

(submitted by)

DARCI NELSEN

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ABSTRACT

This qualitative study explored how individuals adopted from foster care experience the concept of relational permanency using an arts-based storytelling process. Participants were eight young adults between the ages of 18 and 30 who were adopted from foster care as youth. All participants identified as cisgender women, 75% identified as Black/African American ($n = 6$) and 25% as white ($n = 2$). Participants completed a demographic survey and engaged in a single 60-to-90-minute interview session. The interview was comprised of three main components, a semi-structured interview regarding participant understanding of relational permanency, an embodied check-in focused on physiological experience, and an arts-based storytelling process involving the creation of timeline of relationship and a house drawing. Thematic analysis revealed three themes regarding participant's understanding of the construct of relational permanence: *relational elements of building permanency, personal barriers to permanency,* and *external barriers to permanency*. Analysis of the arts-based storytelling component suggest that the use of creative process supported participants in sharing about and reflecting on their experiences. Findings confirm that relational permanency is a complex construct and further investigation into how it may function as a protective factor for individuals with lived experience in care is warranted.

Keywords: Relational Permanence, Adoption, Foster Care, Arts-Based Storytelling

Author Identity Statement: The author identifies as a cisgender, white woman of mixed European ancestry.

CHAPTER 1

Introduction

Adoption as a practice in the United States can be dated back to the early 1900s, initially believed to be a response to a developing concern for the number of youths experiencing homelessness in urban areas. Societal solutions for this led to arguably problematic practices such as the creation of "foundling homes," a form of institutionalized housing, as well as the "orphan train" in the United States, which would transport masses of youth across the country to be delivered to adoptive homes without any formal assessment of adoptive families (Palacios & Brodzinsky, 2010).

Prior to the 1960s, there was sparse focus on the need for protection of children from harm, and there were few systematic practices that were in place to address concerns when they arose (Melamed & Myers, 2006). As awareness of the potential impact of abuse and neglect on child welfare began to garner more attention in the medical community, government involvement also grew. The addition of the Social Security Act expanded assistance provided by child welfare services to include prevention or alleviation of problems pertaining to neglect or abuse; protection of children experiencing homelessness; maintenance of the welfare of children and their caretakers; and, when necessary, provision for placement away from their homes or in child care facilities (Melamed & Myers, 2006; Rymph, 2012). As concern for child abuse and neglect spread, states passed legislation requiring mandated reporting of suspicions of neglect or abuse, leading to a surge in the need for services provided and, ultimately, an increase in the frequency of removal of children from their homes. In response to these trends, adoption grew significantly as a child welfare practice.

According to the latest Adoption and Foster Care Analysis and Reporting System (AFCARS) report, removal of a child from their parents or caretakers most often involved neglect, drug abuse on behalf of the caregiver, a caregiver's inability to care for the child due to emotional illness or disabling condition, and physical abuse. At the time of the report, approximately 391,098 children and adolescents in the United States were residing in out-of-home care and were involved in some level of foster care in 2021 (US Children's Bureau, 2021).

The goal of a foster placement varies depending on the reason for removal and may include (a) reunification with the child's birth parents, (b) permanent placement with a child's relatives, known as *kinship placement*, (c) adoption, (d) long term foster care, (e) *emancipation*, or (f) *guardianship* (US Children's Bureau, 2021). *Emancipation* occurs when a child ages out of the foster care system at age 18 and becomes solely responsible for their own welfare. *Guardianship* of a child may occur when a foster caregiver is appointed by the court to be responsible for a child on a long-term basis, without the same extent of legal responsibility as adoptive parents. Of the 214,971 youth who exited care during the 2021 reporting year, 25% of them were placed with an adoptive family (US Children's Bureau, 2021).

Adoption has long been seen as a positive child welfare intervention, with policy and practice surrounding the narrative that a decision to place a child in an adoptive family is in the "best interest" of children. In recent years, however, there has been a shift in perception, which has begun to acknowledge the complexity of the adoption experience as a developmental risk factor (Brodzinsky et al., 2022). The experience of adoption is not monolithic, pre-adoption adversity, an individual's understanding of their

history and their relational experiences pre- and post-adoption have tremendous multidirectional impact on an individual's perception and characterization of their own experience.

Statement of the Problem

From a child welfare perspective, achievement of permanency is the primary focus for care involved youth. Permanency has historically referred to achievement of permanent living arrangements through reunification with birth family, adoption, or legal guardianship (Best & Blakeslee, 2020; Brodzinsky & Smith, 2019). Legal permanency and placement stability have incredible value for adopted youth, particularly as a way of providing security in a physical place and access to resources, yet the act of legal permanence alone may not meet the emotional and developmental needs of individuals (Best & Blakeslee, 2020). Greater attention to the concept of *relational permanency,* sometimes referred to as *psychological permanence*, has begun to shift the conversation.

Relational permanence can be defined as sustained relational connections with supportive, caring adults over time (Salazar et al., 2018). A focus on relational permanency, therefore, prioritizes the connections an individual has, often with significant attachment figures, but also with caregivers who promote connection and safety within their relationships (Brodzinsky & Smith, 2019). The quality of permanency in relationships has uniquely been identified as the experience of continued supportive relationship (Williams-Butler et al., 2018a).

Much of the research that currently exists on relational permanence has focused on current foster youth or individuals who have aged or are aging out of foster care. Less

research is available that has explored the construct of relational permanency for those individuals who have achieved legal permanence through adoption.

A significant number of studies exist that highlight the complicated and pervasive impact that the experience of trauma has on numerous developmental, social, emotional, and health outcomes (Bartlett et al., 2016, 2018; Greeson et al., 2011; Layne et al., 2014). Individuals who have experienced abuse, neglect, and subsequent removal from their home are considered at-risk for exposure to trauma. With such a deficit focus in the literature, less attention has been given to potential growth and resiliency factors that may exist given certain resources, and how these elements may support meaning making for individuals who have navigated the complexity of the foster care system. Existing research on relational permanency has demonstrated the positive correlation between supportive sustained relationships and overall well-being (Williams-Butler et al., 2018a). Therefore, additional exploration into how individuals who may have access to legal permanence understand this construct is warranted.

Research Question

This study was intended to explore the construct of relational permanency by seeking to better understand how young adults who were adopted from foster care have experienced relationships across time. Specifically, this research investigated how these individuals understood, defined, experienced, and made meaning of relational permanency throughout their process of entering, navigating, and transitioning out of care. This study sought to contribute to current research on relational permanence by expanding the understanding of this construct to also include the unique perspectives of individuals who have been adopted from foster care. The study was designed to also

examine how this knowledge regarding relational permanence could be explored and communicated through the engagement in creative processes and how perspectives and developing understanding can be represented through both verbal and arts-based means.

This qualitative research study used semi-structured interviews and an arts-based storytelling methodology to explore the following questions: (1) How do young adults who were adopted from foster care experience *relational permanency*, and (2) How can engagement in an arts-based storytelling process contribute to meaning-making for adopted individuals with a history of being in foster care?

CHAPTER 2

Literature Review

Child welfare practice is centered around permanency as the primary goal; when reunification with birth family has been determined not to be possible, the focus shifts to identification of a permanent family who is assumed to provide the safe and caring atmosphere youth require to develop. Adoption is often seen as a final and enduring situation for individuals, however, in some cases discontinuity or adoption disruption is a real outcome for as many as ten to 15% of those adopted from care (Rolock et al., 2018). Multiple variables such as complexity in experiences while in care, age of adoption, or length of time spent in care have been determined as factors that influence permanency outcomes for adopted youth (Ball et al., 2021).

In recent years research has aimed to better understand the construct of relational permanence, as an additional and potentially beneficial factor (Samuels, 2009) in supporting development and well-being for those with lived experience in foster care. Improving understanding and determining contributing elements that support youth in developing interpersonal connections and sustainable relationships across time has the potential to greatly benefit youth in attaining the authentic, enduring sense of belonging in relationships they deserve, the foundational characteristic of relational permanency.

This literature review investigated the multilayered aspects of relational permanency, exploring the complex interplay of attachment, grief and loss, exposure to adversity, and the impact of trauma on individuals within the context of foster care and adoption. A strong focus on reviewing past research on experiences in care was included to offer insights into the perspectives of former foster youth and to examine the pivotal

roles of social support and relational connection in the process of emerging adulthood.

Specific reviews of research on expressive arts and the integration of methodologies like

participatory action research, graphic elicitation, narradrama, and arts-based storytelling

were intended to highlight the potential value of including the creative process in

research.

Attachment

The discussion of attachment has been central to adoption research. The most

salient assumption of attachment theory is that the bond between an infant and their

caregiver is a biological imperative and that these attachment relationships serve as a

foundation for subsequent development, learning, and global well-being for individuals

across the lifespan (Doyle & Cicchetti, 2017). The caregiving system, often referred to

as the *attachment system*, is a biologically driven relationship between caregiver and

child that is necessary for survival. Within this relationship, the child is motivated to

seek out the caregiver to receive comfort during periods of physiological arousal or

stress. The patterns by which a caregiver responds to the child's needs generates an

"internal working model," which establishes a schema of expectations within relationship

between self and other (Siegel, 2001, p. 69).

According to attachment theory, there are a few fundamental attachment styles

(*secure*, *insecure/resistant-ambivalent*, *insecure/avoidant*, and *insecure/disorganized*)

that account for a child's behavior in response to the primary caregiver, particularly in

times of stress (John et al., 2019; Vasileva & Petermann, 2018). A securely attached

child will respond positively to the primary caregiver and seek out the attachment figure

when experiencing distress or after separation. Insecurely attached children, however,

may become upset over separation, but demonstrate ambivalence when the caregiver returns. They may present with little resistance to exploring their environment and avoid the caregiver upon their return, or respond inconsistently with both approach and fear of the caregiver (Vasileva & Petermann, 2018).

During early stages of infant development, presence of these attachment patterns via the caregiving relationship have significant impact on developmental processes and subsequently influence a child's emotional regulation, sense of self, and empathy development (Kim & Cicchetti, 2010). Insecurely attached children have been shown to be at a greater risk for displaying deficits in emotional regulation development, demonstration of externalizing problems, and are more vulnerable to stress as compared to securely attached children (Bernard et al., 2012).

A series of meta-analyses was conducted by Vasileva and Petermann (2018) to analyze literature across 25 independent studies to understand the prevalence of psychosocial ($n = 726$), developmental ($n = 4,033$), and attachment ($n = 255$) concerns connected to previous abuse and neglect for children entering foster care during preschool years. Results indicated considerable occurrence of psychopathology, developmental issues, and attachment difficulties in children placed in care following neglect or abuse. Across these studies, approximately 39% of children presented with developmental concerns and 38% demonstrated psychological problems in clinically significant ranges. Forty-three percent had insecure attachment styles and, of those, 22% presented with *disorganized attachment*. Disorganized attachment is seen in a child's behavior when they appear to want to approach a caregiver but also perceive them as a

threat. The frequency of disorganized attachment is higher in these children than in the general population, confirming that this is a pertinent issue for children in foster care.

Attachment disorders, although considered rare, are diagnosed in youth residing in foster care at alarmingly high rates (4% to 17%), suggesting challenges with attachment are prevalent among youth placed out of home (John et al., 2019). When disruption and maltreatment occur in the primary attachment relationship, the child may develop beliefs that others are not trustworthy, subsequently diminishing their beliefs that they can seek out others for supportive care (John et al., 2019; van der Kolk, 2005).

Given the multiple disruptions in attachment relationships that may exist by the time an adolescent in foster care has been placed in an adoptive home, a focus on nurturing relationship for these individuals is imperative. Research has indicated that secure attachment is fostered by emotionally present and responsive caregivers (Zeanah & Gleason, 2015), and that features of attachment difficulty lessen in response to the formation of attachments with nurturing caregivers. Studies have also demonstrated that both quality of care as well as the stability of relationship over time is critical to the development of attachment relationships, and that the majority of youth have the capacity to form these relationships beyond infancy given adequate opportunity (Carlson et al., 2014). Taken as a whole, this research supports the mediating potential of attachment relationships and the incredible capacity youth have for developing connection if provided sufficient enough healing experiences in their lives.

Grief and Loss

The transition into foster care is marked with apprehension and stress, as well as significant ambiguity about several factors related to the transition. Specifically, areas of

uncertainty and unpredictability include understanding about what foster care is, the reasons behind the transition, where and with whom youth in care may be placed, how long the change in placement will last, as well as confusion regarding the loss of loved ones (Mitchell & Kuczynski, 2010). To find a common language for discussing grief that is complicated by the lack of traditional loss, Boss (2010) defined *ambiguous loss* as occurring when a person is either physically present but psychologically absent, or psychologically present but physically absent. These types of losses are unclear and are characterized by often not having any resolution. Further, these types of losses are potentially traumatic, a disorder of relationship, caused by external forces, and confusing to or unable to be understood by the griever.

For youth in foster care or who have been adopted from care, loss of birth family and the loss of previous foster families can be difficult to grieve. This confusion over loss of relationships, and how the associated grief is handled by those involved in the care of children in foster care, has not often been addressed in the literature (Mitchell, 2018). As part of a longitudinal study by Mitchell and Vann (2018), which investigated the experiences of youth who were transitioning out of foster care, three waves of data were collected. The current study included data from the third wave of the study, which involved 212 young adults, age 21 years, who had transitioned out of care.

Mitchell and Vann (2018) specifically sought to investigate youth perceptions of non-death loss, grief, and trauma that they experienced while in the foster care system. The study explored whether participants were separated from people they considered important during their time in care, and whether they could recall a time when others acknowledged the loss that they experienced following their entry into foster care.

Unlike children who have experienced the death of a loved one, participants thematically reported grieving the loss of parents, siblings, or other important individuals in their lives, but also experiencing the loss of their identity, their community, and their sense of stability (Mitchell & Vann, 2018). Another theme for many participants was the experience of *disenfranchised grief* or feeling as though others in their lives did not acknowledge, address, or provide the support necessary for them to cope with their loss. Certain youth described receiving messages from others that they were better off without their parents, especially if they had been removed from an abusive situation, leading participants to feel as though they did not have the right to grieve the loss. Contrarily, some participants reported experiencing acknowledgement of their loss—either from foster caregivers, dedicated social service workers, group home staff, peer connections, or through spiritual or religious affiliations—which ultimately provided the support they needed to grieve. Some participants described initially experiencing alienation in terms of their grief but expressed a change in this over time as they developed new relationships that they could rely on for support.

These qualitative findings, which suggest that youth who are transitioning out of care have a complicated task of managing ambiguous loss and grief in addition to the unpredictability and stress of transition, present a challenge for child welfare services. Enfranchisement of grief, as in the case of the individuals interviewed in this study, may be an important factor in providing a positive outcome for youth in foster care (Mitchell & Vann, 2018). While many theories exist in the literature relating to the complications of grief and loss, fewer focus on this specific experience of loss for those individuals in foster care (Look, 2023). Further research centering the voices of those individuals in

foster care could provide an opportunity for increased understanding of the unique impact of grief for these individuals.

Adverse Childhood Experiences

In a landmark study known as the Adverse Childhood Experiences (ACE) study (Felitti et al., 1998), researchers administered questionnaires to 9,508 individuals to explore the impact of exposure to childhood abuse and household dysfunction on adult health. Childhood abuse was defined as experiences of psychological, physical, or sexual abuse. Household dysfunction was defined as exposure to or witnessing violence perpetrated against mothers, residing with substance abusers, individuals with significant mental health difficulties or who had attempted suicide, and/or family members who were imprisoned.

Researchers (Felitti et al., 1998) determined that there was a direct positive relationship between cumulative number of ACEs participants were exposed to during childhood and risk factors for leading causes of death. Results also revealed a dose-response relationship between the number of childhood exposures and numerous health conditions such as heart, lung, and liver disease, cancer, and skeletal fractures. The long-term cumulative consequences of childhood experiences on adult health is evidence for the need to improve treatment and prevention of ACEs (Felitti et al., 1998).

Lanier, Maguire-Jack, Lombardi, Frey, and Rose (2018) sought to further understand the implications of the ACE study, conducting a survey of 95,677 parents or guardians of children under 17 years old to evaluate whether certain combinations of ACE categories impact child outcomes in different ways. The survey inquired about an expanded nine categories of ACEs including: experience of extreme *economic hardship*;

parental *divorce*; parental *incarceration*; witness to *domestic violence* in the home; victim or witness of *neighborhood violence*; household members with *drug or alcohol abuse*; household members with significant *mental health* challenges or *suicidality*; *death of parent/guardian*; and exposure to *race/ethnic based discrimination*. Additionally, parents/guardians were asked to report on health status of the child to identify the general health condition; any healthcare needs for physical, emotional, or behavioral health; as well as the existence of any chronic health conditions.

