

A Qualitative Inquiry of International Adoptees in Schools

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Abstract

The purpose of this pilot study was to explore families of international adoption experiences within the schools. Qualitative methodology and grounded theory procedures were used to analyze data collected from semi-structured interviews conducted with three mothers who had adopted 8 children from orphanages in China. The concept of *lack of structural support within schools* emerged as the central organizing theme emblematic of mothers' experiences as they each struggled to obtain supportive educational environments for their post-institutional children. Implications for school counseling practices are discussed.

Keywords: international adoption, school counseling, grounded theory

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The ASCA National Model calls upon school counselors to spearhead efforts in school reform by designing interventions and programs that support educational equity and access for the entirety of the student body (ASCA, 2012). This ambitious goal can be addressed, in part, from the unique vantage point occupied by school counselors that permits them to track students' achievement over time and to use data to design responsive services for underrepresented populations. Nonetheless, as schools increase in diversity and complexity, school counselors will be challenged to understand the issues and educational barriers impacting an array of student populations. This article focuses on the small, albeit distinct, population of internationally adopted (IA) children whose academic and social adjustment to school settings is often impaired due to complicated histories of institutionalization (Gindis, 2008), physical and emotional neglect (Weitzman & Albers, 2005), and language attrition (Dalen, 2001; Glennen, 2002). While the extant knowledge is limited, researchers have found that international adoptees often require school based services, yet they may not be responsive to formal methods of evaluation, customary classifications, or traditional remediation (Gindis, 2009). To date the school counseling literature has not examined the population of (IA) children, which in turn limits school counselors' knowledge and ability to serve as effective advocates for these children. This paper presents results from a pilot qualitative inquiry of IA children's experiences within schools, as narrated by their parents, with the aim of fostering school counselors understanding and strengthening their ability to empower this often misunderstood population.

International adoption, also referred to as inter-country adoption, is the legal permanent adoption of a child from a country abroad (U.S. Department of State, 2011). Over the past 30 years, over 250,000 children have been adopted from countries outside of the U.S. (Wilson, Weaver, Craddock, & Kuebli, 2007). The majority of international adoptions occur from developing to Western countries, with (in descending order) China, Ethiopia, Russia, South Korea, Ukraine, and India, dominating the supply of orphans to the United States and Europe (Centers for Disease Control and Prevention, 2012). Over 60% of international adoptees come from state-run orphanages or health centers where conditions of deprivation, poor nutrition, substandard healthcare (Gindis, 2005; Groze & Rosenthal, 1993), and deficient education exist (Dole, 2005; Gindis, 2009).

Researchers have indicated that stark conditions, characteristic of children's early years, unites IA children in developmental tendencies that distinguishes them from domestically adopted children, foster care children, and students for whom English is a second language (Dalen, 2001; Gindis, 2005; Gindis, 2009; Glennen, 2002; Weitzman & Albers, 2005). Over the past decade an increasing number of IA children have been special needs adoptions, with conditions spanning from highly correctable cleft lips and palates to non-correctable congenital heart disease, missing or malformed limbs, to impaired vision or hearing (CDC, 2012). The risk factors presented by children's physical disabilities are often increased by the age of adoption as over 85% occur after the child's first year (Wilson et al., 2007). Because physical neglect is often accompanied by emotional neglect, researchers have found a strong association

between length of time in an orphanage and the development of emotional behavioral problems (Gindis, 2009).

Experiences of emotional deprivation cause the prevalence of attachment disorders (Lancaster & Nelson, 2009; Zeanah, 2000), cognitive delays, behavioral deficits (Glennen, 2002), and elevated cortisol levels associated with post-traumatic stress disorder (Gunnar, Morrison, Chrisholm, & Schuder, 2001). Researchers have reported higher rates of attention deficit hyperactive disorder among international adoptees when compared to children from the majority population (Dalen, 2001; Glennen & Bright, 2005; Lindblad, Ringback Weitoft, & Hjern, 2010). In addition to experiencing elevated rates of ADHD, researchers have also noted the prevalence of institutional autism among IA children (Gindis, 2008). Institutional autism presents symptoms akin to organic autism but develops as a consequence of severe neglect, with strikingly high rates being found among those children adopted from orphanages in Eastern Europe (Gindis, 2008; Johnson, 2001; Rojewski, Shapiro, & Shapiro, 2000).

In addition to the physical and psychological scarring, a more profound discovery in the field of IA is the rapidity with which post-institutional children lose their native tongue (Roseberry-McKibben, 2002; Schmid, 2002). The actual rate of language attrition is mediated by age and individual differences among adoptees, but none are fully exempt from the effects of cumulative cognitive deficit, communication regression, and functional mutism (Gindis, 2005). Therefore, IA children are seldom bilingual; they enter the country as monolingual and after several months are monolingual again (Dalen, 2001, Glennen, 2002). Moreover, children's inability to verbally communicate, subsequent to adoption, has been found to coincide with notable spikes in post-

institutional behavior and may contribute to substantive regression (Gindis, 2005). Pertinent to this paper are the challenges IA children face in their enrollment in the formal education system while adjusting to their new socio-cultural environment and learning a new language.

