

Discontinuity and Disruption in Adoptions and Guardianships

A stable, permanent home is critical to providing children with the best opportunity to thrive. Living with their birth families is the most desired option in nearly all cases, but there are situations when adoption or guardianship is the best path toward safety and permanency. Although most adoptions or guardianships remain intact, some will terminate prior to finalization (disruptions) or may terminate or be temporarily interrupted after finalization (discontinuity).

This brief reviews the incidence and contributing factors for discontinuity and disruptions in adoptions and guardianships from foster care. It also discusses discontinuity and disruptions in intercountry adoptions as well as related topics, such as the effects of discontinuity and disruptions and unregulated custody transfers (UCTs).

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DEFINITIONS

The research literature uses a variety of terms for adoptions from foster care that end before or after finalization, such as disruption, dissolution, instability, discontinuity, displacement, and breakdown. The language used to describe these situations has changed over time, and even now researchers—as well as States and agencies—may have differing definitions or terms. The following are the definitions of the terms used in this brief:

- **Discontinuity:** In these cases, a finalized adoption ends—permanently or temporarily—due to a child reentering foster care before the child has reached adulthood (Rolock & White, 2016). The relationship between the adoptive parent and child may or may not remain intact (e.g., some children reenter foster care to access services or supports and remain connected to their adoptive parents).
- **Dissolution:** This is a subtype of discontinuity in which a finalized adoption *permanently* ends (i.e., there is a termination of parental rights) before the child has reached adulthood (Rolock & White, 2016).
- **Disruption:** In these instances, an adoption process ends after the child is placed in an adoptive home but *before* the adoption is legally finalized (Rolock & White, 2016).
- **UCT.** This occurs when a parent transfers the physical custody of their child to a person who is not the child's parent, stepparent, grandparent, or other adult relative; an adult friend of the family with whom the child is familiar; or a member of the child's Tribe in order to permanently avoid responsibility for the child's care and without taking reasonable steps to ensure the safety of the child or the permanency of

the placement (Child Welfare Information Gateway, 2022). UCT, also referred to as rehoming, is done without the supervision of child welfare agencies or the courts and is distinct from the other types of instability discussed in this publication (discontinuity, dissolution, and disruption).

Depending on the study, discontinuity also may include the discontinuation of the adoption subsidy prior to the child becoming an adult as well as other situations. Many studies also include a review of guardianships in addition to adoptions, and these definitions can be used for those situations as well.

EFFECTS OF PLACEMENT INSTABILITY

Placement instability can have deleterious effects on children that last throughout their lives. Research is scarce on the effects of discontinuity and disruption specifically, but research on foster care placement instability, which is a more frequent occurrence than adoption instability, has found that children with multiple placements experience more delinquency, aggression, depression, and trauma symptoms during adolescence compared with those with more stable placements (Mishra et al., 2020). When asked about the effects of foster care placement instability, foster care alumni reported they experienced loss of relationships, difficulty graduating high school, unsafe placements, and feeling unwanted by their caregivers (Chambers et al., 2018).

Some children may temporarily reenter State custody at the behest of their adoptive parents to secure services that will benefit the child—and the adoption itself (Maza, 2014; Rolock, 2015). For example, a parent may not be able to access or afford specialized or intensive

treatment for the child, and reentry into foster care may be the best path toward that care. Although the child may be receiving necessary care and later be reunified with their adoptive parents, this type of discontinuity can still be traumatizing for a child.

Tracking Children Who Have Experienced Discontinuity or Disruption

Understanding how often families experience discontinuity or disruption is very important to the development of services and supports for adoptive families. However, gathering and interpreting data about these issues is difficult and complex. Tracking the experiences of children after adoption or guardianship is not a common practice in most child welfare agencies (Rolock & White, 2016). There are myriad challenges to conducting and comparing studies on discontinuity and disruption, including nonstandard definitions, looking at adoption or guardianship solely or together, different State and local policies and practices, different ranges for follow-up periods, varying target populations, and more (e.g., White et al., 2021; Palacios et al., 2019). Additionally, accurate data on discontinuity are difficult to obtain because, at the time of legal adoption, a child's records may be closed, first and last names and social security numbers may be changed, and other identifying information may be modified. Furthermore, some State systems are not set up to allow the linkage of prepermanence and postpermanence records. The circumstances of the discontinuity also may be informal (e.g., extended but temporary stays with relatives) and not brought to the attention of child welfare agencies or the courts.

DISCONTINUITY

Only a small subset of adopted children who reenter foster care experience legal dissolution of their adoptions, and many of them eventually return to their adoptive families. The Federal Adoption and Foster Care Analysis and Reporting System can be utilized to determine the number of children in foster care whose previous adoptions were dissolved by reviewing three data elements: whether the child was ever previously adopted, the age of the child when the previous adoption was legalized, and the dates of the termination of parental rights (if the child had previously been adopted) (Festinger & Maza, 2009). Those data, however, are reported only for children in public foster care and do not capture adoption dissolution if the children do not come to the attention of the public child welfare system. Also, some researchers have observed that these data are inconsistently reported by States.