Results of Lanier et al.'s (2018) study supported prior research (Felitti et al., 1998) that have shown the cumulative consequences of exposure to ACEs on health outcomes. Results also indicated that combinations of specific ACEs predicted differential effects on health risks for children. Of note, children who had one or two ACEs, had experienced mental illness and poverty in their homes, and more than three ACEs had a significantly increased risk of parent-reported health risks as compared to those with one or less ACEs. The unique impact of certain combinations of ACEs has important clinical implication that extend beyond universal prevention of ACEs and may require targeted intervention for youth experiencing poverty paired with familial mental health challenges.

Experience of parental or family mental health and exposure to chronic poverty are linked to factors resulting in removal of a child from their family (US Children's Bureau, 2021). Children were often represented in more than one category of contributing factor of removal, adding to the potential risk. The implications from these studies highlight the potential long-term health risks youth in foster care face, given the likelihood of their cumulative ACEs (Felitti et al., 1998; Lanier et al., 2018).

Exposure to Adversity

Traumatic events seriously threaten the health or survival of a person, evoke feelings of powerlessness when faced with fear or arousal, overwhelm a person's ability to cope, and violate basic beliefs about the safety of one's environment (Glaser, 2000). Consequences for childhood exposure to neglect or abuse are multiple, including impact on brain functioning, attachment difficulties, experiences of posttraumatic stress, internalizing and externalizing behaviors, and physical health problems (Bartlett et al., 2018; Greeson et al., 2011). Exposures to these adversities are often prolonged in the case of youth referred to child protective services, and are sometimes referred to as *complex trauma*, which is associated with a variety of complications in biological, attachment, emotional and behavioral regulation, cognitive skills, and self-concept (Bartlett et al., 2018; Greeson et al., 2011).

Through their study, Katz et al. (2017) sought to examine the type of adversities youth have experienced before entering care, the proportion of youth in care who report experiencing additional maltreatment while in the foster care system, and whether certain pre-foster care experiences of maltreatment increase the risk of receiving subsequent maltreatment while in care. Data were collected as part of a larger study, The Midwest Study, which involved in-person, structured interviews that occurred with youth bi-annually across a 10-year period. Youth were included if they were entered into care prior to their 16th birthday. The first two years of interview data were included in the sample ($N = 1,335$).

Katz et al.'s (2017) study reported three types of maltreatment youth experienced before entering foster care. Thirty-six percent of the sample reported experiencing

neglect prior to entry into care, 31% experienced physical abuse, approximately 16% experienced sexual abuse, and 25% reported witnessing parental violence. These numbers were closely proportioned by gender, with the exception of reports of sexual abuse, where 24% of female participants endorsed having been sexually abused, compared to 7% of male participants.

Participants were then divided into four classes which were categorized by ratings specific to the presence of high, moderate, or low physical or sexual abuse and the presence of high or low neglect. Using a multinomial logistic regression analysis, Katz et al. (2017) found that the assigned maltreatment class prior to entering care predicted further maltreatment while in care. Youth who were categorized as experiencing high neglect or high abuse prior to placement in care were more likely to report physical abuse, sexual abuse, or neglect in care when compared to those who experienced low maltreatment.

Data collected were entirely reliant on participant recall of events that had, for some, occurred many years prior to the start of the study (Katz et al., 2017). Additionally, researchers were specifically seeking information pertaining to physical maltreatment or neglect, which could potentially miss the influence of emotional abuse in some situations. Despite these limitations, given that foster care is an intervention that is intended to improve safety and care of children, these findings are quite alarming and warrant further exploration of the unique vulnerabilities and needs of this population.

Impact of Trauma

Youth in foster care have been shown to display mental health and behavioral problems at a higher frequency than those who have not been placed in care or who have

experienced neglect or abuse but remain in their home (McGuire et al., 2018). McGuire

et al. (2018) conducted a study to further investigate this relationship between

maltreatment, mental health, and placement instability for youth in foster care. Data were

collected as part of a larger study, from caregiver reports and case files of 496 youth in

foster care between the ages of 8 and 21 years ($M = 13.14$, $SD = 3.08$). Forty-nine

percent of the youth population identified as African American, 34% as Caucasian, 9% as

multiracial, 3% as Hispanic or Latino, and 2% as Asian or American Indian. Caregivers

who participated in the study were foster parents (50%), residential staff (37%), or

biological relatives (13%). Maltreatment was coded using a Modified Maltreatment

Classification System from information included in children's files.

The type, frequency, and severity of situations coded as maltreatment, such as

physical, sexual, and emotional abuse or neglect were included (McGuire et al., 2018).

Youth mental health was measured based on caregiver ratings on the Behavioral

Assessment System for Children-2 Parent Report Form. Placement instability, the final

measure, was determined based on records from the Department of Social Services,

which reported the number of placement moves across the span of time a child was

involved in foster care. Researchers used structural equation modeling to evaluate the

relationship that placement stability had with maltreatment and mental health. Children

in the sample experienced nine changes in placement on average and demonstrated both

externalizing and internalizing symptoms in the borderline range. Changes in placement

were positively associated with both internalizing ($\beta = .54$, $p < .01$) and externalizing ($\beta =$

$.22$, $p = .05$) symptoms, suggesting that, as the frequency of placement changes

increased, so did the children's demonstration of symptoms both internally and externally.

This study confirms prior studies (Newton et al., 2000) that identified a connection between placement changes and mental health outcomes for youth in the foster care system, but also suggested that this relationship is bidirectional (McGuire et al., 2018). While these results are indicative of a robust relationship between placement disruption and mental health challenges, results should be interpreted with the limitations of this data set in mind. Data derived from case files and guardian report have the potential to underestimate the extent of maltreatment, as they likely only include reports or information that were verified and known to the reporter. While this eliminates the possibility of errors in participant recall, it also excludes and fails to place value on the knowledge of participants that might have been illuminated with the opportunity for self-report.

To further understand the implications of childhood trauma, Layne et al. (2014) conducted a study exploring the relationship between childhood trauma exposure and future engagement in high-risk behavior during adolescence. Participants were 13 to 18 years of age ($M = 15.3$, $SD = 1.4$) and had been exposed to at least one type of trauma, including: sexual abuse/maltreatment, physical abuse, neglect, community violence, physical assault, and medical trauma or natural disaster, to name a few. Possible high-risk behaviors included: criminal activity, sexual exploitation, suicidality, self-injurious behavior, alcohol use, substance use, running away, school truancy, and attachment problems.

Researchers (Layne et al., 2014) conducted a series of logistic regression models using total types of trauma and loss as predictors, and high-risk behavior indicators as criterion variables. As predicted, with each additional type of trauma exposure, the likelihood of concerns with high-risk behaviors including attachment, school truancy, substance abuse, suicidality, criminal activity, self-injurious behaviors, alcohol use, running away, and sexual exploitation, also increased. This study aligns with earlier research by Felitti et al. (1998), as it highlights the direct association between childhood trauma and later life challenges. These findings emphasize the ongoing need to systematically improve treatment, services, and supports for individuals exposed to trauma.

Adoption and Foster Care Research

Prior research in adoption and foster care has assumed a deficit focus, highlighting the impact and negative outcomes of early trauma. While research on the impact of early trauma is integral in understanding the unique challenges these individuals face, it is also limiting. Research has also demonstrated that strong relational connections are tied to positive outcomes and overall well-being. Further research on factors, such as relational permanence, which have the capacity to contribute to resiliency for those individuals adopted from care is merited (Ahrens et al., 2011; Jones & LaLiberte, 2013).

Resilience

In their study, McCormack and Issaakidis (2018) investigated the lived experiences of four adult women who had been involved in foster care in their youth. At the time of the study, each participant was over 30 years old and had lived in two or more

foster care placements. Adults were specifically chosen for this sample, as researchers were interested in hearing from individuals who had adequately processed and made meaning of their earlier traumatic experiences.

McCormack and Issaakidis (2018) conducted semi structured interviews to elicit from participants how they have come to understand those experiences, as well as the influence they have had on their adult lives. Following a six-stage interpretative phenomenological analysis method, they transcribed audio recordings of the interviews, noted language used, identified emergent themes, discussed themes in depth, and spent time evaluating, comparing, and finding support for classified themes. Upon researcher agreement, two superordinate themes were identified, each with additional subthemes. The first theme was *unconditional is conditional,* with subthemes of *loss of individuality*, *expectations of disruption*, and *mismatch of commitment.* The second was *learning to walk with self*, with subthemes of *pain is pivotal*, *gratitude and thankfulness*, and *doing it differently*.

Despite the time that had elapsed since their transition out of care, these participants remained influenced by negative beliefs about relationships, and had not experienced unconditional loving connections with others (McCormack & Issaakidis, 2018). Interpersonal relationship dynamics remained challenging because of loss of connections to themselves and others, and the lack of predictability and consistency of support.

Given the interpretive approach to this study, the researchers (McCormack & Issaakidis, 2018) made substantial effort to prevent the influence of their own biases by conducting audits of the interviews and presenting an in-depth discussion of the data

collected. These results, while specific to the participants in the study, offer promising insight into the potential resiliency that remained for most participants. Many participants felt they had experienced tremendous growth as individuals in the face of challenge. Participants acknowledged painful moments as catalysts for self-improvement, identified gratitude toward experiences and people who support them, and expressed a commitment to be a better provider to their children in the future. These results offer a sense of hope, that considering the difficult road of childhood trauma and foster care some individuals may feel empowered enough to make a change.

Research on Experiences in Care

The reality of research with youth in foster care is that, similar to the process of being in the system where youth themselves have limited involvement or control (Polkki et al., 2012), their voices are not often centered in research regarding matters that concern them. A qualitative study by Polkki, Vornanen, Pursiainen, and Riikonen (2012) attempted to better understand participation in the child welfare system through the experiences of foster youth and their social workers. Semi-structured interviews were conducted with eight youth between seven and 17 years of age, who had been placed in foster care, and four social workers working in the child welfare system. Other demographic information, including race and gender, were not reported, and background information was not collected from participants.

Interviews with youth participants asked questions regarding their perception of adult interest in the youth's knowledge; youth's experience of working with social workers; what types of information they were provided about their situations; the youth's level of participation in assessments or meetings; and any significant relationships with

adults (Polkki et al., 2012). Social worker interviews focused on current child welfare

policies and procedures, their interest in the youth experiences, their interactions with the

youth they encounter, and the youth's significant relationships. Based on interviews, four

themes emerged, which included *children's right to access knowledge*, *children's right to*

produce information and the significance of children's knowledge, *children's possibilities*

for participating in the working process, and *children's conception of social workers and*

social work.

During the interviews, some youth reported wanting to be more informed about:

their histories, what their future plans involved, what led them to be placed out of the

home, and if and when they could return to live with their biological caregivers (Polkki et

al., 2012). Others reported that, prior to placement in care and during initial stages, they

were not involved in any decision making. However, as they aged and spent more time

in care, they had greater involvement. For some, experiences of not being heard were

common prior to placement, and inability to contribute to their treatment replicated those

experiences. Participation was limited in some cases due to loyalty to their biological

parents and not wanting to share details of their experiences out of fear they would hurt

their parents. Social workers in this study reportedly felt strongly about the importance

of child participation, however, attributed decisions to keep children removed from

aspects of care planning to the child's age and their reliability or accuracy of reporting,

cognitive abilities, and available resources.

While appropriate informants for the study were identified by social workers

(Polkki et al., 2012), it should be acknowledged that the interview content with this

particular population of youth may have been a challenge in terms of emotional load, and

subsequently may have influenced the responses. Despite the potential challenges Polkki et al. (2012) identified, enabling youth with lived experience to participate in research ultimately reinforced that youth perspectives are important and that they were respected as experts in their own lives.

> **Perspectives of Former Foster Youth.** Much of the research on experiences in the foster care system is retrospective and requires participants to reflect back on their memories of being in care (Chambers et al., 2018; Chaney & Spell, 2015). In a study specifically designed to investigate adult perspectives of time spent in foster care, Chambers et al. (2018) addressed two major questions: how individuals who have aged out of foster care remember their experiences of moving between placements within the system, and how those same individuals understand those moves to have impacted their current lives. To approach these questions, researchers conducted semi-structured interviews with 43 individuals at least 18 years of age, who were no longer in foster care, and who had experienced more than two placements during their time in care. Participants were 51% male, 44% African American, 23% Latinx, 14% Caucasian, and 19% Multiracial. Most interviews were conducted in person, lasted approximately 30 to 45 min, and were audio recorded.

> Chambers et al. (2018) identified six major themes in the data: participants largely described the experience of constantly moving, losing relationships with others, feeling excluded from placement decisions, having difficulty graduating from high school, feeling unsafe in their placements, and additionally feeling unwanted by their placements.

> Many participants expressed that moving became a normalized and expected experience; however, many also attributed this expectation to contribute to difficulty

adjusting to new situations and emotional withdrawal (Chambers et al., 2018).

Participants attributed thematic loss—primarily of siblings, caregivers, and friends—for

feelings of sadness, anger, and betrayal. Many participants mentioned situations in which

the decision to move was not made clear to them, specifically the reasoning behind the

move, and confusion about expectations in a new placement. Interviewees frequently

described disruption to their schooling due to moving and acclimating to new schools.

Overall, participants perceived placement changes as an obstacle to success in school.

Furthermore, some explained that they felt unsafe in certain placements, even so

far as to report that they experienced abuse via their foster caregivers or through peer

interactions in group or foster homes (Chambers et al., 2018). Perceived rejection

because of placement changes was common, as participants felt unwanted by the people

who they stayed with. Participants largely described that they had developed a tendency

to remain at a distance emotionally from others because of their experiences in care.

Specifically, they described avoiding close relationships for fear of rejection or loss.

Additionally, many described the chaos and frequent disruption of foster care as resulting

in their feeling unstable and chaotic as adults. However, many also described a more

positive outcome of feeling resilient and adaptable in the face of change. They reported

that managing to move forward, despite the challenges, had helped to build inner strength

and self-confidence.

Chaney and Spell (2015) sought to explore the specific experiences of African

American women who had aged out of the foster care system. Researchers were

particularly interested in their perceptions of their entrance into the foster care system;

what they experienced while in the system; how they adjusted after aging out of the

system; and if they had any recommendations for improvements in child welfare. Six African American women, between the ages of 18 and 57 years, were identified through purposive sampling. Each participant had remained in communication with Court Appointed Special Advocates (CASA) services following the end of their time in care. Once identified through the CASA service, each woman completed a demographic questionnaire regarding age, education, marital status, and amount of time in care, as well as a survey called "Foster Care Stories." The survey asked open-ended questions that addressed four specific areas: entry into care, experiences in care, life after care, and recommendations for improvements in care.

A narrative approach was used to analyze the data, to depict a holistic view of individuals' experiences within the context of their unique experience in care. From the narratives, researchers used open coding to identify emergent themes, which included the challenges of understanding why they were placed in care, what they appreciated about their foster caregivers, the challenges they faced transitioning out of care, and their recommendations for sustaining resiliency for children in care (Chaney & Spell, 2015). Participants highlighted the importance of receiving social support and the benefit of access to religious or spiritual support while in foster care. Participants also largely reported feelings of resilience and developing independence because of their experiences in foster care.

As Black youth are more prone than White peers to experiencing poverty, being identified by the child welfare system, or being placed in long-term foster care without the achievement of legal permanency, this study's focus on this group of participants is an important step in understanding the perspectives of this specific population (Chaney &

Spell, 2015). As such, transferability should be cautioned, as the unique intersectional

challenges this small group of participants have withstood throughout their foster care

histories may differ substantially from other individuals in the foster care system.

More recent research by Chambers et. al (2020) has reported similar participant

beliefs, while offering direction and potential suggestions for improving outcomes for

those in care. Researchers conducted a qualitative study to explore the perspectives of

individuals formerly in foster care on how to best support youth currently in care. Of the

43 individuals with a history of placement in foster care included in the study (Chambers

et al., 2020), 51% were male, 44% identified as African American, 23% as Latinx, 14%

as White, and 19% Multiracial. At the time of the interview, all participants were at least

18 years old, and had spent an average of 10 years in foster care.

Participants in the study (Chambers et al., 2020) were asked to share their

personal experiences with placement instability, and ideas or recommendations for

improvements for three categories of people: (1) youth in foster care, (2) foster

caregivers, and (3) social workers. Researchers conducted analysis using two levels of

coding; the first level of open coding focused on the research questions, and the second

focused on clarifying codes and themes. Themes that emerged in the advice provided to

youth included strategies to manage overwhelming emotions and remain connected to

supports. Recommendations for caregivers thematically addressed clarifying motivations

to take care of foster children, and ways to be supportive and welcoming during

transitions. For social workers, participants thematically identified the importance of

completing more thorough investigations of foster families prior to placement, having

conversations with, and allowing youth to be part of the decision-making process, and ways providers can best support during transitions.

When taken as a whole, these results offer interesting implications for policy in foster care policies regarding decision making, treatment, and involvement of youth (Chambers et al., 2020). The retrospective approach of this study and others that rely on expert opinions of those who transitioned out of care, while limited by participant recall, are benefitted by the maturation and capacity of participants to make meaning of their earlier experiences.

