Family Finding and Matching in Adoption: What Helps to Make a Good Match?

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Abstract

This study compared the effectiveness and outcomes of different family finding methods in adoption in England, over-selecting harder to place children. The case files of 149 children with adoption recommendations in ten local authorities were reviewed and a sub-sample of sixty-seven cases were followed in real time, through interviews with professionals and families until six months after adoptive placement. Most matches were of good quality, but 14 per cent were fair and 13 per cent poor, involving serious compromises on matching requirements or adopters' preferences. There were more poor matches when in-house placements were made or children's difficulties were under-played with new parents and, necessarily, more compromises were made when matching children with significant health or developmental needs. More good quality matches were made when case responsibility was transferred early to the adoption team. Poorer quality matches were related to poorer outcomes six months after adoptive placement. To improve matching, searches for families need to be widened early to avoid delays and to maximise the pool of adopters. Formal processes to track and review the progress of adoptions for children with complex needs (including matching meetings) can help avoid delay and ensure that a group of professionals, rather than an individual professional, makes key decisions.

Keywords: Adoption, delay, family finding, matching, outcomes, permanence planning

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Introduction

Finding adoptive families for children and deciding which child should be placed with which particular family are major social work responsibilities. However, there has been little research on what contributes to good family finding and matching or how these tasks relate to adoption outcomes. At a time of increasing emphasis on adoption and the changes introduced in the 2014 Children and Families Act, these issues are particularly salient. The research reported in this article aimed to address these gaps in our knowledge.

Matching can be defined as the process of identifying a family whose resources will, as far as possible, meet the assessed needs of a particular child or sibling group, throughout childhood and beyond (Hadley Centre, 2002) or, put another way, it involves fitting parents' strengths to the needs of children awaiting placement (Ward, 1997). However, Quinton concluded that:

> There is virtually no research on the extent to which children's needs are matched with the capacities of adoptive parents to meet them. For this reason, we do not know to what extent attention to matching makes a difference to outcomes (Quinton, 2012, p. xvi).

In *An Action Plan for Adoption: Tackling Delay* in England and Wales (DfE, 2012b), the government expressed concerns that the insistence on finding a 'perfect', rather than a good enough, match was leading to delays, particularly for black and ethnic minority (BME) children. Much of the literature and debate has focused on matching in relation to ethnicity and culture and less attention has been systematically paid to other factors.

A number of factors are related to adoption outcome and are likely to be important in matching, such as the greater difficulties associated with children who are hyperactive or have been singled out for rejection by their parents, placements in families with resident birth children and a lack of responsiveness/warmth from the new parents (Quinton *et al.*, 1998). Other factors that have been found to contribute to adoption disruptions are agencies with fragmented services or inadequate post-placement services (Partridge *et al.*, 1986; Valentine *et al.*, 1988; Barth and Berry, 1988; Westhues and Cohen, 1990); families whose extended family does not support the adoption (Feigelman and Silverman, 1983); children who are older when they enter care, have experienced frequent moves and delays in placement, who were abused or have emotional and behavioural problems (Valentine *et al.*, 1988; Smith and Howard, 1991); and parents who are not equally committed to the placement, are rigid about normative child behaviour and have unrealistic expectations for the adoption (Partridge *et al.*, 1986; Bourguignon, 1989; Westhues and Cohen, 1990; Pinderhughes, 1996). Mismatches can occur if parental expectations are disappointed, including the belief that a new child will readily form attachments to adoptive parents or that a loving home will lead to improvements in the child's behaviour.

The provision of support should be factored into matching decisions, and matching needs to be seen as a process, since some key factors depend on how it takes place (Quinton, 2012). For example, research has shown that adoption disruptions are more likely when agencies have not helped parents to adjust their expectations to a child's capacities (Ward, 1997), new parents do not have sufficient accurate information to understand the challenges posed by a child (Selwyn *et al*., 2006), the needs of the child/parents have been overlooked during assessment, or support services have not been provided pre and post adoption (Evan B. Donaldson Adoption Institute, 2004). 'Stretching' the gap between what new parents want and the child they adopt has also been identified as contributing to adoption disruption (see, e.g. Barth and Berry, 1988; Valdez and McNamara, 1994; McRoy, 1999; Evan B. Donaldson Adoption Institute, 2004).

