Adoption Works Well: 
A Synthesis of the Literature

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I. Introduction
Adopted children benefit significantly from adoption. Many experience a dramatic improvement in socioeconomic status and move into materially advantaged homes and to the care of supportive, educated, adoptive parents who are very interested in all aspects of their child’s development. The majority of adopted children live in small families in early childhood, which is to their advantage. Compared to even long-term fostering, adoption provides a greater sense of permanence and familial belonging, more emotional security, and a more lasting psychosocial foundation for life.

A number of major research projects, literature overviews, and meta-analyses attest to the overall benefit of adoption.

M.J. Coiro and colleagues, using the National Health Interview Survey on Child Health, compared children based on family structure, among other demographics. They found that more adopted children enjoy excellent health with no limiting conditions than do children from any other family structure. Adopted children are also most likely to have some form of health insurance, to have a regular source for medical care and a specific sick care provider, and to see dentists at regular intervals. Adoptees are among the most likely to receive routine medical care. The study also found that adopted children were the least likely to ride without a seatbelt or to have a late or irregular bedtime.

1 Senior Fellow and Director of the Marriage and Religion Research Institute, Family Research Council.
3 Ibid., 674.
Children adopted in infancy repeat grades least often and have better health status than children adopted later, children born to and raised by single mothers, and children raised in intact families. Among these four groups, only children raised in intact families see mental health professionals less, have better standing in their school classes, and have fewer behavior problems than children adopted in infancy.6

Examination of a large U.S. national data set found that teenagers who were adopted at birth were more likely than children born into intact families to live with two parents in a middle class family. They scored higher than their middle class counterparts on indicators of school performance, social competency, optimism, and volunteerism. They were less depressed than children of single parents and less involved in alcohol abuse, vandalism, group fighting, police trouble, weapon use, and theft.7 Teens adopted at birth also scored higher than children of single parents on self-esteem, confidence in their own judgment, self-directedness, positive view of others, and feelings of security within their families.8

A Dutch meta-analysis gauged the relative rate of development of adopted and non-adopted children. Over 270 studies of 230,000 children and their parents were included in this analysis. Despite performing below their respective age groups in some outcomes, particularly physical growth and attachment, adopted children caught up to their age groups more fully than their non-adopted birth peers (children of similar family, economic and social circumstances who were not adopted). The physical height, school achievement, and psychological attachment of children adopted in their first year most closely resembled those of their general age group. In most outcomes, international adoptees and domestic adoptees caught up to their age groups at similar rates.9

In the United Kingdom, a large sample of adults, most of whom were adopted before their first birthday, were compared at age 23 and again at age 33 to a birth comparison group of non-adopted adults (of the same age, from similar birth circumstances) and to the general population (of the same age). Adopted women adjusted positively according to all metrics, often outperforming the general population. Adopted men generally did as well as the general population comparison group, though they had fewer social supports and experienced more employment-related problems. At age 33, most of the adopted men and women were performing much better socially and economically than their birth comparison group.10


7 Peter L. Benson, Anu R. Sharma, and Eugene C. Roehlkepartain, Growing Up Adopted-A Portrait of Adolescents and Their Families (Minneapolis: Search Institute, June 1994).


The Texas Adoption Project yielded similar results in its thirty year follow-up evaluation of the adopted and biological children of adoptive parents. Both groups showed generally positive educational, occupational, marital, and adult-problem and personality-related outcomes. However, some outcomes for the adopted offspring, though positive, were less so than for the biological offspring.11

These results show that adoption is a tremendous gift for the vast majority of children who experience it, as well as for their adoptive families and biological mothers. However, this great good is not achieved without its own special efforts, stresses, and even sufferings, as the following parsing of the research on adoption will show.