Social Support

Social connection through supportive, sustained relationships have been positively correlated with overall well-being (Williams-Butler et al., 2018b). To explore this connection further, Sanchez-Sandoval et al. (2020) conducted a study evaluating mediating effects of perceived social support, defined as an interpersonal resource of strength and encouragement, on emotional and behavioral problems for adults who were domestically adopted from care. Participants were 70 young adults between the ages of 25-43 years, most of whom were adopted prior to their first birthday (*M* = 2.06 years, *SD* = 3.24).

Researchers (Sánchez-Sandoval, Melero, et al., 2020) used a measure of *Psychological Well-Being Scales* to assess components of well-being that included self-acceptance, positive relationships with others, autonomy, environmental mastery, purpose in life, and personal growth. An additional scale, the *Duke-UNC Functional Social Support Questionnaire* was also used to measure self-perceived social support. Previous data collected in earlier studies from the *Revised Rutter Parent Scale* were also used to

determine presence of problems for adopted children as reported by their adoptive

parents.

Variables from each scale were first analyzed for correlations. Significant

positive correlations were found between behavioral and emotional problems in

childhood and adolescence. Problems in adolescence were negatively correlated with

psychological well-being in adulthood. When compared with social support variables,

social support was determined to be negatively correlated with problems in adolescence,

however, it was positively correlated with psychological well-being in adulthood.

Sanchez-Sandoval et al. (2020) then used structural equation modeling (SEM) to test the

goodness of fit of their model to determine conditions for mediation. Results indicate

two mediating effects, which imply that social supports contribute to positive adjustment

and overall well-being in adulthood for individuals with adoption histories. In summary,

these results confirm the incredible value of social support, and the potential protective

factors that connection with others can have despite challenging emotional or behavioral

factors individuals may experience before, during, or post-adoption.

Relational Permanence

Achievement of a stable and safe familial relationship is typically the goal of

child welfare services, but given challenges children face with disrupted attachment

relationships, establishing this type of permanence is often a challenging task (Cushing et

al., 2014; Vasileva & Petermann, 2018). Samuels (2009) conducted a qualitative study

using in-person interviews that explored how individuals formerly in foster care

experienced supportive relationships, what aided their connections with family, and what

their perspectives were on permanence. Additionally, Samuels (2009) investigated participants' perspectives on adoption and reunification with biological families.

Participants were 29 individuals (n_{female} = 20, n_{male} = 9) who had aged out of foster care between the ages of 17 and 26 years (Samuels, 2009). Over half identified as African American (51%), 34% as White, and 10% as Latinx. Face to face, in-depth interviews were conducted, as well as the creation of a personal network diagram. Interviews focused on participant definitions of permanence, their level of involvement in their own foster care planning, how they felt regarding adoption, and the factors that both challenged and strengthened their relationships with their biological and foster families.

Samuels (2009) applied the theoretical framework of ambiguous loss to participants' experience in foster care, highlighting that the experience of being placed in foster care itself is rooted in substantial and repeated loss of oneself and one's feeling of belonging to a family or home. Themes that emerged identified ways in which participants as adults managed this impermanence in family relationships by establishing their own model of permanence, constructing a sense of control over their own familial decisions, and creating a sense of stability after aging out of care.

Participants largely identified the experience of permanence as linked to feeling authentic care, support, and acceptance from their "family"; however, these ideals fell short of their actual experiences of relationships in care (Samuels, 2009). It is important to note that the individuals interviewed for this study were receiving essential financial and educational supports that are not widely available to individuals who age out of care. Even with access to these much-needed resources, these participants still endorsed difficulty within interpersonal relationships, which illuminates a continued need for

access to relational supports. These results offer a unique perspective of the challenges for individuals in care, and those transitioning out of care, as it explored the unfortunate social and emotional consequences attributed to the loss of attachment to family.

More recent research has confirmed findings that youth privilege relational permanence over legal permanence (Rolock & Pérez, 2018). In attempting to understand this construct of relational permanence, Best and Blakeslee (2020) explored questions about what youth identify as qualities that make up close relationships and how youth define those qualities in a study of 22 youth 55% female in foster care. Participants were between the ages of 16 and 20 years. Eleven participants identified as white, six as "mixed" race, two as Black or African American, and the remaining three identified as "other" race.

Participants constructed a support network map and engaged in a semi-structured interview (Best & Blakeslee, 2020). With the visual support network map, participants identified individuals who they considered to play significant roles in their lives, and then qualified strength of relationships and what type of support they provide. Participants were then asked questions about what makes a relationship strong, how they defined trust and closeness, and answered questions about the existence of interconnectedness within their network.

Findings demonstrated three major themes: (1) *multidimensional support*, including emotional, concrete, and informational supports, (2) *qualities of strong ties*, including stability and trust, and (3) *qualities of close network*, specifically commonalities, honesty, genuineness, and advocacy (Best & Blakeslee, 2020, p. 3). While these findings confirm previous research (Blakeslee & Best, 2019; Greeson et al.,

2010) that identified stability and emotional support in relationships as impactful for youth, they also highlighted that the focus on establishing a singular caring adult relationship may not be enough. Relational needs of youth transitioning through foster care, may expand past that of the financial or emotional support of solely the caregiver or legal guardian, and necessitate support in establishing and maintaining relationships that extend to sibling, peer, and community supports.

While relational permanency has been identified as an important factor in addition to legal permanency, little is known about what specific factors support development and achievement of relational permanency for individuals in foster care (Ball et al., 2021). To increase understanding of how relational permanency may be facilitated for individuals in care, Ball et al. conducted a qualitative study with 30 young adults with lived foster care experience to examine what factors contribute to their experiences of permanency.

Participants ranged in age from 18 to 33 years ($M = 22.23$, $SD = 4.7$), 80% identified as female and 20% identified as male. Thirty-seven percent of participants identified as Hispanic, 33% as Black, and 27% as white. Most participants ($n = 25$) had emancipated from foster care at age 18, and nine participants reported being adopted by a non-kinship family. Researchers (Ball et al., 2021) conducted five sets of semi-structured interview questions focused on participant's history entering care, experiences while in care or in their placement, their relationships with caregivers and other community members, their transition to adulthood and current relationships, as well as future goals.

Findings highlighted participant perception of their voice and agency, their experiences of supportive care, and the presence or absence of emotional connections

throughout their experience (Ball et al., 2021). For these participants, sense of agency and belief that they had control or choice of their outcomes was an important factor in relationships contributing to either feeling empowered or disempowered, confirming previous research highlighting the benefits of involving youth in decision making (Nybell, 2013). Participants also described the types of relationships that they had experienced, whether transactional or transformational, underlining the importance of emotional support in relationship beyond just financial and physical needs being met. Of importance, participants described mutual emotional connection as essential in permanency, emphasizing the need for genuine connection to be present to facilitate growth and healing for those with histories in care.

Much of the current research regarding the construct of relational permanence has been focused primarily on the experience of youth transitioning out of foster care, many who have not achieved legal permanence (Cushing et al., 2014), or who have experienced adoption disruption (Ball et al., 2021). Further exploration into how relational permanency is experienced for individuals who have achieved legal permanence through adoption is warranted to expand understanding of how this construct may realistically function in the lives of adopted individuals.

Relational Competence in Emerging Adulthood

Cashen and Grotevant (2020) conducted a study focused on developing evidence for a construct of relational competence in interpersonal relationships of 162 emerging adults who were domestically adopted before the age of one. Participants had been adopted by same-race parents through private adoption and ranged in age from 20.77 to 30.34 years ($M = 24.91$, SD $= 1.91$). Participants were predominantly white,

approximately half identified as female and half as male. Researchers were interested in understanding the transition to adulthood for adopted individuals through developing a measure of positive relational adjustment. Given that adoption begins with separation and is inherently rooted in loss, understanding capacity to form relational connections is a salient task for individuals with a history of adoption.

Researchers (Cashen & Grotevant, 2020) first conducted a factor analysis to confirm appropriateness of fit for their relational competence model, which had been adapted from an earlier study (Shulman et al., 2011). Participants completed three interviews and 11 measures which elicited information about participant's closest relationships, commitment, concern for partner, capacity to respond to partner, orientation, or ability to create a narrative of relationship, and the Adult Self Report (ASR) (Achenbach & Rescorla, 2003) as a measure of adaptive functioning. Utilizing the relational competence model, comparisons were conducted to test for difference between adopted participants in romantic and nonromantic relationships and between men and women. Multiple regressions were then used to evaluate differences between measures of relational competence and Internalizing, Externalizing, and Mean Adaptive scales of the ASR.

Results confirmed goodness of fit for the relational competence model and indicated no differences for participants between type of relationship (romantic or nonromantic) or gender (Cashen & Grotevant, 2020). Relational competency, however, was positively associated with adaptive functioning and negatively associated with internalizing and externalizing behaviors. These results indicate that competency in relationship may rely less so on the type of relationship, but that overall functioning and

well-being may have considerable influence on the capacity of young adult with a history of adoption to develop close relationships.

This sample, however, reflects only individuals adopted domestically as infants into same-race families, who are less likely to have experienced early trauma pre-adoption or to have navigated complicating relational factors such as transracial placement. Given the prevalence of adverse experiences and their link to internalizing and externalizing behaviors for individuals with lived experience in foster care, it is likely that additional research would be needed to address the potential variability in relational competence for those with a history of foster care prior to adoption.

Expressive Arts in Research

The use of expressive arts or arts-based research methods have been applied in research given their potential to gather data from participants that provoke greater depth of perspective than verbal or written expression (Nathan et al., 2023). Methodological adjustments in the use of arts-based processes can additionally empower participants who might struggle with communication, particularly of intense or emotionally complex topics, to engage and contribute meaningfully to research (Doucet et al., 2022; Nathan et al., 2023). Multimodal combinations of research methods that include arts-based methods have also been identified as promising due to the capacity to use varying methodological strengths to compensate for constraints of each method (Hense, 2023).

Participatory Action Research

Doucet et al. (2022) conducted a participatory action research (PAR) project titled *Relationships Matter for Youth 'Aging Out' of* Care, in collaboration with eight former foster youth between the ages of 19 and 29. The focus of this study was exploring

important relationships for former foster youth, as well as the barriers and supports of those relationships through an arts-based methodology of photovoice. Photovoice is a creative arts-based method of using photography paired with group dialogue, to deepen understanding of an issue and explore their own experiences through reflection of imagery and verbal discussion. A series of twelve weekly discussion groups were held in a community meeting space, with food provided and additional group outings offered to facilitate relationship building between co-researchers. Training by a professional photographer in photovoice method was provided to all collaborators.

Co-researchers all contributed photographs from throughout their experience together, which were then analyzed for themes (Doucet et al., 2022). Photographs and their affiliated descriptions were showcased in a community art gallery that was open to the public. Themes identified included that the use of photo documentation and the creative process offered *validation of their lived experiences*, which in turn contributed to integration of storytelling as a means of healing for these researchers. Other themes included the *recognition of commonalities and differences* as individuals with experience in care, the *development of political agency*, the necessity of *PAR as a methodology* for participation, and *communication of lived experiences with acquaintances is emotionally and socially difficult.* Unique to this creative process was the facilitation of complex and emotionally laden discourse through task-oriented processes which co-researchers expressed finding more beneficial than relying entirely on speaking.

Voices of those with lived experience in care have historically been absent from larger discourse around permanency planning, child welfare policy, and research on foster care and adoption (Doucet et al., 2022). By utilizing an arts-based participatory

action research approach to this study, the method was flexible enough to allow for centering of those with lived experiences in a way that enabled them to both contribute to potential social change and engage in self-reflective and transformative processes.

Embodiment

    Embodiment is defined as awareness and perception of self that acknowledges the entirety of experience from physical sensation, emotions, and thoughts in a given moment (Tantia, 2013). Previous research has emphasized the value of including embodied experience as a form of non-verbal communication in addition to more traditional verbal communication during interviews (Tantia, 2013). Most traditional methods of interviewing deal exclusively with the production of explicit, or verbally shared information. Including the embodied experience in the interview process has the potential to allow for exploration of implicit knowledge, by bringing it to conscious awareness alongside the verbal information communicated (Tantia, 2019).

    Body Focused Interviewing. In exploring somatic psychotherapist's embodied experiences of intuition in their practice, Tantia (2013) developed a body-focused interview methodology that translated somatic techniques into interviewing protocol. The interview protocol began with asking participants to recall a given scenario, imagine the scenario in real time, and then speak about the scenario in the present moment. The researcher would then interrupt the participant's verbal narrative to ask the participant to orient to their physiological experience and ask participants to describe what was happening on a sensorial level. While participants were describing their embodied experience, the researcher used a process of *focusing,* a somatic therapeutic practice of asking a question that encourages attention to a felt sense and giving a label or language

to the sensation (Gendlin, 1969). Findings from this research illuminated new aspects of intuitive descriptions such as images, auditory cues, movements, and gestures, that deepened the understanding of the phenomenon being researched beyond what had been previously studied through verbal means.

A benefit of body-focused interviewing appears to be the enhancement of communication between researcher and participant when both explicit and implicit communication are included in the research process. Used as a tool within an interview, an invitation to become attuned to the embodied experience in the moment, encourages the participant to orient to the present, lived experience of the moment.

Somatic Awareness. Many contributions to the literature on trauma treatment have focused on therapeutic use of body and somatic practices to address dysregulation that occurs on a body-level. Methods such as Sensorimotor Psychotherapy (Ogden et al., 2006), Somatic Experiencing (Levine, 2010) and Sensory Motor Arousal Regulation Treatment (SMART) (Finn et al., 2017) have demonstrated benefits of engaging the body in the regulation and modulation of arousal for those with histories of trauma.

Somatic intervention, in these methodological practices, do not require verbal processing, instead, encourage the use and access of interoception, defined as the awareness of internal bodily experience. Inclusion of somatic practices, therefore, is intended to support resiliency and agency through expanding capacity to notice sensation and inhibit reactive physiological response via the autonomic nervous system (Lohrasbe & Ogden, 2017). When appropriately modulated, arousal levels can subsequently remain in what is sometimes described as a *window of tolerance*, which is an optimal arousal state where emotional information can be tolerated and integrated into experience without

exceeding sympathetic hyperarousal or parasympathetic hypo arousal (Corrigan et al., 2011).

Applying embodied methodological practices to research may have the potential to support improved communication between researcher and participants as well as encourage participant awareness of their physiological needs.

Graphic Elicitation

Use of images or imagery as a tool in research has been explored in various ways. Typically, these choices for data collection are intended to support the expression of internal mental content in a visual way that provides insight into experience or perception that may be limited through verbal communication (Mignone et al., 2019).

Visual or graphic elicitation techniques are defined as methodological practices in research where participants are asked to create visual representations of their experiences, understanding or perspectives of certain constructs (Copeland & Agosto, 2012). These techniques, when applied, have been predicted to be particularly helpful in assisting participants in expressing complex or intangible ideas. To better understand both the benefits and challenges of using multiple graphic elicitation techniques for data collection, analysis, and presentation, Copeland and Agosto (2012) conducted a study on the topic of digital preservation techniques to test their use of these tools.

Twenty-six participants between the ages of 18 and 65 participated in this study recruited through a large public library system (Copeland & Agosto, 2012). Researchers conducted a single interview with each participant that included (a) diagram of matrices, (b) semi-structured interviews, and (c) relational maps. Digital matrices were presented to participants where they were asked to indicate visually information that was aligned

with reflected their use of digital content. Next, semi-structured interviews were conducted to engage participants in the clarification and decision making of their engagement with the matrices, and elicited participant feedback on their experience of use. Participants were then asked to complete two relational maps that reflected both items they perceive as important and information they seek to preserve. The relational map is a visual tool used to categorize importance and significance by noting spatially where information goes based on level of importance. As participants completed these, dialogue and additional questions for clarification continued.

Researchers found that the addition of the use of diagrams and relational mapping was highly useful in producing a deeper understanding of participant's needs and values for digital information preservation that the interviews alone (Copeland & Agosto, 2012). The application of these visual tools supported both data collection, data analysis, and how researchers were able to present results of their study. Additionally, relational mapping revealed unexpected emotional connections participants were making regarding the research questions, that verbal portions of the interview were not prepared to address. In the absence of a multimodal approach to their research question, researchers would have missed the personal and emotional factors that contributed to participant needs for digital information preservation. This finding is in line with more recent research that has confirmed the benefit of using arts-based methods to support the collection of data that is emotional (Doucet et al., 2022; Nathan et al., 2023).

Narrative Research

Autobiographical storytelling can be a meaningful way of processing past events with others. However, for individuals attempting to integrate traumatic and painful past

experiences into their stories, this can elicit an overwhelming stress response or emotional avoidance (Steenbakkers et al., 2016). Often for those impacted by trauma, access to verbal processing of traumatic memories is stunted, as emotional dysregulation can interrupt access to skills requiring higher level cognition and language (Finn et al., 2017; Perry, 2009), further complicating the assumption that verbal sharing alone can capture one's full experiences.