Given the lack of research on what contributes to good family finding and matching or how these tasks relate to adoption outcomes, the study reported in this article (Farmer *et al*., 2010) aimed to compare the effectiveness, outcomes and costs of different family finding and matching approaches in adoption in the UK. The findings on costs have been reported elsewhere (Bonin *et al*., 2014).

The study

The research was funded by the Department for Education as part of the Adoption Research Initiative (Thomas, 2013). The first stage of our study was a survey of adoption practice in England and Wales (Dance *et al*., 2010). Its aim was to identify the policies, practices and decision-making processes used in linking and matching children to prospective adopters nationally. An online survey provided a self-completion questionnaire for adoption managers with an option to respond on paper. Responses were received from seventy-four of all 168 local authorities in England and Wales (44 per cent) and sixteen of twenty-nine (55 per cent) voluntary adoption agencies (VAAs). Survey questions covered working with children who would be placed for adoption; working with families who wish to adopt; linking and matching; the adoption panel; the work of the adoption team and also provided statements to elicit the views of the respondents about key areas of family finding and matching practice.

The survey showed that there were widely varying attitudes to matching and thus differences in practice. For example, the principle of 'same-race' placements was an absolute priority for 37 per cent of adoption managers, even if it involved substantial delay, whereas, in contrast, two-thirds would seek a placement that was not ethnically matched if a 'same-race' placement had not been identified within a reasonable period. In addition, most adoption managers (66 per cent) thought that the criteria for family finding ought to

be reconsidered if a child had been waiting over six months for a family, but 34 per cent would wait much longer.

The survey enabled us to identify four different approaches to family finding and matching. In the second stage of the research, we selected ten local authorities (LAs) in England on the basis that they were using one of these. The first was the early transfer of case responsibility to adoption workers where full case responsibility was transferred to a specialist adoption worker either when the adoption recommendation was agreed or the Placement Order granted (two LAs). In the other authorities, a family finder from the adoption team was allocated to a case but the child's social worker remained involved in, and often responsible for, decisions on the suitability of adoptive families. The second approach (two LAs) was using in-house profiling as the *primary* method of family finding for 'hard to place' children and the third was using formal monitoring processes to plan and track family finding progress (four LAs). The fourth category (two LAs) was the use of Adult Attachment Interviews (Henderson *et al.*, 2003) in assessing prospective adopters, but it was used in too few cases for analysis to be viable. Additionally, practice continued to develop within the agencies. When in some areas it was not possible to group the practice approaches by authority, instead we assessed how far these variations influenced individual cases and grouped cases according to the different approaches. This allowed us to make appropriate comparisons between the approaches.

In the second stage of the study, in the ten authorities, we drew a sample of two cohorts of children—eighty-two retrospective (children who had already been placed for adoption) and sixty-seven 'real-time' cases where, from the point of the adoption recommendation, we followed the progress of family finding, matching and the first six months of placement (where applicable). The ten authorities provided varying numbers of cases: from six (one) to eighteen (two), with others providing seventeen (two), sixteen (one), fifteen (three) and twelve cases (one). Cases were included in the 'real-time sample' as they arose and sixty-seven was as many as the fieldwork period allowed us to follow up. No cases were withheld by the LAs. While in two cases social workers were reluctant to introduce the study to the adoptive families so that in-depth interviews were not possible, all case file information was available to the study.

For both samples, cases were excluded if the child had been/was planned to be placed for adoption with kin or with an existing foster carer, since the issues relating to matching would have been so different. Where siblings were placed together, the eldest of the group was selected. The sample included some children placed alone (40 per cent) and others placed with some/all their siblings (35 per cent) (25 per cent had no siblings), which allowed us to consider the important issue of the relationship between sibling placement and matching.

To obtain the retrospective sample, authorities provided us with a complete set of anonymised data for all children with an adoption recommendation

within a set eighteen-month period. This data set included demographics and additional needs at recommendation. For the real-time sample, similar anonymised information was provided monthly during our fieldwork, as panel recommendations were made.