Despite the high incidence of developmental disorders among IA children, access to special programs within the schools is often restricted due to an absence of appropriate assessment instruments (Gindis, 2008). For instance, English language tests yield unreliable results, especially if administered too early in the language learning process (Dole, 2005; Glennen & Bright, 2005). Conversely, home language instruments do not provide a simple alternative, as results can be obscured by the effect of IA children's rapid language attrition (Glennen, 2002). The inadequacies of traditional assessment measures has reportedly contributed to a notable spike in type 2 errors, whereby IA children with underlying disabilities are not diagnosed and thus do not qualify for needed services (Zehr, 2004). Although IA children that commence school without full English proficiency are designated as limited English proficient (LEP) and receive federally mandated services, these programs often fall short of addressing their underlying cognitive differences (Dole, 2005; Glennen & Bright, 2005). Moreover, the language learning process has been found to take significantly longer among populations, such as IA children, experiencing a language void due to first language attrition (Gindis, 2005). Thus, IA children's academic achievement can be stymied by their limited language skills that preclude them from accessing the formal curriculum; consequently they may fall quickly behind and struggle to bridge an achievement gap that expands with the passage of each grade level (Glennen, 2002).

Purpose of the Study

IA children represent a small but burgeoning population, for whom school-based professionals may have little or no expert knowledge (Gindis, 2009). Studies exploring IA children's adaption to school systems are few in number. However, available knowledge indicates that IA children have complicated physical and mental health profiles (Dole, 2005; Gindis, 2005; Groze & Rosenthal, 1993) that are often misunderstood and consequently overlooked within school systems (Gindis, 2009; Lancaster & Nelson, 2009). The purpose of this pilot study was to increase school counselor understanding of IA children's experiences within schools, thereby strengthening school counselors' ability to serve as advocates for IA children. Pilot studies are useful when very little data exist to explain a particular phenomenon (Patton, 2002). Given the absence of studies, the research questions were framed to elicit a comprehensive depiction of IA children's interactions within schools. First: How do IA children adjust to school setting? Second: What is the nature of IA parents' interactions within public schools systems?

School counselors were excluded as the central foci of the research questions. Exploring the phenomena through a school counseling lens may have restricted the dialogue, and thereby limited the emergence of a broader understanding. Furthermore, school counselors occupy a systemic position in the schools and can impact student adjustment by engaging stakeholders at multiple levels (Holcomb-McCoy, 2007). Thus, by understanding IA children's broad-based experiences, school counselors can identify system-wide barriers that may interfere with student achievement, and design

interventions that impact children's psychosocial and academic wellbeing in different contexts across the school.

Method

Grounded theory (GT) was selected as the conceptual apparatus for data collection and analysis. GT is a systematic approach to qualitative inquiry that strives to illuminate common underpinnings of human behavior (Glaser, 1998). This is achieved by elucidating a central organizing theme, via the mutual processes of theoretical sampling and constant comparison methodology that relates sub-themes and serves as a theoretical explanation for human experience in a substantive area (Glaser & Strauss, 1967). GT can be considered a congruent methodology for the current study as researchers sought to generate a tentative theory of participants' experience in a substantive area, specifically the central experiences of IA children within schools settings.

Researcher Bias

In qualitative inquiry the researcher is the primary instrument in all aspects of the study from inception to culmination, as such personal bias is inherent to the qualitative process. The current authors followed Patton's recommendation (2002) to engage reflexive thinking (Patton; 2002) and memoing to develop an awareness of how our a priori experiences and belief systems influenced our research design, data gathering and interpretation process. To briefly summarize our background, the first author has conducted a previous qualitative study with IA population and was motivated to conduct the current inquiry from a dominant theme that emerged from the earlier research illuminating barriers within school settings (Lancaster & Nelson, 2009). The first author

is a former school counselor and middle school teacher with a strong working knowledge of school systems and special populations. The second author is an international doctoral student currently enrolled in a counseling psychology program who possessed no a priori knowledge of IA populations or of U.S. school systems. Researcher methodology for reducing bias is further delineated in the data analysis section.

Participants

Participants were sought through purposive snowball sampling, a procedure that permits researchers to identify a theoretically driven sample and encourages participants to nominate other information rich informants (Patton, 2002). For the purposes of this study the primary investigator sought participants who had adopted at least one child from a Chinese orphanage above the age of 6 months, and for the child or children to be currently enrolled in the public school system. Based on these criteria we identified 3 mothers willing to participate in the study who had adopted a total of 8 children from orphanages in China. The mothers were Caucasian, middle class professional women, one was in her mid-forties and two were in their early fifties. All participants resided across three states in the southern U.S. and IRB guidelines were followed to protect participant welfare and anonymity. As such, no further descriptive data will be provided and all names cited throughout have been changed to mask participant identity.