To investigate current and former foster youths' experiences of sharing emotionally charged stories about their past and being in foster care, Steenbakkers et al. (2016) conducted a qualitative research study. Researchers recruited participants thoughtfully using purposive sampling to identify foster youth who had both expertise in this area and willingness to be interviewed, as well as subsequent snowball sampling. Thirteen participants ages 15 to 23 years were identified. Of the sample, 85% were female, 85% were Caucasian, and 78% self-reported they did not identify as having any mental health issues. Six of the individuals were still residing in foster placement, while the remaining seven were living independently or with partners. To be eligible for the study, participants were required to have a history of at least one stable foster placement of two or more years. Researchers included this criterion to establish that participants at least had an opportunity to build a relationship with a foster family.

Episodic narrative interviews were conducted with participants, over the course of one or two sessions (Steenbakkers et al., 2016). Single sessions were 60 to 150 min each and occurred in the homes of the participants, with one exception. Episodic interviews were selected for use over a biographical narrative, to provide more context and targeted questions about specific experiences of individuals in foster care and their perceived

needs. Researchers reported that questions were open-ended to allow for the participant to determine what elements of their story to share; however, sample questions were not included in the publication for review. Demographic information such as age, number of prior placements, duration of time spent in the foster care system, and the participants' mental health status was gathered in a brief questionnaire.

Steenbakkers et. al (2016) provided a robust description of their process of thematic analysis. Three researchers reviewed transcribed interviews and coded for themes with the assistance of NVivo 10 software. Ongoing peer review occurred throughout the analysis. Two main themes emerged from the data: when and why foster youth chose to tell their stories. Each main theme was further defined with three sub-themes. The three sub-themes of when foster youth tell their story included how frequently the participants expressed wanting to share their stories with others, the specific conditions during which they felt most comfortable sharing, and a desire to maintain ownership of their own stories. The three sub-themes related to why foster youth chose to share their stories or not included: the need to feel protected, wanting others to understand them and their histories, and sharing to process and integrate the past. These themes, when understood in the context of participants' experiences, highlight that these individuals value relationships with others and environments that provide safety and trust to verbalize and express their complicated histories.

Researchers noted that a potential limitation of the study was that these individuals were uniquely open and willing to discuss aspects of their histories (Steenbakkers et al., 2016). Many alluded to the fact that they typically do not engage in dialogue about their experiences in care, suggesting that transferability should be

cautioned as this sample of participants may be atypical in their willingness to discuss their experiences. An additional weakness of this study is that the researchers failed to account for their personal biases, and how their presence may have influenced what participants opted to share.

Narradrama

In their narrative arts-based research study, Savage (2015) explored the experience of creating Personal Public Service Announcements (PPSA) with adolescents adopted from foster care. The purpose of this study was to investigate how engagement in this process supported understanding of self-identity, and how the platform for voicing their experiences could contribute knowledge to the larger human services fields regarding the needs of youth involved in child welfare services.

The participants in this study were four females, between the ages of 16 and 18 who had been adopted from foster care (Savage, 2015). The adolescents were of mixed biological heritage, including Western-European, African American, and Latino. All research took place in the adolescent's homes in California. The researcher was a participant observer, and facilitated each of the six, one hour and 75 minutes sessions that occurred with each individual adolescent. Over the course of the six sessions, the researcher facilitated *narradrama*, an action based narrative drama therapy technique, designed masks, and developed and recorded their Personal Public Service Announcements (PPSA). The PPSA were brief, 30 second clips of narrative from the adolescents. At the conclusion of the sessions, a screening was provided for close friends and family to witness the PPSA.

Persistent observation, triangulation, member checking, and peer review were used to ensure data was accurately represented, given direct involvement in the facilitation of all aspects of the research study. Results presented included a written portrait of each participant, an I-poem, an autobiographical life story narrative, and a Personal Public Service Announcement (PPSA). Five overarching themes emerged from the data: (1) self-expression and creativity, (2) self-identity or how I am and how I like to identify myself, (3) adolescent independent or how I want to live my life, (4) self-love or how I accept myself, and (5) survival that contends with being stuck or what I do with loss.

The methodology presented in this study proved to be useful in identifying the complex needs of adolescent females who have been adopted from foster care. Interventions such as the *narradrama* and PPSA, functioned as a safe way for individuals to share and express their experiences with providers and adoptive family members, increasing empathy and deepening understanding. For these participants, this type of inquiry highlighted their specific needs and allowed them to process challenges that they had incurred from their foster care and adoptive histories.

Arts-based Storytelling

The methodological choice of arts-based storytelling for the current study is informed by prior pilot research that qualitatively examined how youth made sense of the concept of *home* through the use of an arts-based storytelling process (Nelsen, 2020). While many methods of creatively engaging participants in research have previously been explored (Copeland & Agosto, 2012; Doucet et al., 2022; Savage, 2015; Tantia,

2019), the specific integration of multiple methods of creative engagement to facilitate the communication of participant voice has not been explored extensively.

Participants in this pilot study (Nelsen, 2020) were six youth between the ages of five and ten, four identified as White, and two identified as mixed race (Latinx and Asian). All participants lived with their biological parents and resided in a household absent of significant home stressors such as recent long-distance moves or parent separation. Participants were engaged in one 45 to 60-minute storytelling session at their home where they were asked a few brief interview questions, created a story about the concept of *home*, were given the opportunity to act out their story, and created a visual representation of their story. Thematic analysis revealed that responses clustered around two themes regarding the understanding of home: *home as a physical place; and home as a family;* as well as three themes regarding engagement and participation in the research process: *important things to know; making independent choices; and seeking approval of others*.

Pilot findings suggested that the concept of *home* was complex and multi-layered, even for youth who had experienced relative stability within their home environment (Nelsen, 2020). One of the most striking themes related to participant engagement in the research process was the theme of participants making independent choices. Each participant demonstrated the freedom of choice in some capacity. Whether that was to dictate the materials the research used, how they wanted to tell their story, or create their art, each participant set parameters and advocated for what they needed. They were confident in their requests and did not show any fear that their desires would be ignored or denied. These findings are illuminating when juxtaposed against earlier findings in

research on those with lived experience in care. Many studies have highlighted that former foster youth often feel as though their thoughts, opinions, and requests were not heard, acknowledged, or acted upon (Chambers et al., 2020; Nybell, 2013; Polkki et al., 2012). For many individuals in care, particularly those who have been subject to neglect or abuse, the experience of unmet needs and routine denial of requests may limit self-advocacy.

Findings from this pilot study also confirmed prior research that found that the use of visual arts as a starting point for dialogue elicited information about what was meaningful for participants, and allowed participants to feel confident in their role as expert (Coussens et al., 2020). The use of the arts-based storytelling method empowered all participants, regardless of age, to contribute a great deal of valuable information through both verbal and creative means. The qualitative findings from this study highlight the capacity of arts-based processes to deepen contributions to research beyond verbal outcomes.

CHAPTER 3

Method

Participants

Following approval from the Lesley University IRB, purposive sampling was

used to recruit eight young adults between the ages of 18 and 30-years-old from October

2022 to March 2023. For recruitment, two social media platforms, Facebook, and

Instagram, were used to advertise information about the study to potential participant

groups. Flyers were shared and posted to specific groups for adult adoptees and foster

care alumni. Recruitment materials were also shared with a few post-adoption

organizations and adoption professionals who work to provide resources for adult

adoptees. Please see Appendix A for recruitment flyer.

All participants met the inclusion criteria of being adopted following at least one

out of home placement in foster care. For the purposes of this study, out of home

placement was defined specifically as separation from the biological parents resulting in a

non-kinship foster placement. Legal permanence through a finalized adoption was

completed for all participants prior to participation. Furthermore, all participants signed

consent forms (Appendix B) and were provided the incentive of a $50 Amazon gift card.

This incentive was provided to all participants after signing consent forms, regardless of

completion of the study.

Given the potential of this study to elicit significant emotional responses,

participants were asked to identify established supports in place prior to engaging with

the research interview. Additional resources such as emergency services, mental health

referrals, and community supports were available to be provided based on participant location should participants have demonstrated need (Appendix C).

Recruitment aimed to reflect the diverse demographic profile of individuals adopted from the foster care system in the United States. Approximately 50% of individuals adopted from care identify as White, 20% identify as Hispanic/Latino/Latina, and 18% identify as Black, and the remainder identify as multi-racial, Asian, Native American, or are unidentified (US Children's Bureau, 2021). Participants in this study identified as Black/African American ($n = 6$) and white ($n = 2$). All participants identified as cisgender women. Participants reported a range of educational experiences including completion of some college ($n = 4$), completion of a bachelor's degree ($n = 3$), and completion of a graduate degree ($n = 1$).

Participants had varied experiences with child welfare, represented in Table 1 which outlines the large differences in age at participant's first placement in foster care, the number of placements endured while in care, the age at which they were legally adopted, and the reasons for their placement in foster care.

Format and Procedure

Participants completed a brief demographic survey and engaged in a single interview session comprised of three main components, a semi-structured interview, an embodied check-in, and arts-based storytelling. Due to global pandemic COVID-19 occurring at the time of data collection, all interviews were conducted remotely via Zoom, a HIIPA compliant teleconference platform, at a convenient time for participants and within a setting where they felt comfortable with the level of audio and visual privacy. Interviews varied in length between 60 to 90-minutes.

Table 1

Participant Foster Care Demographics

Pseudonym	Age at first placement, years	Number of placements	Age at adoption, years	Reason for placement
Mikayla	11	2	12	Parent incarceration
Laura	12	1	12	Parent incarceration
Sierra	13	+25	22	Abuse/Neglect
Amber	11	1	12	Parent incarceration
Angela	14	1	15	Parent relinquished rights
Taylor	5	10	7, 16	Abuse/Neglect
Haley	9	8	13	Parent mental health (substance use)
Jada	14	2	16	Parent death, parent mental health

Semi-structured Interview

Participants were first guided through a semi-structured verbal interview focused on participant understanding and experiences of the construct of relational permanence (Appendix D). During this portion, participants were asked to share about the important people in their lives. They were additionally asked what qualities define meaningful, longstanding relationships, and if they could identify people in their own lives who represented important relationships. Participants were encouraged to share factors that allowed for nurturance of these relationships or any obstacles that impeded their ability to maintain relationship over time.

Given the uniquely challenging situation of attachment and relationship disruption that these participants experienced, these questions were expected to be challenging in terms of emotional load. Previous research has indicated that individuals adopted from foster care have often not felt entitled to feelings of loss (Mitchell, 2018), which potentially impacted the ways in which participants felt they had permission to share. The semi-structured nature of the interview was intended to encourage participants to share at a level that was comfortable, lead with what they felt was relevant, and control their own pace.

Embodied check-in

After the verbal interview was completed, participants were invited to engage in a brief embodied "check-in" to orient the participant to their physiological experience. Participants were offered an opportunity to self-lead this exploration or follow a short, structured body scan (Appendix E) led by the researcher. Use of *embodiment* within the interview process was intended to deepen and enhance communication between participant and researcher by attuning the participant to their physiological lived experience in the moment (Tantia, 2013). Participants were asked to pause to notice any shifts in arousal levels to ensure that participants were able to remain engaged and physiologically regulated while discussing sensitive information. Non-verbal attunement and mirroring were employed by the researcher to support interactive co-regulation as needed to provide containment and maintain a level of safe arousal for participants (Pierce, 2014).

Arts-based Storytelling

Participants were given an opportunity to reflect on the interview through engagement in an art-making storytelling process. Prompts were open ended and intended to allow participants to focus on the aspects of relationship that resonated the most with their own experiences. For both visual art-making components, participants were given an option to use physical writing materials they had in their space such as blank paper, pencil, or markers, or to use a digital drawing tool provided by the researcher. All participants expressed preference to use physical materials rather than the digital drawing tool offered.

Timeline of Relationship. Participants were asked to create a visual timeline to represent their history of navigating foster care to post-adoption. Participants were asked to use this timeline to share the story of their placement in care, and what they remembered about the experience with relinquishment, placement in care, and subsequent placement within an adoptive home. They were encouraged to use line, shape, and texture to indicate remarkable periods of time. To that line, participants then were asked to create small images or icons near the line to represent people they remember who were present during those times, who were supports, or who participants felt connected to at that time. At the completion of their drawing, participants were asked to verbally share about what they had created and identify the relationships they decided to include in their drawing.

House Drawing. Participants were next asked to select a relationship they identified on their timeline. Once identified, they were asked to create an image of what that relationship would look like if it were a house. Participants were encouraged to

consider what the house would look like as well as the environment around that house. At the completion of their drawing, participants were asked to share the story of that relationship and describe the house they created.

The purpose of asking participants to create a drawing of a house was intended to enhance and deepen their storytelling process. Previous pilot research (Nelsen, 2020) identified the idea that home can be representative of both *physical place* and *family.* Other theorists have also explored metaphorical and projective representations of house drawings, including the well-established House-Tree-Person (H-T-P) test, which is a projective drawing assessment that is comprised of a free hand drawing which includes a house, tree, and person (Buck, 1948). This test, which is based in projective theory, considers the house as a projection of the family, the tree a representation of the environment, and the person a representation of the self (Yu & Ming, 2016). Use of this measure has been rooted in the belief that subconscious information could be shared through nonverbal methods. While the current study operates on the assumption that drawing supports communication of metaphorical information that may not otherwise be expressed through verbal means, unlike the H-T-P test, the drawings provided by participants were not intended to be used as an assessment. Engagement in the creative process of this house drawing, rather, was intended to provide participants time for continued reflection, and serve as an additional method of processing and sharing information, allowing participants to expand on details they may have omitted in the verbal interview.

Data Analysis

Each teleconference session was audio and video recorded and transcribing of the interviews was conducted using Zoom and OtterAI software. Screenshots or pictures of participant artwork were also collected.

Analysis aimed to illuminate the individual aspects and qualities of each participant's experience of relational permanence, and how they were able to understand and make sense of the construct through the development of an arts-based narrative. Taking a feminist approach, data analysis involved a voice-centered, relational approach to illuminate the subtle and multiple layers of voice within participant's stories (Way, 1997). Feminist research assumes that research is an inherently relational process, and therefore findings are products of the exchange between researcher and participant.

To account for the relational aspect of storytelling a modified version of the *Listening Guide* (Gilligan et al., 2003) was used as the framework for data analysis and interpretation. This framework is focused on whose voice is present, who is that voice speaking to, what are the stories being told, and within what societal and cultural contexts (Gilligan et al., 2003). The *Listening Guide* framework is comprised of four sequential steps including: (1) listening for the plot, (2) I-poems, (3) listening for contrapuntal voices, and (4) composing an analysis (Gilligan et al., 2003).

The transcribed interviews were both read several times and the audio recordings were listened to in their entirety to support a full understanding of the participant's narrative, and the story they were telling about their own experiences before, during, and post-adoption. Special attention was made to the context that participants described

about their experiences, as well as who they opted to share about and what they elected to focus on.

Next, each transcription was distilled into an I-poem, an edited version of the interview that allows for centering first-person narrative. Sentences or phrases with "I" pronouns were highlighted and then separated from the full text in the order of which they were shared. This resulted in a poem structure presented in first person voice for each participant. Sections of each I-poem were selected and used to introduce each participant through portraiture.

Thematic analysis continued using the process of memoing (Creswell & Poth, 2018); notable phrases were highlighted throughout the transcripts, with special attention to the various voices present in the transcripts to capture holistically the experiences of this group of participants. Once initial memos were identified, multiple rounds of coding took place to organize and describe the data.

Establishing Trustworthiness

In qualitative research, inquiry strives to generate understanding and meaning through establishing a closeness to research participants. To ensure accuracy of data analysis and credible representation through these research processes, certain considerations must be applied. Creswell and Poth (2018) suggested the use of at least two validation strategies to account for the researcher's lens, the participant's lens, and the reader's lens (p. 260). Methods of reflexivity, member checking and collaboration, and providing a rich and thick description were implemented to establish credibility and maintain integrity as researcher.

Stance of the Researcher

Central to feminist framework, it is acknowledged that relational power dynamics exist within the interview context. Therefore, indicating the social location of the researcher and specifying the potential impact on the research process is essential to name. I identify as a white cisgender woman of European descent, able-bodied, with middle-class socioeconomic status. While complex blended family relationships and disrupted connections exist within my relational spheres, I also carry the privilege of being parented by my birth family and remaining supported and connected with extended family members over time. Professionally, I identify as a dance/movement therapist and mental health counselor working primarily within the post-adoption community with individuals whose lives have been touched by adoption. With the presence of a clinical lens informed by both attachment theory and the belief in family preservation, an inherent bias toward valuing emotionally supportive relationship and connection exists. It is recognized that participants in this study may have potentially complicated and layered historical relationships with both family members and professionals, therefore, efforts to address these biases using reflexive practices in this study are outlined in the next section.