In both samples, cases were purposively selected to include as many children as possible with complex needs (specifically, children who were older at recommendation, black and minority ethnic (BME) children and those with health or developmental problems) because these children are harder to place and this makes the family finding task more complex/challenging and would therefore shed more light on our research questions.

We reviewed the case files of all 149 children in the sample, using a comprehensive schedule covering details about the children's backgrounds, care experiences, decision-making for adoption, how family finding and matching were conducted and placements made. In addition, we periodically tracked the sixty-seven children in the real-time sample by conducting interviews with social workers (when adoption had been recommended) until the point of a match; and conducted interviews with twenty-seven adoptive parents when the match had been approved (these interviews were undertaken by the two main researchers and took place in the adoptive parents' homes, before placement whenever possible). In addition, follow-up interviews with social worker and adoptive parents were undertaken six months after placement. Whilst the six-month follow-up after children joined adoptive families is short, this was all that was possible within the study's timescales. Only twenty-seven adoptive parents (55 per cent) agreed to be interviewed from the forty-nine real-time adoptions made, so this sub-sample may contain bias.

The research was approved by the Ethics Committee of the School for Policy Studies, University of Bristol, by the Association of Directors of Children's Services and the research governance committees of individual LAs. Permission to review documents on adoption files was given by the Ministry of Justice and the Secretary of State. Permissions to review the files and consents for interviews were also obtained.

Limitations of the study

Case file information has limitations, such as data not routinely recorded or missing. Nonetheless, they were a rich source of information and allowed access to the whole population under study, which is not possible with interviews. This study aimed to capitalise on the strengths of these two information sources. Purposive sampling increased the number of hard to place cases so that many findings relate to matching harder to place children rather than a normally occurring population of adopted children which would include more children who were easy to match. The sample size allowed us to consider the processes under scrutiny in some depth, but the study might usefully be replicated with a larger more representative sample. One study strength

was in using information collected during the process of family finding and matching as it unfolded.

Since this study is based on UK practice, some of the more specific findings may not be applicable to the child welfare contexts of other countries. The broader findings are likely to apply in other countries, but would need to be replicated with a larger sample.

Characteristics of the children in the sample

As seen, we deliberately over-sampled children with complex needs. In the final sample, 31 per cent ($n = 46$) were minority ethnic children (most mixed ethnicity); 19 per cent were aged over five when adoption was recommended (range in sample: three weeks to 10.5 years); 25 per cent had a disability or health problem (including 7 per cent where it was severe); 18 per cent had delayed development; and more than a third were to be placed with siblings. Taking all these factors into account, 48 per cent of the children had what we termed 'complex needs'.

In this article, we will consider what the study showed about the key ingredients of effective family finding and matching and the part played by the different practice approaches. This includes a consideration of the availability of adoptive families for the children, how well the matched adoptive families met the children's needs, how well the matched children met the expressed preferences of the adopters, why poor matches were made and what helped to achieve good quality and speedy matches. But first we look ahead to the outcomes for the children in our study.

The outcomes of the adoptions/adoption recommendations

Of the 149 children in the two samples, more than a quarter (27 per cent, eighteen) of the real-time sample children had not been matched with adopters. There was a late change of plan to long-term foster care for eleven of them, on average thirteen months after the adoption recommendation (range seven to nineteen months). The remaining seven children were still waiting to be placed for adoption, for two of whom a match had been identified but the arrangements had then broken down during introductions. So, in looking at matching, we also need to consider how delays occurred, since efforts to match children will be stymied if finding suitable families takes so long that children are by then too old to be adopted. Eight of the eighteen unmatched cases were characterised by lack of proactive work. (This refers to cases where children's social workers did not progress the case in a timely way, such as not completing the child's profile to enable family finding to be widened or not following up referrals from the Adoption Register or potential adoptive placements.)

Development of the 'stability of placement' variable

In the context of this study—and the understanding of adoption disruption in the UK—the term 'adoption disruption' is used to describe an adoption that ends after the child is placed in an adoptive home, before or after the adoption has been legally finalised, resulting in the child's return to care.