II. Family Relationships

A. The Adoptee’s Sense of Attachment

Problems with attachment to parents are frequently related to the age at adoption: Children adopted before they are 12 months old form secure attachments just as often as non-adopted children, but the attachments of those adopted after 12 months were significantly less secure. However, for these children adopted later, adoption is much better than being fostered as foster children tend to have more disorganized attachments than adoptees.12 Furthermore, for adoptees who enter their families with disorganized attachments arising from earlier deprivation and neglect, most catch up remarkably, though incompletely, after some time in their adoptive homes.13

In one survey, 46 percent of adoptees reported feeling different from their adoptive families growing up.14 In another, 68 percent of adoptees reported such feelings.15 This feeling, however, was not necessarily negative, nor did it indicate that the child felt that he or she did not belong to the family.16 In the vast majority of these cases, solid attachment is present, even if accompanied by feelings of difference. It is worth noting that, though this difference is a reality, for these children it is not a negative reality.

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13 Ibid., 417.
B. Parental and Family Adjustment to the Adoptee

A survey conducted by Princeton Survey Research Associates found that 90 percent of adults view adoption positively, though half say adopting “is not quite as good as having one’s own child.”17 Most adoptive parents report being very satisfied with their adopted children,18 with only 15 percent of family members saying, in retrospect, that the adoption was less than successful19 or that they have any regrets. The stresses and negative experiences associated with adoption are proportionally lessened the younger the child is at the time of placement, and, interestingly, the more densely populated is the area in which the adoptive family resides.20 Married adoptive parents more frequently make a positive adjustment than unmarried adoptive parents do.21 Most parents feel deeply grateful for and enriched by the experience of adopting a child.22

Parent-child communication gives further evidence of adoption’s benefits. A study of 450 adolescents found that adoptees communicate more positively and have more positive relationships with their parents than do even biological children.23 However, there are exceptions to this high level of communication, due mainly to parent-child conflict during adolescence.24

Parents who did not feel close to their adopted children cited such reasons as the child’s learning difficulties, emotional insincerity, and behavioral problems, and their own feelings of being rejected by the child.25 These difficulties more frequently arise when the adoption takes place, not in infancy, but later in childhood, as later-adopted children tend to have difficulty adjusting to their new homes.26 Special needs adoptees (including those who experienced neglect, abuse, or multiple caretakers before being adopted) are also significantly more likely to have difficulty adjusting to their new home or more

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21 Ibid., 86-88.
frequently experience the dissolution of their adoption than do adoptees without special needs.\textsuperscript{27}

In general, the older the child is at adoption the greater are his special needs, and the greater in turn is the need for parental constancy, flexibility, and engagement.\textsuperscript{28} Parenthetically, it is worth noting—though not surprising, given that they tend to possess these attributes and capacities—that adoptive parents are less likely to divorce.\textsuperscript{29}

Furthermore, the more adopted children there are in a home, the more likely is the adoption to be positive and stable, though too large a number of children in the home decreases this somewhat.\textsuperscript{30} However, neither the presence of biological children in the adoptive family, nor the order of adoption has much—if any—influence on the adoptee or the adoptive parents, particularly in early adoptions.\textsuperscript{31}

\section*{C. The Adoptive Mother: Attachment and Child Adjustment}

According to attachment theory, children form secure attachments to caregivers who are sensitive, responsive, and predictable. This holds true in adoption. An adoptee’s attachment security as an adult depends heavily upon his perceptions of his adoptive parents’ love and care for him.\textsuperscript{32} Not surprisingly, the sensitivity of the adoptive mother strongly influences adoptee development.\textsuperscript{33}

Having a secure attachment history contributes to a child’s social competence and ability to relate to others. The self-perception of secure (or insecure) children will enhance or diminish their ability to function psychologically.\textsuperscript{34} Though this is the normal attachment pattern for children with their biological mothers, the process is equally critical for successful adoption outcomes, as the following results will show.