Reflexivity

An ongoing reflexive journaling process was used throughout the study. This involved maintaining a research journal from the beginning of the research process to note the subjective experience and response of the researcher. This practice was useful particularly through data collection, as researcher thoughts, opinions, somatic responses, and emotional reactions to what participants shared in interviews were noted and acknowledged, bringing awareness to my own biases. Through transcribing, listening,

reading, and interpreting data, this reflexive process continued to allow for checking personal responses and separating them from the voices of participants. This reflexive process allowed an opportunity to embed written discussion of the researcher's process of interacting with the data that is influenced by previous experience, biases, or values (Creswell & Poth, 2018).

Member Checking

A preferred method of establishing credibility is through implementing a process for member checking (Lincoln & Guba, 1985). This process involved sharing transcripts and preliminary analysis with participants. To ensure accuracy of what was collected during interviews, engaging participants in reviewing what was transcribed from their interviews was essential. Preliminary analysis of each participant's own individual transcript was emailed to them, and participants were asked to provide a judgement of the accuracy of the interpretation, clarify, offer alternative perspective, or note anything that might have been absent.

Rich and Thick Description

Detailed descriptions of participants provided in the results section as well as clear steps for methods of data collection, data analysis and research findings were intended to provide the complete context for information provided in this study for readers (Creswell & Poth, 2018). In detailing the specifics of those who participated, the methods employed, how data was analyzed, and the findings, the possibility of transferability was ensured.

CHAPTER 4

Results

This section presents an overview of the results in three sections. First, each participant is introduced through a brief portrait to provide context for the experience they voiced. Next, a summary of the arts-based storytelling process is presented, followed by the thematic analysis conducted via a modified listening guide (Gilligan et. al, 2003). The research questions were: (1) How do individuals adopted from foster care experience *relational permanency*, and (2) How can an arts-based storytelling process contribute to meaning-making for adopted individuals with a history of being in foster care?

Participants

Mikayla

This participant identified as a 27-year-old Black cisgender female. At the time of interview, Mikayla had completed a bachelor's degree and was not seeking employment. She shared that she was first placed in foster care when she was 11, and she experienced two placements in care prior to her adoption. Mikayla reported that she was initially placed in care following the incarceration of one of her parents, she described her other parent as "really sick" and subsequently unable to care for her. The placement that led to her adoption was with a white family who she described as a "blended" family with two older children who she recalled were "the kind of people who don't want you quiet or they don't want you secluded, always tag you along." Mikayla reported feeling like part of her adoptive family, and broadly defined her experience

positively as one that "changes your perspective about life, and makes you know there are actually people who really care."

The essence of Mikayla's experience of her transition to foster care, and subsequently into an adoptive family, was captured in the following I-poem:

> I was a quiet child back then
> I really was an introvert
> I didn't know how to make friends easily
> I think it's a space that makes you meet a lot of people
> I think most of them were fruitful
> I met people—I met who really supported me
> I opened up
> I believe it's a transitioning phase

Laura

This participant identified as a 29-year-old Black cisgender female. She had completed a bachelor's degree and was employed part-time. Laura indicated that she was first placed in foster care at the age of 12 after her birth mother had been incarcerated. She experienced one placement in foster care; a placement with a white family who eventually became her adoptive family. Laura described this family with some fondness, "I met our Christian family, and they were people of good character. Yeah, they had good children, and I—I could say that they are my good friends, to still maintain the relationship to today, till today."

Laura's experience of relationship in the context of her adoption is reflected in the following I-poem:

> I relate to other human beings
> I relate with maybe, my friend
> I'm a partner
> I'm a beneficiary of a supportive relationship
> I really love a relationship that
> I'm free
> I'm just comfortable

Sierra

This participant identified as a 23-year-old white cisgender female. Sierra was enrolled full-time in college and employed part-time. She shared that she was initially placed in foster care when she was 13, and she sustained more than 25 placements while in care between placements in residential foster homes and group homes. Sierra reported that when she was 16, she requested that her case worker pursue a pre-adoptive placement with the intention of permanent placement. At the time she was told she was "too old," and the child welfare department would not move forward with terminating her birth parent's rights, despite a court order in place preventing Sierra from having any contact with her birth family. With the help of her outpatient therapist at the time, a foster family was identified for her, and she transitioned to their home when she was 17. This family eventually pursued an adoption plan when Sierra was allowed to age out of care and the adoption was finalized when she was 22 years old.

Sierra's experience of navigating relationship while in care is captured in the following I-poem:

> I entered foster care
> I was thirteen
> I went through multiple places, multiple group homes
> I was sixteen
> I asked my case worker at court
> I asked my case worker, "Hey? Like, could we try to find a home for me?"
> I was at a group home
> I was too old
> I kind of gave up on that idea

Amber

This participant identified as a 28-year-old Black cisgender female. Amber had completed some college and was employed part-time at the time of interview. She was

placed in foster care at the age of ten after her father was incarcerated. Amber shared that she didn't know much regarding the circumstances of her removal and alluded to being uncertain of the situation at the time, "I needed help. You actually don't know what is happening. All I knew is sometimes I wasn't seeing people who I used to see." She reported that she was placed within a single pre-adoptive home, with a family that later finalized her adoption. Amber described positively the nature of the relationships with her adoptive family, "They were open. They were kind."

Amber's perspective of her experience in placement and through adoption is illuminated in the following I-poem:

> I feel like it is the people that step in as parents for you
> I just needed someone kind
> I almost felt like
> I was home
> I grew more interactive
> I wasn't the only child
> I didn't know about relationships
> I had people who are very supportive
> I still have those connections

Angela

This participant identified as a 27-year-old Black cisgender female. Angela had completed a graduate degree and was employed part-time. She shared that she spent considerable time within a residential group home with other children prior to her first placement with a pre-adoptive family at the age of 14. Angela expressed having little memory of what contributed to the termination of her parent's rights, or the details related to her original removal from birth family and placement in a residential program. She reflected on her confusion during her time in care, "You know sometimes you tend to think a lot about where are my parents, you know?" Angela also recalled experiencing

fear as she transitioned to a pre-adoptive home, "I was afraid because that was a new family, engaging with new people you've never seen before, and also I was scared that maybe they're going to maltreat me."

The essence of Angela's narrative of her experience with transitioning from foster care to an adoptive placement is captured in the following I-poem:

I was a silent girl
I learned
I was going to be adopted
I was afraid
I was scared
I can't recall
I just found myself there

Taylor

This participant identified as a 27-year-old Black cisgender female. Taylor indicated that at the time of the interview she was enrolled in college as a student. She reported that she was five years old at the time her first placement in foster care, after she was removed from her birth parents' care. Taylor shared she was eventually placed with her biological aunt, who adopted her through a kinship adoption. When she was 12 years old, her aunt passed, and she was moved to the care of her cousin. This placement eventually disrupted due to the presence of physical and emotional abuse as well as significant substance use in the home. Taylor reported she subsequently experienced multiple foster placements that were unsuccessful. Eventually she was placed with a Black African American family that she described connecting better with, "there was something in me that just fit better and [I] was willing to listen." She shared that when she was 16, the family decided to move forward with an adoption plan.

In sharing her experience, Taylor described a vast spectrum of emotion and experience, varying from enduring "physical abuse, mental abuse, drug abuse…" to "everybody, was so excited and loved me, and like I love them!" In reflecting on her journey, Taylor's breadth of experience navigating foster care to adoption is exemplified in the following I-poem:

> I know we hear about the trauma
> I was traumatized
> I'll never tell you I wasn't
> I think that some of the things that
> I understand now
> I don't think I would have understood as well
> I just think that it was my experience to go through

Haley

This participant identified as a 27-year-old white cisgender female. Haley was employed full-time and enrolled in a bachelor's program at the time of the interview. She reported that both of her birth parents struggled greatly with addiction, and as a result she was placed at birth into kinship care with her birth grandmother and older brother. When her grandmother passed, Haley, her older brother and two younger sisters were moved to the care of her great aunt. This placement eventually disrupted, as the great aunt was not financially able to care for all four children, and she reports that her and her siblings were separated when placed in foster care. She recalled her and her next youngest sister experiencing eight different placement moves over the span of four years before landing in the foster placement which became their adoptive home. She shared that initially this was a positive placement and she felt connected to her adoptive father, "He was amazing. He was, other than my grandma, he was the first adult that I felt I could trust."

Haley noted that when she was 18, her adoptive father passed away, leaving her and her sister with her adoptive mother who she described as, "quick to scream and yell and throw things." She explained that this relationship was strained, she suspects due to some underlying mental health concerns, and continued to devolve over a few years. After sustaining prolonged emotional abuse by her adoptive mother and physical abuse by her adoptive grandfather, Haley moved herself out of the situation and remains estranged from her adoptive mother. She captures the essence of her adoptive experience in the following I-poem:

> I regretted it
> I regretted being adopted
> I still regret it
> I still wish
> I'm just dealing with making attachments and holding on to this person
> I want my adopted mom to be, and she's not.

Jada

This participant identified as a 22-year-old Black Islamic cisgender female. At the time of the interview, Jada was employed part-time and had completed some college. She shared that her birth parents had a tumultuous relationship, and that her parents were eventually divorced, which within her family's culture, was impermissible. Her birth father passed away when she was 12 years old, which Jada reports was a significant stressor for her birth mother who struggled with mental health and substance use. Jada indicated that her birth mother's health declined to the point where she was institutionalized, at which time Jada and her siblings were placed in care. She explained that her eldest sister, who was just 18 years old at the time, attempted to provide guardianship, but without additional support could not financially sustain the family. Jada and her sibling experienced two placements prior to adoption, one of which was

disrupted due to medical concerns in the foster family. Regarding her adoptive placement, she indicated the family was a "really nice couple" who she recalled being known to her birth father.

Her recollection of how she experienced her time moving from foster care placements to an adoptive home is captured in the following I-poem:

> I would tell myself, don't sweat it
> I'm like tears are great at this point
> I didn't
> I was so strong, guarded
> I tell myself that because you're handling this like you're in your late 30s or 40s
> I remember
> I tried so much to forget everything

Arts-Based Storytelling Process

Use of the creative process as part of the interview was intended to support depth and expand participant capacity to reflect on and make meaning of their experiences with relational permanency, which was anticipated to be challenging to share. The following section presents an overview of the findings specific to the arts-based processes of the embodied check-in, relationship timeline, and house drawing.

Embodied Check-in

All participants were presented an opportunity to engage in an embodied check-in following the conclusion of the verbal portion of the interview. Responses to this offering were varied among participants, and likely reflected a range of variables including participant engagement in the interview process, level of comfort with movement-based or somatic practices, and awareness of need for arousal regulation. Data were not able to be collected as expected during this portion of the interview due to some participants opting out of participation. Participant responses to the offered

embodied portion of the interview reflected patterns of disengagement, physical stillness, and decisions to pursue alternative actions.

Participant disengagement occurred during the embodied check-in when once the interviewer introduced the prompt to begin the embodiment portion, participants opted to disengage visually. For some participants disengagement included a verbal cue that they were ready to move forward, interrupting the prompt, for others, given the lack of video data it is unclear whether participants participated or not.

Participant stillness occurred during the embodied portion of the interview when participants were observed to significantly slow their movement or suspend movement altogether. For these two participants, breath remained held or was observed to slow dramatically, stilling the body.

For other participants, after hearing the initial prompt to transition into the embodied check-in, they chose to initiate their own self led method of attending to their needs. For these participants, a different action, such as readjusting their seat or getting themselves water, was chosen over following the offered body scan. Due to the intention of this portion of the interview process to serve as an opportunity for participants to reflect on and address their own level of arousal and personal needs, researcher response reflected acknowledgement and honoring of each participant's unique choice.

Timeline of Relationships

The timeline of relationships was included in the creative process to allow participants to reflect on their experiences before, during, and post-adoption and identify who the important people were who present with them throughout significant moments in their lives. Much of what participants shared about what they drew included a narrative

summary of their stories of entering care, navigating care, and the experience of being placed with an adoptive family. Participants described their timelines with details like, "a bunch of red scribbles, just kind of symbolizing that anger and the hurt and the pain of losing my family" and, "When I entered care it was up and down, up and down, and then… I drew like these kind of like squiggles um to represent like very rocky parts" (Figure 1).

Figure 1

Timeline of Relationship
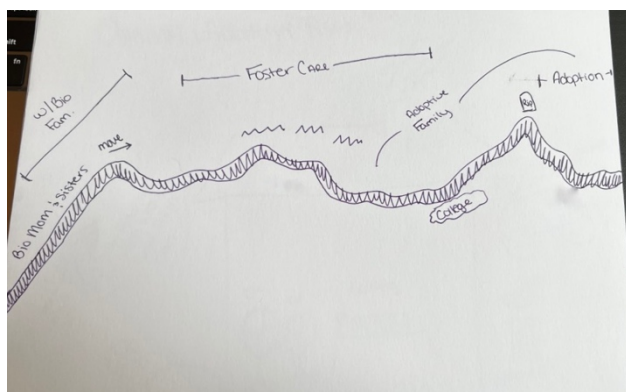
Note. Details from this image were removed to protect participant confidentiality.

In creating their timelines and reflecting on their stories, participants were able to identify those people in their lives that they experienced as most significant, important, or permanent. After exploring these experiences with relationship and creating a timeline, participants were asked to select from their timeline their most important relationship or the person they'd experienced the most permanency with. Participant responses varied, as seen in Table 2, which likely reflected the breadth of experiences in foster care present in this group of participants. Half of these participants identified someone in their lives that filled a parental role, and half of them identified someone who filled a sibling role, whether by birth or through adoption.

Table 2

Most Important Relationship

Participant	Most Important Relationship
Mikayla	Adoptive parents
Laura	Adoptive parents
Amber	Adoptive parents
Sierra	Adoptive sister
Angela	Adoptive parents
Taylor	Birth mother, birth sister
Haley	Birth sister
Jada	Birth sister

House Drawing

Using a relationship they had selected from their timeline, participants created an image of a house to represent this most important relationship. As participants described which relationship they chose to depict, they all shared insights into their creative decision-making processes which subsequently illuminated aspects of these important relationships. Within the participant stories of these relationships, three themes were identified including references to *size*, the *structure*, and *unique details*.

Size

In describing what they had created, most participants referred to the size of the house they had drawn. By describing the size, shape, or space the house took up,

participants provided detail about the relationship that had not yet been specifically disclosed in the verbal interview.

Mikayla used the size of her house to capture the essence of her relationship with her adoptive parents,

> I chose a bungalow because the house we used to live in wasn't actually very big. But with this many people… we felt like we were like in a big space, like things were enough even though we were many, you know.

In her drawing, Mikayla depicted symbols of people to represent her and each of her adoptive family members within the space. She explained that this decision was meant to signify the amount of shared experience the bungalow held, "This family really… we spent a lot of time together, they made me the person that I am today."

Others also noted size as a reference to how much the relationship held, whether that be amount of care or support, shared experience together, or duration of relationship. For Angela, her relationship with her adoptive parents was described as, "a mansion that has everything you need," one that "lacks nothing." She used detail to describe the physical elements that she included in her drawing (Figure 2):

> Outside the living room there is a place set aside for guests where you can take your wine, you can take your drinks, you can [have] your water also. And also meals, the desserts. Behind the trees, between them there is a pool. Not really a large pool, but medium. During the hot, sunny days you can cool yourself, swim with friends, and invite the children's friends, and to have fun together.

Figure 2

Angela's Mansion

Taylor similarly described choosing to create a house "kinda on the bigger side."
She explained, "Stability [has] always been my biggest thing. So, for me, this is what I
picture stability looking like… a nice house." Stability, an aspect of her relationship with
her birth mother, was represented through the size of the house she created. She depicted
how much she valued the consistent time spent together with her and their family:

Some of my best memories are definitely cookouts and family gatherings. So, I

definitely put a house big enough to do that. Which is why I have all the cars

over here parked in the front yard… for me the best time ever is when my family

is all here visiting, and it tends to just look like I have a party going on in my front

yard, even though I don't.

Her drawing not only displayed a large house, but also an extensive property around the
home, with place to host the family gatherings that Taylor most strongly associated with
their bond.

Haley used size as a metaphor for length of time and experience her and her birth sister had shared together. Her house drawing filled the entire paper, leaving little space around. She said of her drawing,

> What I made here was a really big house… I made it really big because me and my sister, our entire lives have been shared together. There's not many people in my life who I've spent my entire life with. So, I made a really big house that we have shared many memories. I could fill an entire mansion of just so many memories."

Structure

Specific physical structures of houses were used by participants to represent relational qualities they experienced in their relationships.

In describing what she had created, Amber first highlighted the inclusion of the large roof and explained that this was to indicate that the relationship she had with her adoptive parents was, "offering protection." She continued, "It's full of protection from the parents in this house. A lot of care and a lot of love, so the roof symbolizes all that." Amber also noted the addition of windows on the house, "…there's a window for communication in the relationship. You are not in isolation, you can see, you can communicate."

Haley explained similarly that she chose to the depict the roof on her drawing in a specific way to indicate how her relationship with her birth sister provided protection.