In order to consider the outcomes for the children in more depth, we developed a schema indicating how placements had progressed. We examined all the extensive evidence gathered from the case files (including detailed summaries written on each case) to categorise placements. Our category definitions focused on how adoptive parents undertook the parenting task in each placement in response to managing any children's difficulties (e.g. could they manage attachment/behaviour difficulties or did they become negative or rejecting?), the impact on the family (e.g. were there adverse effects on other children in the family because of direct attacks by the child/rivalry/demands made on the new parents' time?) or difficulties in the development of relationships within the adoptive family (e.g. was there considerable distance in this relationship and no signs of beginning attachment and if so, had the new parents managed to continue to provide consistent warmth?).

Cases were assigned by the two authors independently and produced substantial agreement (Kappa = 0.906). Final assignment of eight not agreed cases occurred after discussion between the authors and tightening of the category definitions. Using this final schema, the raw data were independently rated by a third researcher (Kappa = 0.943).

In terms of placement stability over the first six months, 40 per cent of the placements were continuing and were positive; 27 per cent had some problems but were positive; 18 per cent showed significant problems but these did not pose a threat to stability; 5 per cent were at risk of disruption; and 5 per cent had disrupted, whilst for 5 per cent the outcome was not known. (In terms of disruption, it should be borne in mind that our sample is not a typical one.) Our second outcome measure, using a similar approach, was placement quality. Most placements (87 per cent) were judged by the researchers on the basis of all the evidence to have been positive for children; 8 per cent were only adequate (with problems in parental management or in their responses to the children), whilst the 5 per cent of disrupted placements were rated as a poor experience for the child.

The quality of the matches made

Since we were interested in matching, *based only on the knowledge that was available when the match was made*, the two authors independently rated the matches, in relation to how much compromise had been made on the matching requirements for the child or on the adopters' preferences. This

excluded ethnic matching, as we wanted to look at this separately so that we could consider how far ethnic matching was or was not related to the quality of the matches.

This rating took into account the judgements made by the researchers reviewing case files and the 'raw data' notes on the matching criteria/decisions. These data were independently categorised by the two authors. There were different judgements in just fourteen cases, with none exceeding one category. Tests of interrater reliability produced a Kappa value of 0.736 ($n = 131$; $P < 0.001$). Final decisions on group membership for disputed cases were discussed and agreed.

Using these ratings, almost three-quarters (73 per cent) were considered to be good matches, 14 per cent were fair, involving some compromise which was outweighed by other positive factors, whilst 13 per cent involved serious compromise on either the matching requirements or on adopters' preferences. So, most matches were rated as good, and of course this was much easier to achieve for very young children without additional needs. The more complex the children's needs, the greater the likelihood that some compromise would be needed. In the following sections, we turn our attention to how matches were identified and agreed.

Relationships between the quality of the match and outcomes

Our judgements about the quality of the match (as defined above) showed a very clear association with our categorisation of placement outcomes. Two-thirds (63 per cent) of poor matches (those with significant compromise) resulted in disruption or placements which were continuing but where their stability was threatened, while the same was true for only 5 per cent of good or fair matches. Similarly, only 31 per cent of poor matches were rated as a positive placement for the child as against 93 per cent of good or fair matches. These findings show the importance of making good matches and so we turn now to consider our findings on how good matches were made.

The availability of families for the children

The matched families for the children were identified as follows - from: the authority's own database of adopters (52 per cent); a consortium of agencies (10 per cent); in-house/regional profiling events (10 per cent); featuring children in magazines (including in the minority ethnic or faith press) (9 per cent) or in the media (2 per cent); by sending fliers to VAAs (5 per cent); from the Adoption Register (5 per cent); and in other ways for the remaining children.

Fifteen per cent of the children overall (20 per cent of those with complex/ ethnicity needs) were placed with VAAs.

The matching decisions made

How well the matched adoptive families met the children's needs

As shown in Table 1, some requirements for children (such as for the adopters to be a couple) were more readily met than others, including adopters being able to deal with the challenges of children with attachment difficulties (met for 84 per cent of children) or children's potential for mental illness later (met for 82 per cent) and matching on ethnicity (met for 66 per cent).