While still in infancy, children develop the capacity to form attachments and recognize different people. Most have developed a preference for one particular person by six months; by nine months, the attachment has deepened and they can distinguish between strangers and familiar faces. Once they reach 12 to 14 months of age they

\textsuperscript{29} National Committee for Adoption, “Unmarried Parents Today,” June 25, 1985.
develop strong connections to their “primary attachment figures”—usually their birth mothers.35

When children are adopted later than infancy some level of strain between mother and adopted child will occur. Despite such difficulties, having an adoptive mother is of great benefit to these children, because adoptive mothers spend more time with their children than do mothers in any other family structure, including mothers in intact families.36 The more time a mother spends with her child, the more sensitive she tends to be, resulting in the finding that increased time spent with the child is associated with a higher HOME score (a score which indicates an enriched and positive home environment).37

Chedgzssey Smith-McKeever, professor of social work at the University of Illinois at Chicago, identified the frequency with which the adoptive parent thinks of the child when they are apart as a significant variable in family satisfaction with an adoption.38 In other words, the more the parent thinks about their child—a form of attachment to the child—the more likely the adoption will be satisfying for all.

A different study illustrates this in a different way. Martha A. Reuter, professor of family social science at the University of Minnesota, along with her colleagues found that whenever there was evidence of “less warm, supportive communication in adoptive families compared to non-adoptive families,” the only statistically significant difference in family interactions between the two family structures was the adolescent adoptee’s perception of his communication with his adopted mother.39

D. Outcomes for the Birth Mother
Not only do the adopted children do better; so, too, do their birth mothers who give them up for adoption. They have higher educational aspirations, are more likely to finish school, and are less likely to live in poverty or to receive public assistance than mothers who keep their out-of-wedlock children.40 One study found that adolescent

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mothers who relinquish their children for adoption are more likely to be employed 12 months after the birth. The same study found that adolescent mothers who keep and rear children conceived out of wedlock are more likely to conceive again within three years after their first birth, but are not significantly more likely to give birth a second time, suggesting they are more likely to abort the second child than are those adolescents who relinquish their children. Furthermore, the mothers who gave their children up for adoption did not suffer any extra social or psychological problems.41

E. Longing to Know the Birth Mother
At some stage, adopted children commonly desire to get to know their birth mother. Because this area of research deals almost completely in subjective appraisals of feelings and perceptions of the child’s and other adults’ feelings, many of the findings are quite complex and seemingly contradictory. The following is an interpretive overview of this body of data.

About 70 percent of adult adoptees express feeling moderate to significant degrees of “uncertainty and ambiguous loss” regarding their birth parents. One study found that 70 percent of adoptees experienced such feelings. The remaining 30 percent “expressed security and no apparent [sense of] loss.”42

Adoptees in search of more knowledge about their birth family members frequently express dissatisfaction, anger, and helplessness at their lack of insight into this aspect of their identities.43 Some adoptees say that their family members’ disapproval (or their fear of such disapproval) of their desire to search for their birth parents contributes to their avoidance of and secrecy about the subject.44 In contrast, those adoptees who do not express such feelings of loss say they experience acceptance and candid communication with their adoptive families. The reason they most frequently cite for their security is “the love and closeness in the adoptive family.”45

Research from the United Kingdom found a gender difference: While 66 percent of adopted women search for their birth relatives, only 34 percent of adopted men do so. The study found that feeling loved (or not) by the adoptive mother was predictive of whether or not an adoptee would search for his birth parents: Twenty-three percent of searchers reported feeling unloved or uncertain of being loved by their adoptive mothers, whereas only nine percent of non-searchers felt unloved. However, it is worth noting

that 77 percent of those who searched—the overwhelming majority—did feel loved by their adoptive mothers. 46

When adopted children finally make contact with their birth mothers, the likelihood of continued frequent contact with their birth mother correlates strikingly with the age at which the adoption took place: an earlier adoption greatly increases the likelihood of such frequent contact. 47 Because later-placed adoptees have difficulty with intimacy and attachment, it is not surprising that, should they reunite with their birth mothers, they are less likely to have continued frequent contact with her. 48 Thus, it would seem that (at least for females) the earlier the adoption takes place, the greater is the adoptee’s capacity for attachment to the birth mother, even while being quite attached to the adoptive mother.