> I also made it kind of like a two-way kind of like roof to symbolize the two of us together, no matter what. I put shingles on the roof, because even when there's

rain, there's hail, there's snow, any sort of weather… our love and support of each

other will protect the roof, so we will have protection over each other.

Haley chose to also describe her rationale for including a door and windows in her

drawing, stating that she created "big open bay windows" as a way to represent not

feeling as though, she needs to "have any like curtains or blinds around her." She

elaborated, "She can see directly into my window, directly into my eyes, into my life, and

my thoughts, and my mind and my heart. But she can look into my windows without

judgment."

Some participants illustrated strong foundations in their drawing, connecting

those physical foundations to the resilient base of support their relationships had provided

them. Haley explained of her drawing (Figure 3),

I make the foundation bricks because, so the foundation is the beginning, the

foundation of what are we, what makes our relationship healthy. That we can be

honest and transparent with each other, and hold each other accountable, but also

compassionate towards each other.

Figure 3

Haley's House

Jada described the relationship she drew of her sister similarly, "She's the foundation of like everything, because she's always been there, and she's always so supportive, and she offers like really, really, great guidance. She's like she doubled up as a parent basically." Jada also referenced features of the walls and roof that she created with reinforced lines in her drawing,

> I think I'm the walls she can always lean in on me, and I help to keep everything in check… And also, yeah, like the roof we are both, we try to like, stay on top of things. And so, we kind of contribute like holding everything together.

Unique Details

Almost all participants elaborated on what they had created through the storytelling of their relationships, with the drawings becoming an illustration that brought life to their stories. For most, specific and unique qualities of their individual relationships were represented through image, which they shared.

Laura described the interior of her house drawing in detail. She reflected decisions to incorporate a realistic depiction of the rooms she recalled being in her adoptive family's home. As she specified what was drawn, she also mentioned on more than one occasion that she, "included the flowers just to make it look beautiful." She explained that the house "had to be decorated" because she believed that it was "a beautiful kind of relationship."

The decorative details participants chose to include, in some cases also helped to further emphasize the major characteristics of their relationships. Angela's story, as an example, gave depth to her description of her "mansion" by detailing, "It has a serene and

cool environment" as well as decorations, "It's colorful, and it [has] this jewelry, this Indian design, innate…"

Some participants added less overall detail to the house itself but included a lot of detail in the environments surrounding the house. After describing the home Mikayla had depicted for her adoptive family, she pointed out symbols she had created in the environment that represented the things around her relationship that offered support. She shared, "Around us are social workers, church members, friends, school friends, friends from the neighborhood, peer support." She also chose to include a symbol to represent the community within which the family spent a lot of time, "I remember we used to live near a church compound, so we barely missed church activities. What I remember was the fun activities and the church that we went to ever summer holiday."

Other people that participants deemed connected to their most important relationships were seen throughout the representation of houses. Sierra opted to include her sister's children,

> Whenever I talk to her over the phone or facetime her, I'm always talking to them also. So, it's like they're kind of part of like our relationship, because it's like they're always there, and it's like whenever I see them, they always scream my name and want me and no one else.

While not the primary relationship she drew, this sense of being wanted by her sister, and via her sister, by her sister's kids, was evident through Sierra's inclusion of the image of the children at the house as well as through an image that depicts a cell phone Facetime conversation.

Haley chose to elaborate on the elements she added around her house, sharing that she chose to add a sunshine, "because she [birth sister] just brings happiness and joy and love everywhere she goes." She also added rooted grass, indicating that she felt in their relationship she was, "planting those healthy roots and a bunch of beautiful flowers." Of the flowers she explained,

> They're all different colors. Nothing's the same because we are different people, but we have beauty in both of us, and we share each other's dreams. These flowers bloom in our front yards together as we build each other up and complement each other, and we remind ourselves that we are important and special… kind of all different and unique.

Taylor added significant detail to the space around her house, to honor the things that both she and her birth mother love (Figure 4). She shared that she included cars parked in her front yard because, "… for me the best time ever is when my family is all here visiting, and it tends to just look like I have a party going on in my front yard." She also explained the rest of the backyard space, which included a pool, elements of nature, and a swing set. Taylor noted, "… a pool would never be a bad thing, but, like the pool, was mostly for her [birth mother]." This was a salient detail for Taylor, who explained why the inclusion of those items were so important to her, "… anything that comes with permanency for me, kind of comes with my mom, so like my things kind of blended into hers."

Figure 4

Taylor's Backyard

Thematic Analysis of Verbal Interview

Three main themes were identified throughout the verbal portion of the interview

regarding participant's understanding of the construct of relational permanence:

relational elements of building permanency, personal barriers to permanency, and

external barriers to permanency. Within each of these themes additional subthemes were

identified, which can be seen in Table 3.

Table 3

Themes and sub-themes

Themes	Sub-themes
Relational Elements of Building Permanency	Dependability
	Being There
	Sense of Belonging
	Emotional Support
Personal Barriers to Permanency	Self-Protection
External Barriers to Permanency	Inadequate Support

Displacement

Ongoing Abuse and Loss

Relational Elements of Building Permanency

This theme broadly refers to the specific qualities of relationship that participants reported were essential in their capacity to experience permanence within their relationships to others. Participants defined these relational qualities as the most salient in contributing to establishing a sense of permanency: *dependability, being there, sense of belonging,* and *emotional support.*

Dependability

A quality that participants endorsed as being important in their relationships was the presence of dependability. These participants expressed feeling most connected in relationships where they could consistently rely on others, which over time contributed positively to the development of trust. In describing this quality in relationship multiple participants expressed the sentiment of having, "someone you can call on whenever you need help," and feeling confident that, "whenever I need them, I can contact."

In describing an important peer relationship, Jada explained, "And he's just he's a really good person like regardless of all of those people I know, I can rely on [him] should things go south." For some participants, experiencing this level of reliability within relationship was unique to their most permanent relationships. Haley compared her current partnership with others she's had in her life, "We're there for each other, and he has… He's very protective of me, and I think that was something new. Also, I wasn't used to someone who just looked out for me so much."

Some participants elaborated that this state of being dependable was an important factor in their capacity to trust over time. Angela explained, "With time I gained confidence with them [adoptive parents], and I moved on. Well, I was able to gain my trust from them, and they showed me the love that I deserved." For participants who experienced multiple placement disruptions, previously held beliefs about others as not trustworthy served as an obstacle to overcome in relationship. Haley reflected on her relationship with her adoptive father, who after four years and eight different placement moves, was her first experience with someone she felt she could rely on. She described that experience, "He really helped me build... you know that people can be trusted."

Being There

The act of being consistently present in one's life was another key element participants described as essential for relational permanency. Unique to those most long-standing relationships for participants was the quality of being both routinely part of life, "she was always constantly in my life," and an unconditional resource for support, "Someone who you can go to for that support, and they, they'll like, no matter what you say to them… they'll still be there."

Some participants recalled the profound power of others continuing to show up for them, despite their attempts at keeping others at a distance. Sierra explained,

> And even through my hard times of pushing everyone away, like I would try to push her away, and she was like, 'you know you're not going to get rid of me,' and stuff like that…. So it's like her joking with me about like me pushing, trying to push her away… 'you're not going to get rid of me that easily.'

Taylor echoed this experience of others showing up against expectation when describing the relationship with her sister, "even in those moments where I guess I didn't really have too much family connections, or whatever… she somehow popped up in my life."

The quality of *being there* was not isolated to being present just in difficult times, but also encapsulated participant's experience of having a relationship who bears witness throughout their lives. Laura described their own experience of finding this, "Just having someone that you know, will help you out, and someone you can, you…just…you enjoy your good moments together, and then, yeah, they are there for you when times are hard."

In some cases, siblings who were present throughout participant's transition from birth family, to foster care, and to an adoptive placement, represented deep connection given the shared experience. Haley described this of her own birth sibling relationship:

> Me and my sister, we were our comfort. That was the comfort in all the chaos.
> And so, we would sit together when we sit on the couch in the living room, sitting together at the dinner table, sitting together in the car just really, you know… we weren't glued to each other, but we we're together pretty consistently.

While not being afforded the opportunity to remain together in the same placement, Jada too recognized this aspect of relationship with her birth sister, sharing that, "as far as I can remember, she's always been there" despite their separation when she entered care. Other participants referenced efforts made by family members to maintain connection, even though child welfare services recommended otherwise. Taylor recalled her aunt being determined to keep her birth mother in her life,

> She knew my parents. I knew my parents. We all knew my parents. We knew everything that had gone on in the family… I mean realistically, any biological

family would. She allowed me to see my parents, so I was able to develop that relationship.

Sense of Belonging

These participants expressed a level on intimacy within their most important relationships that reflected a felt *sense of belonging.* Beyond surface qualities that many participants identified such as kindness and honesty, a feeling of being part of a relationship, or in some cases a family, was a key marker of permanency.

In reflecting on what stood out to her about her most significant relationships, Taylor indicated that her adoptive family provided this element of relationship that went beyond her other experiences of relationships, "I don't know how to say it like… they offer like… like I don't want to say like family support, but like… they offer me a sense of belonging and like… that I'm wanted and stuff."

Other participants referenced similar feelings of being part of something for the first time. Laura recalled anticipating her adoptive parents would be "so hard on me because now it's like I'm depending on them and stuff like that." Instead, she experienced both her adoptive parents and adoptive siblings try to help her feel part of their lives, "I feel that I was just included in their family."

Mikayla shared that she initially felt out of place in her adoptive family and remembered being "so quiet." Despite her desire to withdraw, she remembered her adoptive siblings were committed to including her,

> But I sort of blended in also… they were really kind people, especially the children. They kept me on my toes. You know the kind of people who don't want you quiet or they don't want you secluded, always tag you along.

For Laura, after unexpected separation from her birth family and experiencing a great deal of confusion throughout the process, she described her relationship with her adoptive family as a relief, "I remember I almost felt like I was home."

This sentiment of arriving home to a relationship they felt they belonged too was echoed by other participants. Haley described this of her connection with her birth aunt and cousins, who she was able to stay in touch with despite their separation,

I can tell they love me unconditionally, too. They looked out for me. They…they just feel like home. You know that the type of people that they're fun to be around. They make me laugh; they make me smile. They never made me feel bad about myself. They never made me question my worth… If it weren't for them, I don't… I wouldn't really have any family.

Emotional Support

Participants were asked to describe the type of support that the relationships they felt most connected to had provided for them. Overwhelmingly, participants expressed feeling as though these relationships in particular offered support for their emotional wellbeing. Recalling her time in care and through the adoption process, Mikayla shared that her most supportive relationships were unique in that they, "frequently wanted to monitor my thoughts or something, they also wanted to know how I felt about everything."

In referencing her most important relationship, Laura differentiated between her own need for emotional support compared with other levels of support, "It gives you a feeling that you've got someone uh, actually to support you emotionally. That because, mm… material support isn't enough. It's good to have someone you can talk to; someone

you can tell your problems." Laura elaborated that for her, these individuals "always cared about how I'm going to feel, um… my mental health."

More specifically, receiving care for one's emotions and having someone willing to be with them in the more difficult ones, was a level of emotional support that was essential for these participants. Sierra described her process of being vulnerable and receiving this type of support from her adoptive sister,

> We've always had like, this kind of connection, and she's like, was more open with me and I was able to be more open with her. And I felt safe with her and just overall it's like our relationship is…. yes, there were rocky parts of it like where it's like, I was acting out and like she did not like that, and she's like, 'Well, what do you think we could do to fix this?' 'What support do you need in place?'

In this example, emotional support went beyond just listening and involved active collaboration and demonstration of investment in the participant's emotional world. Haley described a similar presence in relationship, "Support means letting someone feel their feelings too, even if you don't like it." Having experienced being dismissed and made to hold back her emotions in some of her more challenging moments, Haley reflected that she desires to feel that others are, "Just trying to kind of be curious and nurture. 'So, you're upset. What is that about?'"

For some participants like Taylor, this supportive quality has been established as a non-negotiable for engaging in relationship at all, "At this point in my life for me to say that anything is a relationship or has a connection to being a relationship in my life, it has to be supportive." As such, the presence of emotional support has both been identified in

the relationships participants have experienced the most permanency with and has also become a standard to hold for future relationships.

Personal Barriers to Permanency

This theme encompasses the internal obstacles participants report have gotten in the way of their ability to experience permanency in relationship. These barriers reflect the impact of participant's experiences and the ways in which those experiences have interrupted their desire, capacity, understanding, and access to relationship. Two main sub-themes were identified that further clarify the impediments participants faced in developing permanency: *relational uncertainty* and *self-protection*.

Relational Uncertainty

Participants consistently endorsed complexity in navigating relationships throughout their time in foster care and post-adoption. Separation from birth family, termination of parental rights, transitions between placements, and acclimating to a new placement all notably create chaos in the relational realm. For these participants, these experiences caused confusion and impacted their understanding of how to relate to others. Amber recalled, "I didn't know about relationships very much. That is something that I realized. You have to communicate; you have to be very open."

This unfamiliarity with relational norms and what to expect from others was repeated by many participants. For Mikayla, who described herself on a few occasions as a "quiet child," this aspect of her personality often left her feeling like she, "didn't know how to make friends easily."

Misunderstanding the intention of others or not being able to predict how others might respond, for these participants, led to uncertainty in the social realm. Angela

described her experience navigating relationships as "a bit challenging sometimes,"
further explaining that those who didn't understand her situation could be cruel and
unkind, "…sometimes they find you as quiet, and say they tend to think that you're shy,
and they bully you."

Haley depicted herself similarly, "I was so painfully shy I wouldn't talk to people
unless they talked to me first." In attempting to rationalize where this came from for her,
she shared, "I guess I was so afraid of rejection. I just I wouldn't make friends."

Contrarily, Taylor portrayed her younger self as, "borderline like too close for
comfort, like I was a clingy kid." She explained that her "traveling file" referenced that
she was, "too close to adults, and I was constantly looking for affection." The way this
information was documented, she felt communicated judgment. From her perspective
though, she believed she didn't have much of an alternative for meeting her needs for
connection, "I don't remember very many houses where there was ever kids to play with.
So, to me… as an adult… as an adult now to me, I thought I was just trying to, you know,
have somebody to play with."

For some participants, strong desires for connection led to accepting unhealthy or
harmful treatment in return. Haley shared her own experience of this,

> Any male that would give me any form of attention, I would be like, okay, yeah,
> we can date. And even if they wouldn't call me back, they would ghost me, they
> would objectify me, they would… you know just have sexual encounters, and
> then not want to spend time with me anymore.

In reflecting on her choice to stay in relationships where she was treated poorly, she noted, "I was so, I guess, desperate for love that I would take any form of abuse, neglect, manipulation."

Jada expressed a similar dynamic in her relationships, where she found herself often making decisions based on pleasing others to evade potential loss:

I feel like I became a people pleaser, I was always the yes man. I was too kind. I didn't have like… I didn't have too many boundaries at the time. So, for like even with boyfriend, girlfriend relationships, high school stuff... I just said yes to stuff that I wouldn't say yes to now. I became a so afraid of saying no to someone, because I thought that would change how they see me for just saying a simple no to even trying alcohol and stuff like that, to even going to a party, like I became such a people pleaser that… and I couldn't even stand up for myself if someone were to insult me or just something like that.

Jada's experience highlights the challenge that many of these participants described in wanting relationship but not having a good understanding of exactly how to stay in relationship. Like Jada, Haley remembered often submitting to the approval of others in hopes of remaining connected, "We would just kind of morph into whatever we needed... we needed to be, to stay out of trouble."

Self-Protection

In their reflection of how they experienced relationships throughout their time in foster care and post-adoption, participants thematically described a pattern of behaviors in relationship that were in service of self-protection. Many participants expressed feeling fearful or distrustful of others. Angela explained, "I was afraid because that was a

new family, engaging with new people you've never seen before, and also I was scared that maybe they're going to maltreat me." For some participants, the answer to that fear was to not be open to connection at all, "I didn't really build relationships."

Sierra shared that during her time in foster care and in group residential care, adults or staff often would limit or prevent her and peers from building close friendships, "we would get in trouble for it." As a result, she internalized an idea that she couldn't or shouldn't be in relationship,

I was very off guard about building any type of relationship, like in my time in care, even when I entered, like my foster parents, like my former foster parents, at my adoptive parent's house… I was so off guard of building any type of relationship… so it's like it was kind of non-existent.

The impact of this has profoundly limited her ability to develop relationships, "I feel like trauma is a big piece of why, I like… still sometimes push people away. And sometimes it's like I get over emotional about different things." She subsequently recognized that she's lost the opportunity to remain connected over time, "I've pushed so many people away that actually cared about me."

Avoiding relationships for these participants allowed them to feel safer and less vulnerable to emotional hurt. Haley recalled feeling like, "I would rather leave someone at arm's length, then get hurt by them," despite a part of her that knew being open to relationship could have been an opportunity.