Procedures

The mothers were interviewed on three occasions using semi-structured interview questions this format helped to create consistency across participants, yet

permitted the exploration of the dimensions of individual experience and conduct thematic sampling as our understanding developed (Lincoln & Guba, 1985). In an effort to reduce prematurely forcing theory (Glaser, 1998), neutral questions were developed for the first round of interviews, notably free of previous insight:

- Tell me about your child's adjustment to the school setting;
- Identify the challenges your children have encountered;
- Tell me about your role in the school;
- Discuss your communication experiences with school personnel; and
- Is there anything else you can tell me about your experience that you have not already shared?

In subsequent interviews, the process of theoretical sampling narrowed the foci to explore relevance and dimensions of emergent themes (Glaser). Due to the participants' geographical disparity the interviews were conducted via phone calls. Each interview lasted approximately 1 hour and was tape-recorded, transcribed, and a copy was returned to the participants to verify for accuracy and provide feedback.

Data analysis

Glaser & Straus's (1967) GT model was used as it provides clear incremental steps for data coding and analysis, moving from a concrete to an increasingly conceptual level of analysis. During the first level of codification line-by-line notations were made of the verbatim interview, summarizing content and reflecting on participants' meaning. At the second level we endeavored to identify patterns in the brief summaries and began clustering them into categories. By the third level of coding, we compared tentative categories across participants. Categories at this level remained highly malleable and many were subsumed into axial categories to better account for the orbit of data around a particular concept (Glaser & Strauss, 1967). The process of

theoretical sampling was used to further develop themes as participants were invited to comment and discuss the applicability of emergent themes relevant to their experience. Trustworthiness was achieved through theoretical saturation in the data gathering process, member checking, and correspondence of themes to the wider literature (Dalen, 2005; Gindis, 2005; Gindis, 2008; Gindis, 2009; Glennen & Bright, 2005). Although the data analysis process has been described in linear terms, in reality the evolution of data into meaningful themes involved a fluid process of rearrangement and refinement based on reflections and participant feedback.

The Families

The individuals involved in the study comprised of three mothers (Mary, Emily, and Anna) who collectively adopted eight children from orphanages in China. Mary and Emily were married whereas Anna adopted as a single parent and identified herself as a single mother at the time of the study. Mary adopted two daughters, Mai & Jade, out of birth order, at the ages of 6 and 11 respectively. Similarly Anna adopted her first child Jenny at the age of 6 months, and later adopted Lee, also age 11 at the time of her adoption. Emily was single when she adopted 8 month-old Sue Yen. Subsequently she married and returned to China with her husband to adopt 2 year-old Kim, and again a year later to adopt 2 boys, Sam aged 4 and Tom aged 3.

The children in this study have heterogeneously experienced the indelible effects of orphanage life; however, the severest psychological scarring seems to correlate with the child's duration of stay and extent of privation. Six out of the eight children in this study have persistent special needs both physical and psychological in nature. Mary's daughter Jade had a speech disorder resulting from cleft pallet and profound trust

issues related to early parental rejection and subsequent institutionalization. Her other daughter Mai, has been diagnosed with ADHD and continues to exhibit residual signs of attachment disorder. Anna's daughter Lee is developmentally delayed and has been diagnosed with Cerebral Palsy. Emily's two boys have visual impairments and Tom also suffers from severe attachment disorder, while her second daughter Kim receives speech services also resulting from cleft pallet.

Results

Central Organizing Theme: Lack of Structural Support

Because IA populations constitute a tiny minority from a systemic perspective, schools do not have programs to readily accommodate and remediate their inimitable needs, symptomatic of institutionalization and language attrition. The notion that schools lack systemic structures to absorb IA populations emerged as the central organizing theme that explains the lack of fit between children's academic and psychological needs and extant programs within school systems. Table 1 summarizes the central organizing theme along with additional themes and sub-themes.

Table 1

Grounded Theory of International Adoptees in Schools

Central Organizing Theme: Lack of Structural Support		
Theme 1: Weak Programs & Partnerships	Theme 2: Barriers to Learning	Theme 3: Transcending Barriers
ESL: A shadow without substance	Cognitive and developmental delays	Advocacy
Parents & schools: Incongruent partnerships	Cultural conceptual differences	Tenacity
	Attachment disorders	Incremental success

Note. The supporting themes are denoted on the column beneath the main themes. The vertical arrangement of supporting themes does not reflect hierarchal ranking.

Although schools did endeavor to expeditiously channel children into English as a second language (ESL) programs to address their language gaps, and special education to accommodate their physical disabilities, the parents all noted that their children's schools were hesitant to screen their children for underlying cognitive disorders due to their status as English language I. The tendency among school officials to attribute IA children's cognitive delays to the language acquisition process, had, according to the mothers in this study, served as a barrier to their children receiving intensive services.

Theme 1. Weak Programs and Partnerships

ESL: A shadow without substance. At the time of the study, five of the children were designated as LEP and were receiving language support services. School districts are federally mandated to provide educational services that support students' second language development. Nonetheless, the nature of programs is articulated by local districts and varies widely across districts, regions, and states (Zehr, 2004). The provincial nature of services provided under the umbrella of LEP is reflected in the study. Anna's school district offers bi-lingual Chinese education and her daughter Lee benefits through enrollment in a half day Chinese immersion program. By contrast, Mary's children receive ESL, an English immersion program that pairs LEP students with teachers certified in language acquisition strategies in core content area classes.