HOW MANY ADOPTIONS AND GUARDIANSHIPS EXPERIENCE DISCONTINUITY?

Most children who exit foster care to adoption or guardianship do not reenter foster care or otherwise experience postplacement discontinuity. Research indicates that approximately 5 to 20 percent of children who exit foster care to adoption or guardianship experience discontinuity (Rolock et al., 2021). The rates of discontinuity appear to increase after more time passes from the date of finalization. For example, a study of adoptions and guardianships in Illinois tracked children for 10 years after placement finalization, with discontinuity rates as follows: 2 percent at 2 years, 6 percent at 5 years, and 11 percent at 10 years (Rolock & White, 2016). This indicates

that the need for postpermanency supports and services continues well beyond the date of finalization.

Within discontinuity, there is a smaller subset of adoptions and guardianships that dissolve. Studies show that approximately 1 to 10 percent of all adoptions from foster care end due to dissolutions (Goodwin & Madden, 2020). For example, a large study of adoption in Ohio determined that there was a 10-percent foster care reentry rate and a 2-percent dissolution rate (Smith, 2014).

Additional studies have focused solely on guardianships, finding a dissolution rate ranging from 1 to 17 percent (Sattler & Font, 2021). For example, a study in California that followed children for up to 14 years found that 17 percent of children who entered kin guardianships reentered foster care (Parolini et al., 2018).

WHY DO ADOPTIONS AND GUARDIANSHIPS EXPERIENCE DISCONTINUITY?

In general, adoptions and guardianships experience discontinuity due to a combination of risk and protective factors rather than a single cause (Palacios et al., 2019). This section describes the child, parent, and systemic factors discussed in recent research on discontinuity.

CHILD FACTORS

- **Age.** A child's age has consistently been found to impact adoption and guardianship discontinuity. Children who are older when finalization occurs are at higher risk for discontinuity. For example, one study showed that children who were ages 6 and older at the time of finalization are

more likely to reenter care than younger children (Rolock et al., 2021). The likelihood of discontinuity also increases as the child ages, with children in their teens being at higher risk for discontinuity than younger children (Rolock & White, 2016; Parolini et al., 2018).

- **Number of placements.** The risk of discontinuity increases with a higher number of foster care placements (Palacios et al., 2019). One study showed a child has a 15 percent increase in risk of reentry for each placement move while in foster care (Rolock et al., 2019).
- **Time spent in foster care.** Although some studies have shown spending less time in foster care promotes adoption stability, others have shown that a longer time spent in care can be a protective factor against discontinuity (White et al., 2018). The authors of one study posited this could be due to these adoptive parents having received additional preparatory services and supports during these lengthier stays in care (Rolock & White, 2016).
- **Behavioral challenges.** Children who have behavioral challenges, such as difficulty developing attachments, anger, aggression, and self-esteem issues, are more likely to have adoptions or guardianships that experience discontinuity (Goodwin & Madden, 2020).
- **Race and ethnicity.** Some studies have found that Black children are more likely than White and Hispanic children to experience discontinuity, but other research has shown no differences (White et al., 2021). In one study of two States, higher risk for Black children was found in one State but not the other (Rolock et al., 2019).

- **Placement with siblings.** The research is mixed regarding whether siblings being placed together is a risk or protective factor for discontinuity, with much of the variation due to the quality and nuances of the sibling relationships, prior relationships, and extended family dynamics. For example, one large study found that children adopted with at least one sibling had 15 percent lower risk of discontinuity compared with children adopted with no siblings or other sibling arrangements (Rolock & White, 2016), yet other studies have found that sibling adoption was associated with more child behavioral issues and other adjustment challenges (White et al., 2018).

PARENT FACTORS

- **Caregiver commitment.** If caregiver commitment to the parent-child relationship diminishes after finalization, that puts the adoption or guardianship at risk of discontinuity (White et al., 2018; Rolock & Fong, 2019). In a study of Illinois caregivers, researchers found that continued caregiver commitment helped serve as a buffer for discontinuity when behavioral problems were present (Testa et al., 2015).
- **Unrealistic expectations.** Adoptions may be at higher risk of discontinuity if the parents' expectations for the adoption are idealized or if they are not provided with the proper information about the child or adoption itself (Palacios et al., 2019; White et al., 2018). Parents may not fully understand the challenges they may encounter, which can lead to later frustrations.
- **Parental relationship status.** Adoptive parents being married appears to be a protective factor against discontinuity (White et al., 2018; Testa et al., 2015).