For nineteen children, it was clearly stated on file that some compromises might have to be made if they were to be successfully matched, whilst for another eight the researcher considered this to be necessary. The reasons why such compromise might be needed included: the number of siblings making a placement hard to find, the need to prioritise severe medical needs over ethnicity or to prioritise children's risk of later mental health problems, developmental uncertainty or learning difficulties over other issues.

Pulling all this together and using the Prospective Adopter's Report (PAR) on the adopters with whom children were matched (and including matching on ethnicity), the researchers considered that the family met the child's needs extremely well in 57 per cent of cases, fairly well with high

Table 1 The match between the stated requirements of children's needs and how far these were met by the adoptive families with whom they were matched

	Percentage of children for whom this was a requirement	Percentage of children for whom this requirement was met
For adopters to be a couple	42	100
Educational needs	17	100
Contact	63	100
Need to retain positive relationship with previous carers/relatives	38	100
Child's previous adversities	39	98
To be the youngest or only child	33	97
Personality and temperament	40	95
Health needs	20	95
Geography	66	93
Behavioural, emotional and social difficulties	38	92
To be placed with siblings	35	92
Interests, likes and dislikes	17	88
Attachment needs	41	84
Potential for mental illness	16	82
To meet religious needs	28	76
To meet language and cultural needs	32	68
Ethnicity	46	66

$N = 133$; 16 children were not matched.

priority needs having been matched in 36 per cent and not very well for 7 per cent, since at least one high priority need had not been matched. The main areas where the initial requirements for children were not met were in relation to matching on ethnicity, culture and religion. However, on the whole, these were situations where it was necessary to compromise on ethnic matching in order to make an adoptive placement at all, such as where a child had severe health needs. These ratings were made by the two authors and were based on the data about whether children's high priority needs had or had not been matched.

How well the matched children met the expressed preferences of the prospective adopters

Most children met the expressed preferences of the prospective adopters in relation to their levels of contact (bar one), gender (bar two), ethnicity or physical impairment (bar three for each), age, having health problems, a life-limiting health condition or a family history of drug or alcohol misuse (bar four for each), whether they were part of a sibling group or had emotional and behavioural difficulties (bar five for each). However, in a few cases, children were matched with adoptive parents who had expressed a preference not to take children with their particular difficulties, including children where there was developmental delay or uncertainty (four), who had a family history of mental health problems (six) or who had attachment difficulties (eight).

Using the information available on the PAR (Form F), the researchers considered the child met the preferences of the adopters extremely well (with all preferences matched) in almost two-thirds (64 per cent) of cases, fairly well with high priority preferences matched in 28 per cent and not very well, with one high priority preference compromised in 8 per cent (eight) of cases. These ratings were made by the two authors and were based on the data about whether adopters' high priority preferences had or had not been matched.

Thus, it can be seen that overall there was not much evidence of 'stretching' where 'stretching' meant that there was a wide gap between what new parents wanted and the child placed with them for adoption, here defined as one high priority adopter preference not having been met. In three of the eight cases where this had happened, the match was in fact adopter-led, that is the adopter had seen the child's profile and initiated the link (see Cousins, 2003). Nonetheless, overall there was no difference in outcomes according to whether a match was instigated by professionals or adopters.

However, we found that making very serious compromises on the adopters' preferences, without these being balanced by positives elsewhere, really did matter. In three of the eight cases of severe 'stretching', the placements had disrupted by follow-up. For the remainder, when things were really stretched (or the information provided was inadequate), the families and

children concerned faced unanticipated difficulties. For example, in one case, after a couple was identified for two siblings, a number of compromises were made: these children had a family history of mental health problems and were known to have attachment difficulties. The prospective adopters had indicated on their Adoption Placement Report that they did not feel able to deal with these issues and there had been no discussion of how they might cope with them. The children proved very difficult to manage and the couple said 'We don't feel like the children's parents'.