Mothers' narratives illustrate how their children's unique cognitive profiles distinguish them from the wider population of LEP students. Specifically the combined effects of language attrition, institutionalization, attachment disorders, and developmental delays marginalized their children in schools settings and could not be

remediated through targeting their language gaps in isolation. Mary describes the ESL services offered to her girls as a “total disaster- they’re in a class with one teacher and thirty other kids with no support. All the federal money goes to bi-lingual education...so the schools have the attitude you got these kids now you’re on your own.” Even Anna, whose daughter, Lee, is in an optimum program that supports home language maintenance, described it as insufficient to meet her daughter’s cognitive and developmental needs. Unfortunately, parents’ requests for more intense academic support were frequently rebuked because the children were receiving LEP services. “I was trying to get her qualified for special ed., because she was so delayed and they kept saying ‘no, no, no’ because of the ESL problem”- Anna.

Parents and schools: Incongruent partnerships. The mothers in this study are typical of the wider population of IA parents, to the extent they are well educated and possess knowledge and understanding of their children’s background and needs that is rarely matched by school personnel (Gindis, 2005). Parents reported that they initially expected their children’s schools to be receptive to their input and mutually committed to designing equitable educational environments for their children. These anticipated partnerships never emerged, and instead parents encountered a wall of resistance as school personnel refused to attribute children’s academic delay to factors external to the language learning process. Mary described participating in multiple meetings with school personnel, including school counselors, as she sought to obtain more intensive programs and academic accommodations for her girls, in which she witnessed the “wall of rhetoric go up”- “we can’t do anything until they learn more English.”

Theme 2. Barriers to Adjustment

Cognitive and developmental delays. The most pronounced barrier affecting the older children's transition into the school settings was language difference; however, this obstruction was compounded by cognitive and developmental deprivation inherent to institutional life. Children's experiences in the schools are best understood in the context of their institutionalization. Adopted at the age of 11, orphanage records indicate that Lee had only participated in one year of formal education and her Chinese language skills were noted by caregivers in China as being at 'play ground level'. Anna suggests that Lee displayed signs of institutional autism, including lack of eye contact, emotional response, and rigid behavior patterns. Despite Lee's manifesting cognitive and developmental delays, her only official diagnosis upon arrival from China was hip dysplasia, and as a result her school insisted on placing her in 5th grade, refusing to consider that her academic needs were beyond the scope of the schools bi-lingual education program.

They put her in 5th grade because of her age but she had only had one year of school in China, she was very tiny - I said let's put her in 3rd grade - you know- what's the difference? She was very tiny. She walked into that school and the Chinese teacher asked her what grade are you in and she was proud, I can understand this in Chinese - she said "I'm in first grade" (in Chinese) - Then they put her in 5th.

Mothers reported the deprivation children experienced within their orphanages created developmental breaches that precluded them from functioning academically or socially with their age/grade level peers. Mary commented that her daughters, Mai and

Jade, blended in with younger children and she successfully convinced their schools to place both girls two grade levels below their chronological ages. Nonetheless, Mary, found that placing her children below grade level was not a simple panacea to address the complexity of factors affecting them in school settings. Deprived of essential early learning experiences during her 6 years in the orphanage, Mai, who is now in junior high, continues to struggle to grasp abstract concepts in English and Math and is falling increasingly behind as schoolwork has become more cognitively demanding. “Mai she just doesn’t get it. She works really hard and does all her work but you ask her to explain something or make an inference-she doesn’t understand what you are asking.”

Emily’s boys were pre-school age at the time of their adoption, and thus commenced school with their peer group. Yet, as kindergarteners they struggled to participate in play-based tasks and interactions. Although Sam and Tom were adopted from different orphanages the boys’ institutional life was characterized by structure and austerity, offering limited exposure to toys or free-play. At home Emily witnessed her boys struggle to entertain themselves during down time and she frequently relied on her older daughters to model and engage the boys in developmentally appropriate activities. In the school setting, the boys’ teachers reported that center-based instruction, a cornerstone of early elementary instruction, was difficult for the boys as it lacked rigid structure and required self-direction “The boys really struggle with centers- Sam just sits there looking lost waiting for someone to come and organize him.”

Cultural, conceptual differences. Profound differences in culturally and linguistic knowledge systems have also impeded the older children’s academic progress. Similar to Lee, Jade was also adopted at age 11; however, she had attended

school in China since kindergarten. Nonetheless, the content of the curriculum, in addition to the language, was so markedly different from China that she struggled to integrate new concepts into her prior knowledge systems. For instance Jade had no exposure to science or Western measurement systems prior to entering the US school system in 5th grade. Mary suggested that science and math classes were akin to “learning a foreign language on top of a foreign language.” Social studies proved to be equally baffling as Jade had no frame of reference to make sense of the curriculum. Mary recalled emailing her social studies teacher querying the value of a writing assignment that required Jade to imagine she was a cowgirl in the historic West. “So I emailed the teacher, and it was kind of funny, because I asked him, what does she know of cowboys and Indians? Perhaps she could write about Chinese warlords and peasants instead!” Anna noted that Lee struggled to comprehend basic scientific concepts, and also possessed a very limited understanding of Western spatial-time constructs. “We were at the doctor’s office the other day and he asks her how long she’d been here (in the US) because her English is getting so good- and it’s been like years- and she says two weeks-and it’s the same with distance stuff.”