In addition to withdrawal or isolation from relationship, some participants recalled other ways they protected themselves from potential hurt and loss. Taylor shared that she was categorized as a "runaway and a flight risk" having removed herself from

situations that felt too overwhelming in the past. She noted that the "adoption took a little longer than normal" as a result,

> They wanted to make sure I wasn't going to run away as soon as I signed the papers... They just wanted to make sure, I guess, that I was truly going to stay there and not get mad one day and just leave.

Being able to establish stability in relationship in this case, was delayed.

Haley recalled struggling to connect with anyone other than her birth sister, who she felt the closest and most comfort with, "We kind of kept to ourselves. We were very shy and introverted." This hesitancy to take build new relationships was often misinterpreted by the adults in her life,

> I think that also may have been confusing to some foster parents as to why we wouldn't open up. Why, we wouldn't form attachments with people, and you know we stuck together and foster, some foster parents, I guess they just wanted us to branch out and connect with their children, and like the birth children in the foster home, and it was just really hard for us.

Distrust in others was a common thread through these participant's stories. Jada recalled feeling as though, "You're so uncertain of every single thing. So, you kind of feel like you have to have your guard up." For Jada in particular, this led her to develop extreme independence and self-reliance early on, "Because if you feel like you rely on someone too much, if it like, they'll disappoint you. And you just want to limit your expectations. And the best way to limit that is, by doing stuff on your own."

External Barriers to Permanency

This theme refers to external factors that participants endured that obstructed their ability to gain permanency in relationship. These challenges are reflective of situational elements outside of the control of participants, including decisions or actions made by others in the larger caregiving, social, or legal systems surrounding these individuals. These obstacles as described by participants were distilled into three main sub-themes: *inadequate support*, *displacement,* and *ongoing abuse and loss*.

Inadequate Support

Participants were forthcoming in sharing what they believed impacted their access to nurturing and caring relationships with others. Largely, these reasons reflected a lack of support or decisions that were made for them that were not in support of remaining connected to their most important relationships.

In some cases, these challenges were rooted in personal qualities that left participants desiring something more. Laura explained of her own relational journey, "But you sometimes find people that are hard. They… they don't want to respect your opinion, and they don't want to listen to you." Feeling as though they weren't respected or listened to was mentioned often by these participants. Haley elaborated on this phenomenon from her own perspective explaining that she often felt unsupported in the relationships that were deemed parental in nature. She desired a different quality of care,

> There's no conditions to it [support]. There's no 'I will love you as long as you
>
> make the right choices,' 'I will be kind to you, as long as you do all the things I
>
> want you to do.' 'I won't… I won't shame you as long as you do x, y, and z.'

She went on to describe support as an attribute of thinking of another, and additionally noted, "If you're thinking of yourself all the time in supporting someone. Your you're supporting them for the wrong reason, because supporting someone means you want what's best for them."

This idea of operating in the "best interest" of another is a hallmark expression used in child welfare, where social workers, foster, and adoptive parents, all have their own perspective of what is best for youth. As Haley defined it, quality support would require eliciting what's best from the individual themselves. Sierra, who similarly endured multiple placements in care, reported that as she moved into older adolescence and was still in group care, she attempted to advocate for herself with her social worker by requesting an adoptive placement. Rather than pursuing this, she was met with dismissal, "My case worker basically told me I was too old. So, then it's like, okay…I kind of gave up on that idea." The complexity of this situation for Sierra was layered, as despite a court order being in place that prevented all contact with her biological family, child welfare would not move forward with terminating parental rights, "that made it like impossible for me to get adopted while I was in care."

Insufficient support in some cases created barriers to establishing new relationship, but for other participants, the lack of support was a contributing factor in foster placement to begin with. Jada stated, "And even though we have relatives, and we have family, they never, they never bothered with us." Without the support of her family, her eldest sister was left to attempt to support her and her younger sibling, which ultimately was not sustainable, "If they had wanted to, they would have helped. And why

would you abandon? And leave an 18-year-old with the responsibility of raising two kids?"

For some participants, inadequate support continued into their adoptive placements. Haley remembered, "Once I got adopted there was no check in. There was no support." She shared that she believed that her mom, "probably could have got some value from a support group herself as an adopted parent." As a result of the ongoing mistreatment in her adoptive home, by the time Haley was 18, she found herself experiencing homelessness. She reported that due to "the legality" of her adoption, "there's a lot of funding and support that I didn't qualify for… I didn't have anywhere to go. I didn't have any support systems."

Displacement

All these participants identified that the initial separation from their birth families or recurrent transition from one placement to the next, had enormous impact on their relational connections. Lack of stability in place led to lack of stability in their relational connections. Mikayla explained that in understanding her own experience of separation she realized, "distance in a way affects the connection between two people."

Other participants reported similar challenges of remaining connected through distance. Laura recollected that the "relationship with my mom was always a good relationship, a strong relationship in that I just had her to look up to." After her mom was incarcerated however, she shared that despite the strength of their relationship prior, "I still loved her, and when she was out of incarceration, our relationship continued. Yeah, but the separation, the separation somehow affected our relationship." Her placement in

care also resulted in a geographic move requiring a change in school placement. She remembered, "It wasn't easy, cause I had to change the school, and life was not easy."

Haley shared that her multiple placements also led to multiple school transitions. When she finally experienced extended time in one district, she remembered feeling like,

It was four years with the same people, and that felt like a lifetime... I realize

that's what also you need in relationship. If you need consistency, you need to go

to the same school. You need to be around the same people.

Even immediately following her adoption, she reported, "they're still moving us every two years." For this participant, the school inconsistency had a tremendous negative impact on her capacity to build and maintain peer, community, or adult support relationships.

Transitions between placements also requires a period to acclimate. Some participants reported feeling like this took considerable time. For Amber, this was "some three years of adjusting" before she began to feel settled in her adoptive placement. Participants who experienced multiple placement moves were less likely to be afforded the privilege of remaining in one place long enough to adjust. Sierra reported, "I was in foster homes like in the beginning, then they put me in residentials, and then group homes and just moving around from there, from different places… I didn't really build relationships." As a result, she found herself often questioning, "Like 'where am I going to be the next day?' like… 'am I still going to be with these people?' 'Or am I just going to up and move?'" Taylor described a similar experience of being constantly in transition without certainty, "We kept bouncing back and forth for whatever reason. Sometimes the

foster family, sometimes it was something we did, you know." For Haley, "We went into eight different foster homes in four years. So, it was a lot of moving around."

In sharing about these frequent placement moves, a few participants attempted to explain why this might have happened to them. Haley recalled both her and her birth sister, who she was placed with, had significant physiological stress symptoms such as excess vomiting and enuresis that she believed to be a response to the trauma they had endured. Unfortunately, she supposed, "it got to the point where that was a big reason that I got moved around a lot."

Jada referenced a placement move due to the foster family determining they couldn't continue to provide support due to their own relational and health challenges,

> They like, put us back in the system because there was also strain in the house.
> So they had an older son who they are still trying to like, take care of. And they
> just had a lot of their own issues.

For no fault of their own, these participants were subject to multiple placement disruptions, resulting in multiple relationship disruptions. Taylor noted that her final placement marked a significant shift for her, "There was an awareness that came with the stability of being adopted and not having to worry about moving around, like I was just able to develop myself."

Ongoing Abuse and Loss

For many of these participants, their time in care or placement in an adoptive home coincided with suffering multiple losses, or experiencing neglect, or ongoing abuse. Losses like the loss of birth parents, birth siblings, extended birth family, community, peers, and school through parental separation have previously been identified, but many

of these participants experienced amplified or ongoing losses while in care. Amber captured the incredible impact of this with her statement, "When I lost my family, at that time, I was very alone."

Half of these participants experienced the death of a family member that either resulted in their foster care placement or occurred at some point during their time in care. These losses were often compounded during placement disruption. Sierra shared, "I got the call that my biological mother died, and that was kind of like a tipping point for me." At the time, she had not been able to be in contact for some time, "The judge ordered like no contact in place. So, it's like not having that relationship with her. And then like six months after I entered care, she like basically moved away because she was going to go to jail." Her biological siblings were not placed in care with her due to their ages, so she also lost those relationships.

Taylor shared that her first kinship placement moved her to a different town from her birth father, "I did not really get too close with him after that… I mean phone calls was all I really got, couple of visits." Unfortunately, he passed away while she was living with her auntie. After the death of her auntie, Taylor reported she was placed with her auntie's daughter, where she was witness to "physical abuse, mental abuse, drug abuse, lots of stuff going on and I ran away and ended up back in the system."

Haley's birth mother's substance use dramatically impacted her ability to build a relationship, but she reflected that this did not diminish her desire to have that connection,

> She just never had that maternal instinct, and that's not to say that, you know, we
> always wanted to go back to her. Because, I guess, neglect to a kid just looks like

life… like how it's supposed to be. And abuse… I actually didn't encounter any of this until in foster care.

Following the death of her adoptive father, she was subject to significant abuse by her adoptive mother, which who she reported was "very quick to scream and yell and throw things." She shared that the abuse, "started out as verbal abuse that she would threaten to take us back to DSS to like, yeah, the social services, if we didn't clean up a certain way." Eventually this escalated to physical abuse by her adoptive grandfather, leading her to make a difficult decision to leave this relationship despite not having any access to alternative supports.

Jada's placement in care was also precipitated by the death of her father, which had a deteriorating impact on her birth mother. Of the relationships she wishes she could have maintained from that time, she identified her birth mother and maternal side of the family, "We have never got to connect, and with also the like, that whole side of my family, like the only people that I can actually rely on is myself, and my sister, and my friends." Jada also reflected that the loss of these significant relationships had also caused her to, "not been able to connect with a lot of my friends" from that time, or "the friends I had from our neighborhood, our previous neighborhood."

CHAPTER 5

Discussion

The primary objective of this research study was to investigate how individuals who were adopted from foster care experience relational permanency. A secondary focus was to explore how the use of an arts-based storytelling process supported meaning-making for these adopted individuals with lived experience in care. Participants engaged in both a verbal interview and an arts-based storytelling process which contributed the data for this study. Data analysis aimed to contextualize each participant and highlight their unique voiced perspectives of their complex experiences of relationship as individuals adopted from foster care. The findings from this study add to the larger body of literature on adults who were adopted from care, and more specifically on the construct of relational permanency. Findings also reflected the use of arts-based methods in research to encourage communication and expression of experience. The following section will highlight the connection between these findings and the existing literature and discuss future implications.

Summary of Findings

These participants identified three main themes in respect to their understanding of relational permanency: *relational elements of building permanency, personal barriers to permanency,* and *external barriers to permanency.* These themes provide insight into how participants understood this construct and how they have experienced the presence or absence of permanency throughout their lives.

Relational Elements of Building Permanency

Participants firstly expressed the importance of specific relational qualities being present within a relationship for that relationship to provide permanency. For these individuals, relationships within which they could experience *dependability*, anticipate others *being there* for them, felt a *sense of belonging* and were provided *emotional support*, were the relationships that they described as most significant, important, and permanent. These findings affirm earlier research (Ball et al., 2021; Best & Blakeslee, 2020; Blakeslee & Best, 2019) that identified similar qualities of emotional support and elements of stability and trust as essential for permanency. Often, the idea of support is used broadly to convey needs within relationship, yet, what specifically that support entails has not always been defined. These findings illuminate more specific descriptors of elements that create the sense of support in these participants' most important relationships. As an example, Mikayla indicated for her, support could specifically look like, "Having people who want to relate to you, want to introduce you to their friends. Want to know how you're feeling on a daily basis."

Earlier research has suggested that youth with histories of foster care privilege relational permanence over legal permanence (Rolock & Pérez, 2018), which was similarly reflected in the current findings. While not directly asked to reflect on legal permanence, when discussing how and by whom they had been supported throughout their lives, participants in the current study omitted aspects of financial support or legal connection, and instead focused primarily on the interpersonal, relational qualities that were desired in their relationships.

For these participants, their unique histories in foster care have shaped what they need in their most significant relationships. Taylor described longing for specific features in relationship, "So… now, at this point in my life for me to say that anything is a relationship or has a connection to being a relationship in my life, it has to be supportive." Valuing these aspects in relationship were reflected because of not having access to the same level of support during past experiences, "But something has to actually be given to me to be a relationship at this point, because for so long… I was striving to give to others to be a relationship."

Personal Barriers to Permanency

Participants also reflected on their own internal challenges that impact their ability to be available for relationships throughout their lives. Given their difficult circumstances before, during, and after their time in foster care, participants indicated they were aware of personal barriers to developing relationships that had less to do with how others showed up and were more specific to their own relational constructs, or beliefs and ways of being in their worlds. Participants characterized these as elements of *relational uncertainty* and attempts at *self-protection*.

All participants indicated that at one time or another, they felt confused, uncertain, or incompetent at being in relationships with others. Whether participants attributed this to limited modeling of positive relationships, disrupted access to others, or inadequate opportunity to learn, participants overwhelmingly felt as though their early experiences created a barrier to their ability to access relationship. For some participants like Haley, the unknown elements of interpersonal dynamics kept them from attempting to build relationship, "I was so painfully shy I wouldn't talk to people unless they talked

to me first." For others, strongly held beliefs about the lack of safety in relationships to others led to actions of self-protection that were aimed at keeping others at a distance, Taylor emphasized to keep herself safe from disappointment and rejection, "I just got this metal fence built up around my heart." These findings align with previous research that found that former foster youth tend toward creating emotional distance in relationships due to previous unsafe experiences or rejection (Ball et al., 2021; Chambers et al., 2018). For many participants, having experienced the grief of loss of their most important relationships to birth family, they made efforts to avoid future hurt by preventing connections with others.

Much of the current research on adopted individuals or former foster youth highlight problematic internalizing and externalizing behaviors as possible difficulties for impacted youth (Bartlett et al., 2018; Greeson et al., 2011; Layne et al., 2014; McGuire et al., 2018). Participants in this study characterize these features as protective responses. For Sierra, what could be labeled as resistant or reactive behaviors, were ways she had adapted to keep herself safe, "I feel like that trauma [with my biological mother] is a big piece of why, I like… still sometimes push people away. And sometimes it's like I get over emotional about different things." When labeled as a symptom, without the context or understanding of history, these emotional responses may be identified as deficits or disorders.

External Barriers to Permanency

Participants also characterized what they believed to be barriers to achieving relational permanency with others that existed outside of their locus of control. The three most salient obstacles for these participants were experiencing *inadequate support* in key

areas, initial and subsequent *displacements* and instability, and being subject to *ongoing abuse and loss*.

Inadequate support was described as experiences these participants had with individuals who took actions that were detrimental to supporting positive relational connections, like enforcing rules monitoring or preventing the development of peer connections, and the absence of specialized support where it may have been beneficial, with case workers or post-adoption. The most disruptive action to relationship building were when participants felt that adults did not listen to them, or their requests for specific support or placement were minimized. Previous research (Chambers et al., 2018, 2020; Chaney & Spell, 2015) has highlighted the frequent marginalization of voices who have less power, in this case the foster youth as compared to adults or child welfare services. Researchers have emphasized the need for those with lived experiences to be present in conversations related to individual permanency planning or permanency policies (Doucet et al., 2022).

For some participants, inadequate support was also experienced as a barrier to their development of relational permanency within their adoptive family. Limited access or engagement in post-adoption support was referenced as a missed opportunity to potentially help participant's adoptive families understand the unique challenges of adoption. Haley elaborated on this challenge,

> I never saw a case worker again. Once I got adopted there was no check in. There was no support. I'm sure my mom probably could have… She probably could have got some value from a support group herself as an adopted parent, or gosh, I'd love to be a part of a support group for adoptees who are now adults.

Similarly, scarce post-adoption services and access to support has been identified in previous research (Sánchez-Sandoval, Jiménez-Luque, et al., 2020) as potentially problematic given the lifelong challenges for all members of the adoption constellation, including the adopted individual, birth, and adoptive families. Previous research has demonstrated the value of post-permanency or post-adoption supports in their ability to provide continuity of care and ongoing education throughout the developmental process, noting that needs of a child or family at the time of adoption may vary greatly over time (Rolock et al., 2018).

Experiencing displacement and more frequent placement moves was a key factor for participants in their perceived difficulty in building relationships. For those participants who either experienced multiple placements in care, endured a failed adoption, or who experienced additional instability in school placement or geographical placement, this was identified as a large barrier. Participants explained that there were multiple elements to displacement that created these challenges, including the need for consistent presence to develop relationship, as well as the cognitive settling and predictability of being in one place that allowed participants to focus on relationship building rather than just survival.

Not surprisingly, participants who continued to experience additional losses and endured abuse while in care or post-adoption expressed that this was indeed an impediment in achieving relational permanency. For those participants who experienced the death of a family member, in most cases a caregiver, these significant losses prevented participants from knowing or continuing to build connection with those they had already established relationship with. For participants who experienced abuse by

those who had been identified by child welfare to provide the caregiving relationship, relational permanency was not able to be attained.