What helped to achieve good quality and speedy matches?
The provision of full and accurate information

A Child Permanence Report (CPR) is a comprehensive document prepared by the child's social worker. The social worker is responsible for gathering and analysing information about the child and their needs and making a recommendation about the long-term care arrangements. The CPR was presented to an Adoption panel (although many will now only go to the Agency Decision Maker) to enable a decision to be made about whether a child should be placed for adoption. Adopters and workers rely on CPRs to provide them with detailed and accurate information about a child's history and reasons for entry to care. The ability to make a good match depends critically on the provision of good quality information about the child in these CPRs and good information about the prospective adoptive family as the foundation for appropriate matching. There was clear evidence that placements where prospective adopters had not been given full information on the children (e.g. where the extent of developmental delay had not been evident in the CPR and not shared) were either very challenging to adopters or disrupted.

In practice, panels quite often found omissions or errors in CPRs and 13 per cent were returned by panels for more information. The researchers judged that only two-thirds of the CPRs (previously called Form Es) fully reflected the information on the file and some had not accurately reflected children's difficulties. For example, one adoptive mother said:

> But in [child's] first report for us, the Form E said 'He's got beautiful brown eyes'. [In fact] he's got beautiful blue eyes…. What's the point of having a physical description in a form that's so wrong?

Unless the match was made very quickly in-house, there was a need for a profile to be written on the child which would be used in profiling events or to feature the child in publications. Two-thirds of the profiles on file appeared to reflect fully the picture of the child revealed by the files, but this was only fairly true for 29 per cent and not true for 5 per cent.

The importance of full, accurate and up-to-date information on children is shown, for example, by our finding that, in over a third of the follow-up

interviews with adoptive parents, they commented on information that they had needed which they had not had. Of the photographs found on file, in 22 per cent, the researchers judged that they were either not recent or not engaging.

Making early decisions about widening the search

Making good matches also depends on being able to identify adoptive families who might meet the child's needs. This can present challenges when children have additional or complex needs. Different authorities approached this key issue in different ways.

We found that decisions to widen the search and agree expenditure for external profiling and inter-agency placements for children with complex needs (to include the use of Be My Parent or Children Who Wait or approaching VAAs) need to be made early. Some authorities made early decisions that children with more complex needs could be featured out of authority once the Placement Order was granted. In others, it was left to the family finder alone to decide whether the search needed to be widened and some would take the matter up quickly with their manager whilst others would not. When family finders were not quick to widen the search, it could be because they had concerns about how they would provide support to families who lived at a distance and/or because they thought that their authority would not be keen to spend money on using outside agencies. Some authorities tried to avoid using VAAs which appeared to attract higher costs, although Selwyn *et al.*'s (2009) study has shown that, when all the real costs are taken into account, VAA placements represent very good value for money. However, when no decision was made to widen the search or alter the requirements, a lot of time could go by with no progress being made on finding children an adoptive placement.

Using formal processes to track and review cases through the system

In addition to making an early decision to widen the search, there was a need to ensure that family finding and matching were proceeding expeditiously. Some LAs had formal processes to track and review cases through the system and some of these held Planning Meetings from the start at which a family finding strategy would be agreed (including decisions about widening the search) and the strategy was tied to deadlines, after which either it would be reviewed or the plan for the child would be reconsidered.

Formal processes to track and review cases through the system can help to avoid delay, such as when an individual worker was not undertaking a task which was holding up the process or when family finding activity was minimal (see also DfE, 2011). Such formal processes can also help to ensure that the requirements for the child are revised when necessary,

rather than leaving this to the decision of individual children's social workers, who were often reluctant to change the requirements—even in the face of long delays where no family had been found.

Making the matching decision at matching meetings and heeding panel reservations

There were variations too in how matching decisions were made. In some authorities, matching decisions were made in a formal matching meeting at which a small number of families would be discussed until the meeting came to a decision as to which family would be chosen for the child. Sometimes families were whittled down to two and both were visited, in which case the final decision would then be taken outside the matching meeting, such as by discussion between the family finder, children's social worker and their line managers. Sometimes, a matching matrix was used at these meetings (27 per cent) which set out clearly on paper and scored how well each family would be able to meet the child's needs.