Attachment disorders. In addition to cognitive and developmental delays and cultural-conceptual differences, children’s attachment issues also manifested in school settings. Attachment disorders occur in two clinically noted patterns, inhibited and disinhibited and manifest along a spectrum of externalizing and internalizing behaviors (Weitzmen & Alber, 2005). Within the current study, mothers have witnessed their children display a range of attachment related behaviors including social exhibitionism and withdrawal, indiscriminate affect to strangers, manipulation, and lying. Mai’s

attachment disorder has often manifested in charming and lovable behaviors, a strategy that yields her a constant stream of positive adult attention. An insidious aspect of Mai's behavior has been her attempts to attach to strangers, even going as far as to hold hands and sit on laps of random adults. Mary recollects calling a meeting with Mai's teachers and counselor to develop a consistent plan for responding to Mai's diffuse boundary issues. During this meeting Mary requested that the school establish clear boundaries around physical contact in an effort to weaken her attachment triggered behaviors. According to Mary, the teachers and counselor dismissed the notion that Mai's behaviors were attachment related and Mary departed feeling vilified and unsupported. "I left that meeting feeling like the bad guy- how could she be so mean to that poor adopted little girl."

Parents reported that school officials have been resistant to consider the manifestation and function of attachment related behaviors in school settings. Tom was undoubtedly abused during his three years in the orphanage; when Emily and her husband received him from the orphanage he was covered in bruises, had fractured bones, and rickets. Although the physical wounds healed quickly, Tom has profound mistrust of caregivers and is not attached to Emily. At home Tom is disrespectful, physically aggressive, and shows signs of dissociation. Interestingly, Tom reserves his anti-social behavior for his parents, as Emily describes Tom as charismatic and well behaved towards adults that he is not required to depend upon. While Tom positively regards his teachers, and has adapted well in school, his attachment is not expressed emotionally. Tom is able to use his charm as tool of manipulation, to the extent he persuaded his teacher that his mother was abusive, a deceit that resulted in a home

visit from the Department of Child Protective Services. Mothers have been proactive in addressing their children's attachment disorders that includes on-going therapy; however, the failure of school personnel to acknowledge the influence of attachment issues in the children's school adjustment has ultimately supported children's attachment patterns and interfered with parents' treatment efforts.

Theme 3. Transcending Barriers

Advocacy. The mothers in this study were educated and sensitized to the issues affecting their children, and understood that positive outcomes would not occur through simply waiting for their children to catch up. Advocacy was a dominant theme that reflected parents' commitment to obtaining appropriate educational opportunities for their children. In response to the school's dismissive approach they adopted a battle-like stance, employing multiple strategies and utilizing all of their resources to advocate for their children. Parents have expressed feeling fortunate that they have been able to use their professional background to navigate the official school vernacular: Both Mary and Anna are teachers, and Emily is a non-practicing lawyer. Anna was determined to have Lee placed in a grade more appropriate for her developmental level. Although she participated in multiple meetings in which school officials agreed to remove her from 5th grade and place her in 3rd grade, the change never occurred. Ultimately Anna filed a grievance against the school and won, and as a result Lee was moved down to 4th grade at the start of the following school year.

We had all these meetings and all the teachers said 3rd would be good and the principal said OK and then it didn't happen. And then I have to have all these meetings again- about three rounds of this, "Oh we're going to do this"... and it

never happening- “We’re going to switch her at Christmas time,” and then it never happened...physically, emotionally she is younger than the kids who are three years younger than her. Anyway I had to do a grievance process.

Mary too had used her insight into school systems as a strategic advantage to obtain help for her girls. She expressed feeling fear the year Mai was due to take her first statewide test, as she knew Mai’s formal language skills were under-developed, and expected this to be reflected in failing test scores, yet her school offered no remediation. After emotionally venting to the school counselor, Mary was able to secure Mai a placement in a remedial reading program. Although the emotion stemmed from deep frustration, Mary also understood that emotive outbursts often yielded results for parents in school settings.

I know how to work the system, which was to prostrate myself upon the counselor- which is terrible but at least I had an understanding of how to get support for Mai. The teachers can’t do it by themselves. I had to cry to the counselor at the elementary and then she finally put her in a special reading program. Even with that in place she barely passed the state test by six points- So if I hadn’t gotten her in this reading program...

Emily had also adopted a proactive stance to ensure her children got the help they needed. Sam and Tom both have visual impairments that qualified them for special education services upon entry to school. Although Tom could read with corrective lenses he could only do so by holding books at an awkward angle and would fatigue quickly. Emily felt that Tom should learn Braille to make reading more accessible, yet his school district refused to consider this an option. This situation resolved itself as they

moved states and upon entry to his new school, special education personnel automatically offered Tom instruction in Braille. Emily continues to push for services, as she believes Tom needs academic assistance that surpasses one hour of instruction in Braille per week. Emily's acknowledgement of the uphill battle she faces in her interactions with the schools was epitomized as she reflected on Tom's upcoming IEP meeting, "it's going to get ugly - I hate having to be this way, but that's the only way things get done."