Summary of Arts-based Storytelling

The arts-based storytelling component of this study was anticipated to support participants in engaging in dialogue about their experiences, with the intention that the arts-based processes would encourage multidimensional richness in the ways that participants were able to discuss their experiences. Participants were presented with an opportunity for an embodied check-in, prompted to create a timeline of their story of relationships, and identified their most significant and supportive relationships to use as inspiration for a house drawing. All participants were observed to engage with each element of the arts-based process, except for the transitional embodied check-in where participation was less consistent.

In line with findings from previous research using arts-based methods (Doucet et al., 2022; Nathan et al., 2023), participants used the arts processes to communicate aspects of their experiences that they had not shared during solely the verbal portion of the interview. While creating a visual timeline of their experiences and reflecting on the relationships that were most present for them during those significant events in their lives, these participants added both visual and verbal detail about the quality of these experiences, rather than just stating the factual sequence of events that many participants had shared as an introduction to their experiences in the verbal portion of the interview. These findings confirm earlier research that has emphasized the benefit of multimodal techniques to expand what participants are able to share beyond words alone (Copeland & Agosto, 2012; Hense, 2023).

Participants selected the individuals that they experienced the most permanency with after creating their timelines. Interestingly, about half of the participants selected their adoptive parents, while the other half of participants chose a sibling, either by birth or adoption, as the person they'd experienced the closest relationship with. Previous research on relational permanency has focused specifically on permanency within an individuals' caregiving relationships (Best & Blakeslee, 2020; Rolock & Pérez, 2018), and has not necessarily addressed the potential permanency present in other sibling, extended family, or community relationships. Participants who selected a sibling as the relationships within which they'd experienced the most permanency, had also experienced two or more placements in foster care. These sibling relationships, therefore, may have been the most consistent, enduring, and reliable in the face of multiple other changes in caregiver relationships, geographic location, and placements.

Analysis of participant house drawings revealed additional themes regarding aspects of how participants described and represented their most important relationships including the *size* of the *structure*, and the *unique details* of their houses. These themes when connected to identified verbal responses, offered complexity and dimension. Size most often mirrored the amount of presence, stability, and shared experience that an individual had in a participant's life. Participants added specific *structure* or *unique details* as a way of visually representing aspects of their most significant relationships that they privileged. Descriptions of various structural components of a house, such as the foundation or the roof, offered participants visual ways to describe the concrete elements of support that they had experienced in their relationships like protection and strong, resilient presence. Participants' explanations of the *unique details* they added

reflected aspects or qualities that were specific and special to these relationships, as compared to other relationships they had experienced across time. To summarize, these findings confirm previous research that has identified visual arts as a useful starting point, and potentially safe entry point for emotionally laden dialogue regarding what participants perceive as meaningful for them (Coussens et al., 2020; Doucet et al., 2022).

Limitations of Study

The lived experience of both foster care and adoption is incredibly complex and individual. Adopted individuals are not monolithic; their experiences and perceptions are unique and varied. This group of participants had great breadth of experience regarding age of first placement, reason for placement, circumstances of their time in care and adoption. These unique factors are presented in this study to embed context around this group of participants and give depth to the variables that have contributed to their specific experiences. Characteristic of the qualitative research paradigm, these findings are specific to these participants and are designed to be considered within the context of their unique experiences rather than generalized to the wider population of adopted individuals.

All participants in this study were cis-gender, female identifying individuals. Purposive sampling was used as the recruitment method to reach out to specific groups of individuals with lived experience in foster care. Despite attempts to have a group of participants that reflected the larger racial and gender diversity of those individuals adopted from foster care, there were no male or nonbinary identifying individuals who were able to participate in the study. Additionally, there were no Hispanic identifying individuals who participated, despite representing 20 percent of individuals adopted from

care (US Children's Bureau, 2021). Findings for this group of participants are encouraged to be considered within this context, as other racial, gender, or cultural diversity could have the potential to influence other members of adopted populations differently.

As part of the inclusion criteria, participants were asked to be able to identify embedded supports in their lives, with the intention that participants could have access to support should the interview itself elicit a challenging emotional response. Access to these types of supportive communities, peers, or familial relationships can be understood as a privilege for this group of participants, that many adopted individuals or those with a history in foster care may not have access to. Therefore, experiences of those with less access to community, specifically to post-adoption supports, spiritual community, mental health resources, or peer connection, or those experiencing isolation were not captured. Given the focus of this research on the construct of relational permanence, the presence of pre-established relational connections for these individuals may indicate a strength and resiliency factor that not all adopted individuals have.

A final limitation is that the development of this study and subsequent data collection of this research study took place in the aftermath of the global COVID-19 pandemic, which significantly shifted how in-person communication occurs. While the adaptation of this study to use a teleconference platform, Zoom, allowed for participant engagement from across the US and potentially improved access to participation, it likely had an impact on how data were able to be collected. Specifically, embodied and arts-based aspects of this interview may have been impacted by participant's ability to turn cameras on and off, in some ways removing them from the interview setting. As a result,

some embodied data, as well as the ability to observe some participants in their art

making process were not able to be witnessed as part of the study.

Implications and Recommendations

This phenomenological study adds to the body of research on relational

permanence, and importantly centers those with lived experience of foster care and

adoption as experts. Use of arts-based methodology contributed to the dynamic

retrospective process of sharing experience and provided participants an opportunity to

reflect on their stories, augmenting what was shared verbally through visual artmaking.

Findings confirm the complexity of the construct of relational permanence (Ball

et al., 2021; Jones & LaLiberte, 2013) and offer insight into the specific relational

qualities that participants have identified as integral in their capacity to achieve and

experience permanency in relationship. These findings have great value for those

supporting individuals navigating time in care or transitioning to an adoptive placement,

as conscious intentional effort to developing relationships is essential in providing youth

access to relational permanency.

Long lasting, caring relationships were characterized by aspects of interpersonal

relationships, and external factors were identified as potentially supportive or disruptive.

Several of the themes identified in the current findings emphasized factors of prolonged

presence, stability, and consistent support as essential in establishing permanency in

relationships. This has important implication for child welfare and adoption practice,

considering the influence that placement decision making has on an individual's access to

stable and consistent relationship. Given the expansion of supportive relationships

beyond just the caregiving relationship for participants in this study, it may also be useful

to consider how caring, emotional connections can be supported to ensure sustainment throughout the process, even in situations that may be anticipated to be temporary for youth.

Participants also expressed this need for consistency in supportive relationships that did not end when an adoption placement was finalized, or when child welfare services terminated. In line with previous research, these findings support the concept that the experience of adoption is in fact a lifelong process, requiring ongoing support beyond the event of adoption finalization (Sánchez-Sandoval, Jiménez-Luque, et al., 2020), and reinforces the value of post-adoption services given that legal permanency alone does not guarantee well being for adopted individuals or their families (Rolock et al., 2018).

Participants' needs for ongoing support to develop relationship over time suggest that there may be a critical gap in clinical post-adoption support that would benefit from further exploration. Cashen et al. (2019) referenced the need for this level of support to navigate challenges of birth family relationships for adopted individuals. Other researchers have highlighted families' access to services or knowledge of available services as well as a lack of qualified adoption competent clinical providers as two major barriers to adequate post-adoption support (Hartinger-Saunders et al., 2016; Smith, 2010). The current study findings offer additions to previous research and highlight the need for expansion of this support to not only focus on maintaining current relationship but to support development and strengthening of relationships during periods of post-adoption where individuals may yet to have achieved permanency in a relationship while in care or have been unable to stay in relationship with birth family.

Findings confirmed the importance of foster parents, adoptive parents, and other supportive adults having ongoing access to specific adoption-informed education as well as their own support in understanding the challenges that individuals with lived experience in care face in navigating relationships, including the ways in which this may manifest in protection-seeking behaviors or impact their desire for and skills to build connection. For some of the participants in the study, the burden of developing relationship rested on them, and the adults in their lives misunderstood or pathologized their attempts at self-protection or relationship seeking. Caretaker ability to understand what might be motivating a particular behavioral presentation would better allow them to offer the nurturance within the relationship that is necessary to achieve the felt sense of belonging and emotional support participants described.

Arts-based research methods of engagement, as used in the storytelling process in this study, reflect a potentially expressive, externalizing method of facilitating conversation with adopted individuals regarding difficult or emotionally complex topics. Given the identified importance of centering youth voice in conversations about their thoughts, opinions, and desires about permanency planning, these non-verbal means of accessing information have the potential to facilitate and expand essential dialogue. In alignment with previous research on accessing youth voice, these arts-based methods that ascertain youth perspective without placing demands solely on verbal expression offer greater accessibility to individuals who may not have the developmental or emotional capacities to articulate their perspectives (Ellingsen et al., 2011).

Previous studies have questioned the mediating role of emotionally supportive relationships for adopted individuals (Sánchez-Sandoval, Melero, et al., 2020). Current

findings suggest the possibility that relational permanence, a form of emotionally

supportive relationship, could potentially be a resiliency factor for those individuals

adopted from care. Further research on the impact of relational permanency achievement

for those adopted from care would be needed to confirm the ways in which relational

permanency functions as a mediating factor of resilience in the lives of adopted

individuals. Additional research into such protective factors has the potential to

contribute the needed attention to improve outcomes and offer hope for caring and

supportive emotional connections for individuals adopted from care.

When considering the implications relational permanence has for permanency

planning practice and policy, several key points emerge. Relational permanence

recognizes that individual and family well-being is not solely dependent on legal

permanency status and highlights the importance of emotional and psychological stability

(Ball et al., 2021; Samuels, 2009). Adoption planning policies, informed by the

knowledge that legal permanence does not necessarily translate to relational permanence

(Pérez, 2017), should prioritize the quality of placements to ensure emotional readiness

and compatibility for both child and the adoptive family. This could involve initial and

ongoing assessment of the potential capacity of a prospective adoptive family for

building strong emotional connection and provision of the supportive, stable, and

nurturing environments necessary in addition to their capacity to provide legal and

logistical needs. Given the complex interplay of individual relational factors identified in

past (Pérez, 2017) and current research as essential for establishing relational

permanency, a youth involved approach would be crucial. Policies should allow for

flexibility, individualization, and whenever possible, privilege the perspectives of those

individuals at the center of the decision, respecting the unique intricacies of each person's experience and needs.

Additionally, as post-adoption services remain vital to maintaining connected and supportive relationships (Rolock et al., 2018; Sánchez-Sandoval, Jiménez-Luque, et al., 2020), access to services such as counseling with adoption-informed providers and support groups are recommended to aide individuals and families in navigating and sustaining relationship through the lifelong challenges that may arise as individuals develop (Brodzinsky & Smith, 2019). Incorporating the construct of relational permanence into permanency planning policy and practice acknowledges the complexity of individual emotional support needs and has the potential to offer success and wellbeing for adoptive families far beyond legal arrangements alone.

APPENDIX A

RECRUITMENT FLYER

APPENDIX B

INFORMED CONSENT

29 Everett St., Cambridge, MA 02138

Informed Consent

You are invited to participate in the research project titled *Relational Permanence for Individuals Adopted from Care.* The intent of this research study is to investigate and better understand how young adult adoptees, ages 18 to 30, who were adopted from foster care experience relational permanence and have made meaning of their experiences using an arts-based storytelling process.

Your participation will involve meeting virtually with the lead researcher on one occasion for between 90 and 120-minutes for an arts-based storytelling interview via teleconference. The interview will have four components that will be recorded. First you will be invited to answer a few brief questions about your experience of relationship and the important people in your life. Next you will be guided through an embodied check-in focused on how your body feels. You will then be given an opportunity to engage in some artmaking as a response to the interview questions and you will be asked to tell the story of the important people or relationships in your life.

In addition:
- You are free to choose not to participate and may discontinue participation in the research at any time without facing negative consequences.
- Interview and storytelling session will be audio and video recorded. A screenshot image of your artwork will be collected.
- Identifying details will be kept confidential by the researcher. Data collected will be coded with a pseudonym, your identity will never be revealed by the researcher, and only the researcher will have access to the data collected.
- Any and all questions will be answered at any time, and you are free to consult with anyone (i.e., friend, family) about your decision to participate in the research and/or to discontinue participation.
- Participation in this research poses minimal risk. The probability and magnitude of harm or discomfort anticipated in the research are no greater in and of themselves than those ordinarily encountered in daily life.

- The session may bring up feelings, thoughts, memories, and physical sensations. You are free to end the session at any time. If you find that you have severe distress, you will be provided with resources and referrals for support.

- If any problem in connection to the research arises, please contact the researcher, Darci Nelsen at 607-221-7693 and by email at dnelsen@lesley.edu or Lesley University sponsoring faculty Dr. Robyn Cruz at 412-401-1274 or rcruz@lesley.edu.
- The researcher may present the outcomes of this study for academic purposes (i.e., articles, teaching, conference presentations, supervision etc.)

I am 18 years or older. Consent for participation has been given of my own free will and that I understand all that is stated above. I will receive a copy of this consent form.

_____ _____
Participant Signature   Date

_____ _____
Researcher's signature   Date

There is a Standing Committee for Human Subjects in Research at Lesley University to which complaints or problems concerning any research project may, and should, be reported if they arise. Contact the Committee Chairpersons at irb@lesley.edu

APPENDIX C

SAMPLE RESOURCES FOR SUPPORT

Thank you for participating in the study. Should you have any questions or concerns about the study after the completion of your session, please contact the researcher, Darci Nelsen at 607-221-7693 or by email at dnelsen@lesley.edu. Should you be experiencing any distress, please access support using the identified services below.

Additional Resources for Support

1. Social Worker: _____   Phone: _____

2. Clinician: _____   Phone: _____

Mobile Crisis Unit	Phone Number	Locations
Local Emergency Services (*if not located in MA*)		
Boston Emergency Services Team (BEST)	1-800-981-4357	Boston, Brookline, Brighton, Cambridge, Charlestown, Chelsea, Dorchester, East Boston, Hyde Park, Jamaica Plain, Lower Mills, Mattapan, Revere, Roxbury, Somerville, South Boston, West Roxbury, Winthrop
Wayside Mobile Crisis	508-872-3333	Framingham
	781-893-2003	Waltham
Eliot Mobile Crisis	1-800-988-1111	Everett, Lynn, Lynnfield, Malden, Medford, Melrose, Nahant, North Reading, Reading, Saugus, Stoneham, Swampscott, Wakefield

APPENDIX D

SEMI-STRUCTURED INTERVIEW QUESTIONS

1. Today I'll be asking you to reflect on your experiences with foster care and adoption. I will be asking you to think about the relationships you've had in your life - the people in your life and the connections you have/had had with others

    a. What do you think of when you hear me say the word "relationship"?

    b. How would you define support or closeness in a relationship?

    c. What qualities are important for you to have in a relationship? Why?

2. What do you remember about your relationships while you were in foster care? Pre/post adoption?

    a. How would you describe your relationships during that time?

    b. What do you know now that you wish you knew then?

3. When you think about permanent, or longstanding relationships in your life, are there certain people that come to mind?

    a. What categories do these relationships fall into? Family? Friends/peers? School/work? Providers? Community?

    b. What type of support do these relationships provide for you?

    c. What do you like about these relational supports?

    d. What, if anything would you change?

4. What has helped you maintain relationships over time? What got in the way?

APPENDIX E

EMBODIED AWARENESS SCRIPT

If you are comfortable you can choose to close your eyes, or if you prefer you can gaze downward and soften your gaze on a spot in front of you. We will take a few breaths together. First, take a deep inhale one, two, three, hold, and exhale three, two, one. Again, we will inhale one, two, three, hold, and exhale three, two, one. One more time, inhale one, two, three, hold, and exhale three, two, one.

Begin by noticing your feet on the floor; feel how the bottom of your feet connect with the ground beneath you, notice if there is any tension in your toes or in your ankle joint. Start to draw your attention now into your calves, up into your knees. Notice if you feel any sensations here. As your awareness draw into your thighs, notice where they connect to your seat/chair; see if you feel any weight against your seat/chair. Next come to the base of your spine; does it feel connected to your seat below you? Allow your attention to rise up your spine slowly coming into your back, again notice if you feel any tension. Come to the front of your torso and check-in with your belly; do you notice any softness or tightness? Bring your attention upwards into your chest, acknowledge the rise and fall of your chest as you continue to breathe. Notice the rate of your heartbeat. Continuing up into your shoulders and down your arms, bring attention to any tension or sensation here.

Finally, draw your awareness up the base of your neck into your skull, and shift your attention to the muscles in your face. Notice any tension in your forehead, your brows, or your jaw. We'll take two more breaths here together. Take a deep inhale one, two, three, hold, and exhale three, two, one. Last time, inhale one, two, three, hold, and exhale three, two, one. If your eyes are closed you can start to flutter your eyelids and bring your awareness back into your physical space, if your gaze is downward, feel free to shift your gaze upwards as you are ready.

Transition Questions
1. Where would you rate your level of energy/arousal at the start of the session (high, medium, low)?
2. Where would you rate your level of energy/arousal now (high, medium, low)?
3. Is there anything important about your physiological or emotional experience that would be important to share? Or is there anything you need for yourself now?
4. Do you feel comfortable and ready to continue the interview?

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