Decisions about which family to proceed with were taken at formal meetings for 62 per cent of the children, in informal meetings for 15 per cent and were made by individual social workers, usually in consultation with their team managers, for 23 per cent. Making decisions about which family to match with the child at formal meetings led to better decisions than when it was done informally. In all but one of the disrupted adoptive placements, the matching decision had been taken *informally*. The advantages of formal matching meetings were shown, for example, after the breakdown of an adoptive placement of a girl with attachment difficulties who was placed at the age of four. The disruption meeting showed the deficiencies of informal decision making, since it was found that the description of the child in the CPR had been too non-specific, that there had been information on file about the child's attachment difficulties which was not used and 'it was noted that many of the people present had information about the child which was not available at the matching process'.

In addition, we found that, when panel members had expressed reservations about the match (17 per cent), outcomes were poorer—so when such reservations have been noted, the match should be reconsidered.

Why were poor matches made?
Preference for using in-house placements

Where there were compromises, this was sometimes because, after a period of delay, there was a rushed decision. But most importantly, compromises were often made because LAs preferred to make in-house placements rather than widen the search. There were significantly more poor quality

in-house matches (33 per cent) compared to inter-agency ones (18 per cent). And more poor quality matches were arranged by county authorities, suggesting that their greater use of in-house placements may sometimes have involved compromising on fully meeting children's needs. (However, while some poor quality in-house matches were made swiftly, others occurred only after an extensive search had failed to identify a suitable family.)

Not transferring case responsibility to the adoption team early

As we have seen, two authorities practised 'early transfer' of case responsibility to the adoption team. In other authorities, it was not unusual for there to be delays whilst children's social workers considered which adoptive families should be followed up. In the early transfer authorities, there were no such delays or disputes about which match to make. Importantly, we found that there were no cases of poor matches when early transfer was practised, as compared to 18 per cent among other approaches. This was a statistically significant difference showing that 'early transfer' of cases was associated with better quality matches.

This suggests that the involvement of experienced adoption workers, who do not need to defer to children's social workers - who inevitably have less experience of adoption - improves the quality of the matches made. This runs counter to the anxiety that early transfer of cases results in new workers not knowing children well enough.

The need to make some compromises in order to place children with complex needs

Some degree of incompatibility between the child's needs and the adopters' characteristics was accepted in order to achieve a match for half of the children (six) who had significant health or development problems. The other five of these eleven children with significant health or development needs (45 per cent) were not matched for adoption at all in the study time frame. Significantly more compromises were made in order to match children with moderate or highly complex needs.

Important issues insufficiently addressed or downplayed

There were also a few cases where a poor match was made because important issues had received too little attention, such as where too little attention was paid to children's developmental delay or other difficulties, either because of a sole focus on another requirement (such as the child's ethnicity or sibling placement) or because the social worker or the foster carer had downplayed these difficulties. Adoptive parents, who had not been informed of the extent

of children's difficulties and where the match with their preferences or capacity was poor, struggled to manage the children and this could lead to poor quality placements or disruption.

Delay

Nearly three-quarters of the children (71 per cent) experienced delays at some point in the adoption process (waited over eight months between last entry to care and adoption recommendation or waited over 6.5 months for a match after recommendation). Delay is prejudicial to children and can mean that their increasing age or difficulties lead to a decision that adoption will no longer be their plan. The issues of children having health or development problems, being older and being BME were, as expected, significantly associated with delay and diversion from the adoption pathway altogether. Analysis of the other reasons for delay showed that it was essential that workers were realistic about which children would be harder to place so that, if a family was not readily available in-house or through the consortium, a wider search strategy would be employed rapidly. Children's social workers often strove to find what they saw as an 'ideal' family type for children, particularly in relation to finding (heterosexual) couples. This could lead them to be unwilling to alter the requirements, even after long periods in which no match had been identified. Children were then left waiting with diminishing chances of being adopted at all.

From entry to care, BME children more frequently waited over eighteen months for a match and this was particularly marked for children aged over a year at entry to care, where 75 per cent of BME children were delayed compared with 44 per cent of white children. Two-thirds of the BME children in our sample experienced delay and the desire to find a family with a similar ethnicity was a factor in the delay for 70 per cent of them.