III. The Adoptee’s Social Adjustment

A. Self-Image Adjustment to Adoption

Once adopted children reach five to seven years of age, they begin to understand the difference in being adopted and many become more sensitive or ambivalent about the subject. Some avoid reminders of their adoption, or simply try not to think of it. 49 Boys sometimes have a greater difficulty in adjusting to this newly perceived reality. 50

One study of racial or ethnic differences between adoptees and their adoptive families found that they had relatively little impact on the adoptees’ socialization. Adoptive mothers report that most children whose ethnic origin or skin color is different from that of their adoptive families do not receive serious negative reactions from peers or adults. Though 30 percent of adopted children in the study received some negative reactions, only seven percent had received many. 51

B. Impact of Age at Adoption on Social Adjustment

Age at adoption seems to be the biggest reason for adjustment differences between adopted and non-adopted adolescents. Illustrating again the importance of adoption during infancy, a study by Anu Sharma, of University of Colorado at Boulder, and colleagues found that “the most interesting result from this study was the remarkable

47 Ibid., 226-227.
48 Ibid., 234.
lack of differences...between youth adopted at ages 2-5 years and those adopted at ages 6-10 years.\textsuperscript{52}

A study of teenage attachment problems shows the impact of age at adoption on the capacity for attachment. \textquoteleft If the child had arrived at 1 year of age or earlier and had been 6 months or less in an orphanage/foster home, 6 percent showed attachment problems. In the group where the child had arrived after 1 year of age and had been in an orphanage/foster home for more than 6 months, 23 percent showed attachment problems.\textsuperscript{53} The earlier the child is adopted, the more his attachments thrive.

\textbf{C. Social Adjustment in Adulthood}

Adoption’s positive impact continues to manifest itself in an adoptee’s adult relationships. Adopted women enjoy much higher levels of social support from multiple sources, including friends and their parents, than women in a control group of their non-adopted birth peers.\textsuperscript{54} They also tend to be emotionally stable and at lower risk of psychological distress.\textsuperscript{55} Adopted men, by contrast with the general population and their non-adopted birth peers, were less likely to ask friends or family for help with problems and had higher rates of dependence and unemployment.\textsuperscript{56}

A 1998 study showed that, on average, adopted women began their first romantic relationship at 22.1 years of age, while their birth comparison group began at 20.5 years old, and the general population at 21.7 years. A related delay is seen in childbearing, with adopted women lagging two years behind the general population and a more pronounced three years behind their birth comparison group.\textsuperscript{57} None of these delays are cause for concern.

\textbf{IV. The Adoptee’s Development}

\textbf{A. Physical Health and Growth}

The aforementioned large Dutch meta-analysis by Marinus H. van IJzendoorn and Femmie Juffer of Leiden University found that when adopted children are initially placed in a new family, regardless of their age, they tend to lag very significantly in height and weight behind their non-adopted same-age peers.\textsuperscript{58} After some time in their

\textsuperscript{55} Ibid., 61.
\textsuperscript{56} Ibid., 63-64.
\textsuperscript{57} Ibid., 61.
families they do close the gap, massively outperforming their non-adopted birth peers, though not totally catching up with their peers in the general population. Children adopted before twelve months of age close the gap the most.\(^{59}\) This meta-finding can be seen also in the results of a study in California of 83 African-American adoptive families: One third of newly adopted children were rated less than “very healthy” at the time of adoption, but had later improved very significantly.\(^{60}\) The same is found in international adoptions.\(^{61}\)

One health anomaly is worth noting: Internationally adopted children, particularly girls, are at increased risk of early puberty, which in turn contributes to shorter height in adulthood. Girls who are most underdeveloped when they are placed for adoption and who then catch up quickest are at greatest risk of reaching puberty early. Though precocious puberty is very rare for boys,\(^{62}\) one study showed that 30 percent of internationally adopted girls experienced precocious menarche (on average, at 10.5 years of age).\(^{63}\)

Adoption has the power to restore health even in drug-exposed children. This is illustrated in a longitudinal study of such children exposed \textit{in utero} to crack cocaine, other kinds of cocaine, heroin, marijuana, and PCP. According to adoptive parent surveys administered immediately after adoptee placement and four and eight years later, drug-exposed adoptees generally functioned normally. Sixty-three percent were reported to be doing “well with few problems.” They were almost identical in most outcomes to adopted children who were not exposed to drugs. Over 97 percent of the parents of these adoptees said they felt very close to their children.\(^{64}\)