- **Kinship relationship with child.** Various studies have shown that being related to the child can serve as a protective factor against discontinuity, while other studies have found little to no effect (White et al., 2018). For example, one recent study found that placement with a relative resulted in a higher likelihood of discontinuity (Dellor & Freishthler, 2018). The authors in that study theorized that certain characteristics of kinship adoptive parents, such as being single or having less adoption preparation, may contribute to the increased risk. Another study found that the type of kinship impacted outcomes (Testa et al., 2015). Grandparents and uncles or aunts were associated with greater stability than cousins or more distant kin. However, other studies found that kinship ties allowed children to maintain closer ties to their birth family long after the permanent placement was finalized (Koh & Testa, 2011; Testa, 2004). Understanding kinship relationships and outcomes requires a broad understanding of extended family dynamics.

SYSTEMIC FACTORS

- **Lack of sufficient postadoption services, training, and supports.** When families do not have access to or do not receive adequate postadoption services, training, and supports, it places them at greater risk for discontinuity (Palacios et al., 2019; Rolock & Fong, 2019; White et al., 2018).
- **Information sharing.** Ensuring that parents have proper background information on their child and are knowledgeable about the developmental and parenting implications of that history can serve as a protective factor against discontinuity (Brodzinsky & Smith, 2019).

- **Parent-child matching.** Making matching mistakes may occur when a caseworker encourages parents to adopt a child whose characteristics are beyond what they initially considered when applying to adopt, thereby "stretching" the parents' desires, or when a caseworker does not match a child's needs with a parent's strengths (Brodzinsky & Smith 2019; Palacios, 2019). For example, parents may wish to adopt an infant but be guided toward older children.
- **Subsidy.** An inadequate subsidy—or the caregiver's perception that the subsidy is inadequate—could place an adoption at risk of discontinuity (White et al., 2018; Testa et al., 2015).

DISRUPTIONS

Most studies assessing the characteristics associated with disruption occurred during the 1980s and 1990s, with a few additional studies being conducted in the 2000s. It is estimated that approximately 10 to 25 percent of adoptions disrupt prior to finalization (Goodwin & Madden, 2020). Factors related to adoption disruption are often similar to those for discontinuity, including older child age, presence of behavioral issues, lack of preparation or services, lack of information about the child, and parents' unrealistic expectations (Child Welfare Information Gateway, 2021).

UNREGULATED CUSTODY TRANSFERS

UTC places children at risk for future harm. When this practice occurs, children, who often already have experienced some form of trauma, are sent to live with families who have not completed any child welfare or criminal background checks, do not receive oversight

Intercountry Adoptions

The U.S. Department of State and the U.S. Department of Health and Human Services collect data on the number of disruptions and dissolutions in cases where children are adopted from other countries. Explore data from Federal fiscal year (FY) 2023 in the U.S. Department of State's [Report to Congress on The United States Central Authority Under the Hague Convention on Protection of Children and Co-Operation in Respect of Intercountry Adoption for Fiscal Year 2023](#) (Bureau of Consular Affairs, 2024).

from a child welfare or adoption agency, and do not have a legal responsibility to the child (Capacity Building Center for States, 2022). It is unknown how many adoptions end through UTC.

A report by the U.S. Government Accountability Office (2015) noted the following reasons families may resort to UTC:

- Parents may not be properly prepared for the adoption. They may have inadequate information about the child's physical and behavioral health or minimal preadoption training. Additionally, the home study that occurred may not have been sufficient to determine if the adoption was a good match.
- The parents may not have access to postadoption services needed to help them cope with the situation or avoid reaching a crisis. Families may need more intensive services if the child has severe behavioral health needs, but services can be costly or difficult to access.

- Families may be reluctant to seek help because they are afraid of repercussions and or the stigma of child welfare or other agency involvement.

For additional information about UTC, read [Unregulated Custody Transfers of Adopted Children](#) by Child Welfare Information Gateway.

CONCLUSION

Discontinuity and disruption result in instability for children and youth, hindering their permanent placement with caring families. Although the vast majority of placements continue to finalizations and establish lifelong families, child welfare agencies and researchers should continue to monitor the prevalence of discontinuity and disruption, study their causes, and develop and assess interventions that can support families before placements become unstable and possibly terminate.

ADDITIONAL RESOURCES

For additional information about adoption and guardianship discontinuity and disruption, including providing services after placements, visit the following Information Gateway webpages:

- [The Impact of Adoption](#)
- [Parenting Your Adopted School-Age Child](#)
- [Parenting Your Adopted Teenager](#)
- [Discontinuity and Disruption in Adoptions and Guardianships](#)

Additionally, visit the [National Quality Improvement Center for Adoption and Guardianship Support and Preservation](#) website for additional information about

effective interventions to achieve long-term, stable permanence in adoptive and guardianship homes—both for waiting children and those with finalized placements.

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