Tenacity. Tenacity is strongly associated with the advocacy sub-theme; however, it reflects parents' unyielding commitment to support their children and refusal to accept unsatisfactory decisions and ineffective programs. The mothers were able use their education and knowledge of school systems as a lever in their role as advocates for their children within the schools. However, they encountered school systems that were not set up to accommodate IA children and parents have used their own financial resources to compensate for limited school support. In an effort to bridge their children's learning gaps, Mary and Emily spend considerable amounts each month on private tuition for their children. Anna had to circumnavigate the school system to obtain special education services for Lee within her school. Based on her experience and knowledge as a special education teacher, Anna knew that Lee's struggles transcended the language barrier, and was tenacious in her mission to secure appropriate services. To that end Anna located a cognitive assessment that Lee had taken in Chinese the year prior to her adoption, and paid a substantial fee to have the assessment translated. The test results revealed Lee experienced considerable cognitive delays in her home language and based on this document Anna was able to secure special education

services for Lee that addressed her learning disabilities. Subsequently, Lee was placed in resource classes for English and math, and special education support classes in science and social studies.

Incremental success. The mothers in this study have served as advocates for their children within the schools, utilizing their educational, personal, and financial resources to transcend the barriers they encountered. Confronted by school systems that were not structurally prepared to absorb IA children, their tenacity proved pivotal to their children's successful school adjustment. The parents reported that overall their children are doing well in school. Sam and Tom continue to receive special education services for their visual impairment and are keeping up with grade level peers through instructional accommodations. Despite Mai's struggles she's on the A-B honor roll, a success her mother attributes to Mai's hard work, optimism, and intensive tutoring schedule. Her sister is experiencing similar progress: With her mother's help Jade secured a place at a small college preparatory high school for at-risk students, and while she finds the writing assignments particularly challenging her strong work ethic and school's supportive programming propel her forward. Lee continues to make remarkable progress with the assistance of special education services to address her physical and cognitive challenges. Nonetheless the mothers all conveyed their intention of maintaining a close involvement in their children's education. Essentially, they felt that if they go away so too will the assistance.

Discussion

The dearth in the research in the area of international adoptions has limited many professionals' understanding of IA children's experiences within schools. This study

explored IA children's adjustment to school environments from the perspective of three mothers. In essence, the results demonstrate the misalignment of children's educational needs with the current array of programs and policy. That the children continued to need academic accommodations several years after entering school settings also illuminates the incapacitating effects of first language attrition on academic achievement. The study called attention to the designation of IA children as LEP, and servicing them accordingly, without consideration of how institutionalization, language loss, and attachment disorders create educational needs that exceed what can be offered under the relatively narrow diameter of the LEP umbrella.

School counselors were only peripherally mentioned by the participants and, thus, were not identified as school allies. Moreover, school counselors' responses to the mothers' request for further assistance demonstrated a lack of knowledge regarding the issues encountered by IA children. Nonetheless, the results provide information for school counselors to use as they develop an emerging understanding of the challenges encountered by IA students as they adjust to school life. The results also demonstrate a need for system-level advocacy (Lewis, Arnold, House, Toperek, 2003) and school-based leadership.

Results call attention to these children's social and developmental delays that obstructed them from successfully adjusting to their chronological grade level. Thus, a major educational implication of the current study is that grade placement based on the country of origin of an IA child does not correspond to the equivalent grade in the U.S. This finding underscores these mothers' efforts to secure placements that matched their children's developmental stage versus their chronological age. Given this finding

alignment to other studies exploring adjustment challenges faced by IA children (Lancaster & Nelson, 2009; Gindis, 2009), school counselors may want to join with parents in support of their efforts to place children by development and academic ability.

Prudent placements, which take into account children's level of cognitive, academic, and social functioning should also be accompanied by early assessment conducted within the schools close to the child's arrival. Most notably, early assessment of academic ability would permit children to be assessed in their home language, before native language attrition and second language acquisition invalidate assessment results. Children in the study faced a variety of educational barriers, yet they did not represent a homogenous group of learners: Lee manifested significant cognitive delay and required special education; conversely the other children responded to scaffolded instruction, teaching inference, and simply time to catch-up. Therefore an initial assessment on arrival is crucial for international adoptee's appropriate placement and identification of short and long terms educational supports. Similarly school counselors can advocate on behalf of IA children by directing stakeholders to consider early assessment in the light of research, which has highlighted the adverse effects of procrastinating educational decision-making for IA children (Dole, 2005; Glennen & Bright, 2005).