**B. Mental and Psychological Health**

A study by Anthony Burrow of the department of psychology at Loyola University, Chicago, and colleagues shows that there are no significant differences in psychological adjustment or physical health between adolescents who were adopted and those who were not.\(^{65}\) Adopted children do exhibit lower self-esteem than children from intact families but their self-esteem is not significantly different from that of children from

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\(^{59}\) Ibid., 1233-34


separated or divorced families.\textsuperscript{66} Though some adoptive children experience affective difficulties such as depression and unhappiness, behavioral problems present the greatest challenge by far, especially among children who were older at the time of their adoption, or who have special needs.\textsuperscript{67}

The development of a clear sense of self by the adopted child is influenced by early experience, adjustment within the family and community, and social attitudes toward adoption (among a number of other factors) and in turn explain the adopted child’s difficulties in combining a sense of self with other non-familial spheres of social identity.\textsuperscript{68}

Despite these understandable hurdles, the 1988 National Health Interview Survey on Child Health found that adopted children see mental health providers less than all other groups, except children from intact families,\textsuperscript{69} attesting to the generally good mental health of adopted children.

\textbf{C. Social Behavior}

Harold Grotevant, professor of family social science at the University of Minnesota, and colleagues found that adopted children are no more likely to display aggressive antisocial behavior than non-adopted children, all other things held constant, but they were found to be at greater risk for expressing non-aggressive antisocial behavior. (Aggressive antisocial behavior was defined as “violent, aggressive behavior directed toward people or animals,” whereas “theft, property damage, serious rule violations, and the sale or possession of drugs, without violent behavior” were examples of non-aggressive antisocial behavior.) However, the closer the parents are to the adopted child and the more educated the adoptive mother is, the less likely are adopted children to engage in these aggressive behaviors.\textsuperscript{70} However, other experiences do increase the likelihood of aggression.

The more maltreatment the child has suffered, the greater the aggression he or she will express.\textsuperscript{71} However—again illustrating the importance of the adoptive mother’s own psychological capacities—the more easily she can access memories of her own childhood,


\textsuperscript{71} Ibid., 109, 122.
and the more secure her own attachment capacity is, the less aggression these abused children will exhibit. 72 This illustrates yet again both the healing power of adoption and of the benefits of the adoptive mother’s ease of attachment. On the other hand, an adoptive mother struggling with unresolved pain can further complicate a child’s confused attachments, 73 and can even destroy the stability and parent-child closeness that, as already discussed, helps to mitigate the child’s tendency towards antisocial behavior.

Pursuing a related line of research, a Swedish longitudinal study followed four groups of children from gestation to 23 years of age. The subjects were organized into four groups: adopted children, children in long-term foster care, children originally registered for adoption by birth mothers who changed their minds, and children living with their biological parents. The study found no differences between adoptees and controls in criminal behavior or problems related to alcohol.74

Delving into earlier development stages, another study analyzed differences in problem behavior and pro-social behavior between adopted children and non-adopted children. The study gauged problem behaviors by asking parents about a child’s temper and anxiety or fearfulness, and measured pro-social behavior by asking about a child’s ability to get along with others, do what he is asked, fulfill his responsibilities, and behave cheerfully. Children were evaluated on these behaviors in age groups of zero to four years, five to 11 years, and 12 to 18 years. No significant differences were found between adopted and non-adopted children.75

D. Language Acquisition by Adopted Children

A study of Eastern European children adopted by American families showed that age at adoption affected their English language development. The study controlled for a number of other factors, including developmental delays and premature birth. Not surprisingly, the earlier the children were adopted the better was their language development; the later their adoption, the more they lagged and the more severe were their language problems.76 Those adopted within their first year had, within two years of their placement, attained command of the English language normal for their age. Older adoptees caught up more slowly. Those adopted still later experienced increasingly greater lags. For instance, those adopted at 25 to 30 months of age showed an eight to 10 month delay a year after being adopted.77

73 Ibid., 194.
77 Ibid.
E. Effects of Abuse and Neglect on Education

Not surprisingly, adopted children who experience abuse and neglect have poorer social adjustment and weaker outcomes than adopted children who were not abused or neglected. Though they achieve less in school, their IQ scores revealed no corresponding difference.