BME children also experienced delay when very precise requirements had been specified about ethnic matching, especially for children with complex ethnicities or problems such as developmental delay (see also Selwyn *et al.*, 2010). Successful matching on ethnicity generally involved authorities being prepared to move rapidly to widen the search beyond their in-house families, promoting children and being willing to make inter-agency placements. It also meant being realistic that it might not be possible to find an ethnically matched family when BME children had additional needs such as severe developmental/health problems.

The relationship between our practice approaches and delay

The differences in delay between our different practice approaches were not statistically significant. Nonetheless, not widening the search and instead

using in-house placements was a major source of delay. A reluctance to pursue inter-agency placements was particularly noted in county authorities as compared to smaller urban agencies. This factor was in evidence in 70 per cent of delayed cases in three counties but featured rarely in the other seven authorities. County authorities, which were more able to place in-house than other agencies, used inter-agency placements less, which led to more delay in finding placements for children with complex needs. In line with this, we found that, for children with complex needs, the time to match was significantly shorter when an inter-agency match was made.

In those authorities which used in-house profiling events as their main family finding strategy, whilst delay for children with uncomplicated needs was rare, 70 per cent of children with more complex needs were subject to delay. However, these agencies were more ambitious in trying to secure adoptive placements for hard to place children. We also found that using formal monitoring processes could assist in preventing slippage.

What helps to make a good match?

For children with straightforward needs, a number of families might provide a match. Identifying the fewer families able to parent children with complex needs requires being proactive in family finding—widening the search without delay, pursuing a number of family finding approaches concurrently (DfE, 2012a) and a willingness to revise non-essential requirements when necessary. At the same time, it is important not to compromise on the essential needs of children or on the capacity of adopters to parent a particular child.

So, in answer to the question 'Does the quality of matches matter?', the answer is a resounding 'Yes'. As we have seen, poor quality matches significantly more often had poor outcomes for children—these adoptive placements disrupted more often and were more often of poor quality.

Conclusion

The study shows that a range of factors affected the quality of matches. Good quality information about both the child and adopters was a prerequisite for successful matching and it was important that information was regularly updated and that children's difficulties were not minimised. When the reality of children's problems had not been shared with adopters or their preferences had been stretched, placements were vulnerable to disruption.

We also found that it was important to ensure that the requirements for the kind of family a child needed were as broad as possible and were subject to early review if a family was not readily found. Decisions about changing the requirements should not be left to children's social workers who have the least experience of the realities of adoption and may hold out for an

'ideal' family type in relation to family structure, ethnic matching and other issues.

Our findings showed that better matches were made when cases were transferred early to adoption teams. Where this is not done, it is important to establish formal mechanisms to broker disagreements between children's social workers and the adoption team about matters such as changing the requirements or decisions about the match and to ensure that workers with adoption experience hold responsibility for key decisions. We also found that ensuring that wherever possible decisions about 'which' family to match with were shared with a group of involved professionals at a matching meeting appeared to led to better matches, unless the case was very straightforward.

It was also very important to make early decisions about widening the search and to be proactive in searching for adoptive families and not to lose momentum when a match was difficult to achieve. It should be the case that the Family Justice Review (Ministry of Justice *et al.*, 2011) will be having a major impact on court delays, since many of its recommendations have been implemented in the 2014 Children and Families Act. Using formal monitoring processes to track and review cases was also very helpful (see also DfE, 2012a; Thomas, 2013). The study also showed that LAs which used in-house profiling as their primary family finding strategy had more delays when placing children with complex needs, since children had to await their quite widely spaced events with no other family finding activity taking place.

The study found evidence of a great deal of dedicated and effective work at every stage of the adoption process. Nonetheless, some poor matches were made and there were widespread delays at each stage of the process. A number of our findings have been drawn on in the development of government policy for adoption in England (DfE, 2012b, 2013). It is to be hoped that authorities and adoption agencies will incorporate the changes suggested by these findings in order to improve the quality of the matches they make and reduce delay. This should help to ensure that more adoptions are made and that the children who are placed are really well matched with their new parents.

Acknowledgements

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