In many respects school counselors may be aided in their pioneering efforts to advocate for IA children by the ascent of Response to Intervention (RTI). RTI offers a comprehensive approach for identifying students at risk for poor educational outcomes and providing timely remediation though implementing evidence based practices (Ryan, Kaffenberger, & Carroll, 2011). In the context of RTI, all struggling students are

identified early in the school year through performance data derived from universally administered assessment. Once identified students receive targeted intervention and are monitored by RTI teams. Interventions are subsequently intensified, maintained, or desisted in accordance with the student's response to intervention. Although, RTI does not oblige schools to screen students for academic issues using native language assessments, the model does afford school counselors the tools to advocate for IA children by expeditiously connecting them to interventions at an appropriate level of intensity.

While new screening and pre-referral systems may strengthen prevention services, school counselors can support IA children's adjustment through encouraging their teachers to consider strategies for promoting inclusion. All the older adoptees lacked a frame of reference to make sense of curricula concepts related to measurement, time, and history. Teachers could lessen confusion by modifying culturally laden assignments and lessons, providing precise, jargon free, instructions, monitoring their language usage, and frequently checking for understanding. Outside the classroom school counselors could work with IA children individually and in small groups, to normalize the context of their educational struggles, and assist them to develop the self-advocacy skills to seek help when they encounter mystifying concepts.

Perhaps harder to address is the underlying cognitive delays that beset many of the children. Conditions of physical and emotional neglect experienced by many IA children can have deleterious implications for their brain development and overall functioning. Research from the field of psychoneurology is beginning to demonstrate how the human brain is affected by environmental conditions especially during the

critical years of infancy and early childhood (Munns, 2007). These studies contribute to intervention planning by highlighting the need to support the development of children's cognitive and sensory foundation through integrated approaches (Gindis, 2009). Specifically, treatment plans that blend play therapy with speech, occupational, and physical therapy may promote healthy development among populations, such as IA children, who have a history of physical and emotional neglect (DiPasquale, 2007). Because IA children frequently qualify for special education due to speech-language disorders or physical disabilities IEP meetings may provide an ideal setting for designing inter-disciplinary plans that address the needs of the whole child. The purpose of an IEP is to individualize the educational environment pertinent to a child's unique needs. School counselors could expand the dialogue among team members to ensure that all constituents consider an IA child's institutional experiences, degree of language loss, and cognitive development, relative to the child's level of functioning in a school setting.

Understanding the implications of attachment disorders is also central component of an integrated approach. In particular, the mother's narratives drew attention to the manifestation of their children's attachment related behaviors in schools. Attachment disorders are associated with the absence of a primary care giver during infancy and early childhood (Bowlby, 1969), and have been found to be widespread among IA children, particularly those adopted over the age of six months (Zeanah, 2000). The adoptees in this study had not departed their institutions unscathed, and their academic and developmental delays underscored moderate to severe attachment disorders. In contrast to other populations of IA children who exhibit anti-social

attachment behaviors at school (Hoksbergen, Laak, Rijk, Corvan, & Stoutjesdijk, 2005), the children in this study were compliant and hard working. However, complicity and teacher pleasing behaviors were symptomatic of the children's institutional survival strategies. School counselors can support student adjustment by collaborating with parents to identify manifestations of attachment born behaviors and develop plans to create clear boundaries across school and home settings. Once again, school counselors can provide leadership and advocacy by educating school personnel on attachment disorders and ensuring that target behavior plans are being consistently implemented.

Limitations

The small sample size of this pilot research inherently restricts the generalizability of results from this study to the wider population of IA families. The results are further limited by purposive sampling of families who had adopted children exclusively from China, to the extent that their experiences within schools may not parallel those families who have adopted from other countries around the world. Although the mothers within this study were scattered across three southern states and ascribed similar meaning to their interactions with school systems and personnel, one cannot infer that parents across other regions and states encountered similar experiences. Likewise, differing school districts outside the radar of this inquiry may have instituted more comprehensive strategies for absorbing IA populations into their school programs that simultaneously address legal mandates and children's manifest needs. Future research could enhance applicability of results by increasing both the size and heterogeneity of the sample.

Despite the limitation of pilot research, the high degree of convergence in mothers' narratives rendered the substantive theme of school systems structural inadequacy to accommodate IA populations. This central theme, in turn, explained school systems hesitant response to targeting children's cognitive needs, and the subsequent confrontational approach fostered by the mothers to obtain more intensive services for their children. Moreover, the results illustrate the need for school-based advocacy and leadership to ensure that school stakeholders can recognize the array of issues that may arise as IA children assimilate into U.S. schools. From a prevention perspective, the study offers preliminary material that can be used to develop a multi-level approach in an effort to minimize the psychological and educational barriers that have appeared to impeded IA children's adjustment.