Adopted children exposed to drugs in utero, despite attaining good grades as frequently and doing as well in speech and language as non-exposed children, were more likely to repeat a grade or have learning disabilities that required enrollment in special classes.

F. General Academic Performance

Adopted children outperform their non-adopted siblings and birth peers in math, reading, and general academic capacity, as well as in adult qualifications later in life. They never lag significantly behind the general population. Of interest is the fact that adopted boys do better than the general population on reading. This is primarily attributable to adoptive parental interest in their education. In a 1981, according to the testimony given by Nicholas Zill, a vice-president at Westat, MD, before the House Ways and Means Subcommittee on Human Resources, only seven percent of children adopted in infancy repeated a grade, while 12 percent of children living with both biological parents repeated a grade.

However, many general studies show that when the academic performance of adopted and non-adopted children is compared, adoptees have lower grades and more learning difficulties. Teachers report that adoptees lag behind non-adopted children in academic attainment, originality, capacity to learn independently, participation at school, and productive peer engagement. Furthermore, adopted children are significantly more likely to require special treatment for learning disabilities than are non-adopted children.

82 Ibid., 675-676.
A study by Sandra Scarr, then a professor of psychology at Yale University, and Richard Weinberg, then a professor of psychology at the University of Minnesota found that, though adopted children’s IQs tend to correlate with their biological mothers’ education levels, earlier placement leads to a higher IQ score. They found that, eventually, there are no differences between the IQ scores of adopted siblings and those of biological siblings reared together.87 Along related lines of research, another study, confirming the “earlier is better pattern,” showed that later-adopted children are twice as likely as non-adopted children to have learning problems that necessitate special education.88

G. Overall Educational Achievement

Adoptees benefit significantly from adoption in their education attainment, mainly because they are reared in healthy environments by parents interested in their academic development.89

Teacher reports in the aforementioned Swedish longitudinal study found that, at 11 years of age, adopted boys were more prone to problem behavior and adopted girls lagged behind their peers in math. At 15 years old, adopted boys and girls earned lower average grades than their classmates. Despite all this, at 18 years of age, military records show that adopted boys’ IQ scores matched those of their control group.90 Likely explaining much in this prior study and repeating a strong, almost immutable pattern in the research, another study found that adoptees who are placed in their first twelve months perform in step with the general population at school, whereas those adopted after one year lag behind their peers.91

A number of international studies showed that adoptees were referred for special education twice as often as non-adoptees. However, they also showed that adoptive parents were more informed about available services and more alert to potential problems than were non-adoptive parents, and were thus more likely to seek out such services and refer their children to them.92 Thus, the rate of special needs services likely reflects the higher level of care and concern repeatedly evidenced by adoptive parents.

V. Conclusion

Adoption is a remarkably beneficial act by generous people, who offer their time, attention, affection, and resources to give other people’s children a better chance in life.

89 Ibid., 327.
92 Ibid., 327.
Though adoption is not without difficulty for some adoptive parents, when compared to what life offered their children initially, it makes an enormous positive difference in all dimensions of children’s lives, and also in the parents’ lives. For the overwhelming number of those who adopt and those who are adopted, it works very well.

Douglas Henderson, professor of psychology at the University of Wisconsin encapsulates the accumulated research in the following statement: “[E]very adoption represents both gains and losses, and that adoption is a multigenerational and ongoing process which only begins with the final adoption, and which permanently affects the lives of all involved. We know that the story of an adoption does not ‘end’ the day the adoptive parents and their new child walk out of court as a legal family. The adoption does not ‘end’ the day that the birthparent becomes legally childless, or the parent of one less child. The adoption experience for the adoptee only begins with the adoption process itself, and likely never really ‘ends.’”93

But the children are much stronger for it, and the world is blessed to have the parents who adopted them.

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