References

- American School Counselor Association (2012). *The ASCA National Model: A framework for school counseling programs-third edition*. Alexandria, VA: Author.
- Bowlby J. (1969). *Attachment. Attachment and loss. Vol. 1. Loss*. New York: Basic Books.
- Centers for Disease Control and Prevention. (2012). *International adoption*. Retrieved from <http://wwwnc.cdc.gov/travel/yellowbook/2014/chapter-7-international-travel-infants->
- Dalen, M. (2001). *The state of knowledge of foreign adoptions*. Retrieved from <http://www.comeunity.com/adoption/adopt/research.html>
- DiPasquale, L. (2007). The Marschak Interaction Method. In E. Munns (Ed.), *Theraplay: Innovations in attachment-enhancing play therapy* (pp.27-55). Lanhan: MD: Rowman & Littlefield Publishers, Inc.
- Dole, N. K. (2005). Education and internationally adopted children: working collaboratively with schools. *Pediatric Clinicians of North America*, 52, 1445-1461. doi:10.1016/j.pcl.2005.06.007
- Gindis, B. (2005). Cognitive, language and educational issues of children adopted from overseas orphanages. *Journal of Cognitive Education and Psychology*, 4(3), 290-315.
- Gindis, B. (2008). Institutional autism in children adopted internationally: Myth or reality? *International Journal of Special Education*, 23, 3, 118-123.
- Gindis, B. (2009). Children left behind: International adoptees in our schools. *Adoption Today*, 42-45.

- Glaser, B. G., & Strauss, A. (1967). *The discovery of grounded theory*. Chicago, IL: Aldine.
- Glaser, B. G. (1998). *Doing grounded theory: Issues and discussions*. Mill Valley, CA: Sociology Press.
- Glennen, S. (2002). Language development and delay in internationally adopted infants and toddlers: A review. *American Journal of Speech, Language Pathology*, 11, 4, 333-339. doi:10.1044/1058-0360 (2002/038)
- Glennen, S. L. & Bright, B. J. (2005). Five years later: language in school-age internationally adopted children. *Seminars in Speech and Language*, 26, 86-101.
- Groze, V., & Rosenthal, J. A. (1993). Attachment theory and the adoption of children with special needs. *Social Work Research and Abstracts*, 29, 5-13.
- Gunnar, M. R., Morison, S. J., Chrisholm, K., & Schuder, M. (2001). Salivary cortisol levels in children adopted from Romanian orphanages. *Development and Psychopathology*, 13, 611-628.
- Hoksbergen, R., ter Laak, J., Rijk, K., Corvan, D., & Stoutjesdijk, F. (2005). Post-institutional autistic syndrome in Romanian adoptees. *Journal of Autism and Developmental Disorders*, 35, 5-35. doi:10.1007/s10803-005-0005-x
- Holcomb-McCoy, C. (2007). *School counseling to close the achievement gap: A framework for success*. Thousand Oak, CA: Corwin Press.
- Johnson, D. E. (2001). International adoption: New kids, new challenges. *Pediatrics Basics*, 94, 16-28.
- Lancaster, C., & Nelson, K. W. (2009). Where attachment meets acculturation: Three cases of international adoption. *The Family Journal*, 17, 4, 302-311.

- Lewis, J., Arnold, M., House, R., Toperek, R. (2003). *Advocacy competencies*.
Retrieved from <http://www.counseling.org/Files/FD>
- Lincoln, Y., & Guba, E. (1985). *Naturalistic inquiry*. New York: Sage.
- Lindblad, F., Ringback Weitoft, G., & Hjern, A. (2010). ADHD in international adoptees: a national cohort study. *European Child Adolescent Psychiatry, 19*, 37-44.
doi:10.1007/s00787-009-0038-3
- Munns, E. (Ed.). (2007). *Theraplay: Innovations in attachment-enhancing play therapy*. Lanhan, MD: Rowman & Littlefield Publishers, Inc.
- Patton, M. Q. (2002). *Qualitative research & evaluation methods*. Thousand Oaks, CA: Sage Publications.
- Roseberry-McKibben, C. (2002). *Multicultural students with special language needs: Practical strategies for assessment and intervention*. San Diego, CA: Academic Press.
- Rojewski, J. W., Shapiro, M. S., & Shapiro, M. (2000). Parental assessment of behaviour in Chinese adoptees during early childhood. *Child Psychiatry and Human Development, 31*, 79-96.
- Ryan, T., Kaffenberger, C. J., Carroll, A. G. (2011). Response to intervention: An opportunity for school counselor leadership. *Professional School Counseling, 3*, 211-221.
- Schmid, M. (2002). *First language attrition, use and maintenance: The case of German Jews in Anglophone countries*. Philadelphia, PA: John Benjamins Publishing Co.
- U.S. Department of State. (2011). *What is inter-country adoption?* Retrieved from http://adoption.state.gov/adoption_process/what.php

- Weitzman, C., & Albers, L. (2005). Long-term developmental, behavioral, and attachment outcomes after international adoption. *Pediatrics Clinics of North America*, 52, 1395-1419. doi:10.1016/j.pcl.2005.06.009
- Wilson, S., Weaver, L. T., Cradock, M. M., & Kuebli, J. (2007). A preliminary study of the cognitive and motor skills acquisition of young international adoptees. *Children and Youth Services Review*, 30, 585–596. doi:10.1016/j.childyouth.2007.10.017
- Zeanah, C. H. (2000) Disturbances of attachment in young children adopted from institutions. *Developmental and Behavioral Pediatrics*, 21, 230-236.
- Zehr, M. A. (2004). Report updates portrait of LEP students. *Education Week*, 23, 3-6.