A review of assessment protocols used in South African adoption practice

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Mini-dissertation submitted in fulfillment of the requirements for the degree *Magister in Social Work* in Child Protection at the Potchefstroom Campus of the North-West University

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November 2016
ACKNOWLEDGEMENTS

This work is dedicated to my sister, Charlene.

Thank you to the following people:

- My mom and Charlene who gave me perspective in life.
- Adri for being my co-coder.
- Tannie Mariëtjie for formatting and reformatting my work.
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SUMMARY

Key words: Adoption, South Africa, Protocol, Assessment

Child adoption is a specialisation field that has as its main objective, providing an adoptable child with a permanent form of care. Adoption practitioners are faced with the gruelling task of selecting suitable caregivers for the adoptable child. The South African Children’s Act (38/2005) provides limited guidance to practitioners on how to undertake this task, leaving practitioners to their own devices.

The purpose of this study was to explore and describe the practice of eight rigorous adoption assessors. Three main themes informed the study: assessment processes followed, assessment instruments used and challenges experienced when applying current assessment protocols.

Results revealed that adoption assessment protocols differ among practitioners. The various protocols consist of different methodologies and assessment instruments, used optionally and at the assessor’s discretion with numerous challenges experienced. This leaves the desperate prospective adoptive parent at the mercy of a range of variables, which thus essentially exposes the applicant to various forms of exploitation.

This article advocates the use of ecometrics as an approach to assessment as a scientific process that can be accurately controlled by the adoption practitioner and used in a way that promotes accountability and the production of valid, reliable practice and knowledge.
Sleuteltermes: Aanneming, Suid-Afrika, Protokol, Assessering

Kinderaanneming is 'n spesialisveld wat as primêre doel poog om 'n aanneembare kind met 'n vorm van permanente sorg te voorsien. Aanneempraktisyns het die uitmergelende taak om geskikte versorgers vir die aanneembare kind te keur. Die Suid-Afrikaanse Kinderwet (38/2005) verskaf beperkte leiding aan praktisyns rakende die uitvoer van hierdie taak, wat praktisyns aan hul eie lot oorlaat.

Die doel van hierdie studie-ondersoek was om die praktyk van agt streng assesseerders te verken en te beskryf. Drie hoof temas het die studie toegelig: assesseringsproesesse wat gevolg word, assesseringsinstrumente wat gebruik word en uitdagings wat met die toepas van die assesseringsprotokolle ondervind word.

Resultate het aan die lig gebring dat assesseringsprotokolle van praktisyn tot praktisyn verskil. Die verskeie protokolle bestaan uit verskeie metodologieë en assesseringsinstrumente wat opsioneel en na die diskresie van die praktisyn, met 'n menigte uitdagings toegepas word. Hierdie situasie laat die desperate voornemende aanneemouer oor aan die genade van verskeie veranderlikes wat die desperate applikante gevoghlik wesenlik aan verskeie vorme van uitbuiting blootstel.

Hierdie artikel stel die gebruik van ekometrie as 'n benadering tot assessering voor, wat as 'n wetenskaplike proses akkuraat deur die aanneempraktisyn beheer kan word en wat aanspreeklikheid en die lewering van geldige, betroubare praktek en kennis bevorder.
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### TABLE OF CONTENTS

ACKNOWLEDGEMENTS .................................................................................................................. I
STATEMENT .................................................................................................................................. II
DECLARATION OF LANGUAGE EDITING ..................................................................................... III
SUMMARY ...................................................................................................................................... IV
OPSOMMING .................................................................................................................................. V
FOREWORD ..................................................................................................................................... VI
INSTRUCTIONS TO AUTHOR ...................................................................................................... VII
ADOPTION & FOSTERING ............................................................................................................... VII

SECTION A: A REVIEW OF ASSESSMENT PROTOCOLS USED IN SOUTH AFRICAN
ADOPTION PRACTICE .................................................................................................................. 1

1.1 PROBLEM STATEMENT ............................................................................................................ 2
1.2 RATIONALE FOR THE STUDY ............................................................................................... 7
1.3 AIM OF THE STUDY ................................................................................................................ 8
1.4 THEORETICAL ORIENTATION ............................................................................................. 8
1.5 RESEARCH METHODOLOGY ................................................................................................. 11

1.5.1 Research design ................................................................................................................. 11
1.5.2 Respondents and sampling ............................................................................................... 11
1.5.2.1 Inclusion criteria .......................................................................................................... 12
1.5.2.2 Exclusion criteria ......................................................................................................... 12
1.5.2.3 Profile of participants .................................................................................................. 13
1.5.3 Data collection ................................................................................................................... 13
1.5.4 Research procedures ......................................................................................................... 14
1.5.5 Data analysis ..................................................................................................................... 14
1.5.5.1 Literature review ........................................................................................................ 16
<table>
<thead>
<tr>
<th>Section</th>
<th>Title</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.5.2.3</td>
<td>Heimler scale of social functioning (HSF)</td>
<td>49</td>
</tr>
<tr>
<td>2.5.2.4</td>
<td>Generalized contentment scale (GCS)</td>
<td>50</td>
</tr>
<tr>
<td>2.5.2.5</td>
<td>Keirsey Temperament Sorter (KTS-II)</td>
<td>50</td>
</tr>
<tr>
<td>2.5.2.6</td>
<td>Multi-Problem Screening Inventory (MPSI)</td>
<td>50</td>
</tr>
<tr>
<td>2.5.2.7</td>
<td>Prepare/Enrich</td>
<td>51</td>
</tr>
<tr>
<td>2.5.2.8</td>
<td>Combination of assessment instruments</td>
<td>52</td>
</tr>
<tr>
<td>2.5.2.9</td>
<td>No assessment instruments and referral for psychological assessments</td>
<td>53</td>
</tr>
<tr>
<td>2.5.3</td>
<td>Theme 3: Challenges with assessment protocols</td>
<td>54</td>
</tr>
<tr>
<td>2.5.3.1</td>
<td>The need for a simplified, accessible and affordable protocol</td>
<td>54</td>
</tr>
<tr>
<td>2.5.3.2</td>
<td>A uniformed, thorough process acknowledged by courts is needed in South Africa</td>
<td>54</td>
</tr>
<tr>
<td>2.5.3.3</td>
<td>Culture, beliefs, values and norms are being neglected</td>
<td>55</td>
</tr>
<tr>
<td>2.5.3.4</td>
<td>The best interest of the child should be paramount in each situation</td>
<td>56</td>
</tr>
<tr>
<td>2.6</td>
<td>DISCUSSION AND IMPLICATIONS</td>
<td>56</td>
</tr>
<tr>
<td>2.7</td>
<td>CONCLUSION</td>
<td>61</td>
</tr>
<tr>
<td>2.8</td>
<td>RECOMMENDATIONS</td>
<td>61</td>
</tr>
<tr>
<td>2.9</td>
<td>REFERENCES</td>
<td>64</td>
</tr>
<tr>
<td>SECTION C: CONCLUSIONS AND RECOMMENDATIONS</td>
<td>73</td>
<td></td>
</tr>
<tr>
<td>3.1</td>
<td>CONCLUSIONS</td>
<td>73</td>
</tr>
<tr>
<td>3.1.1</td>
<td>Theme 1: Assessment process</td>
<td>73</td>
</tr>
<tr>
<td>3.1.2</td>
<td>Theme 2: Assessment instruments</td>
<td>74</td>
</tr>
<tr>
<td>3.1.2.1</td>
<td>Adult attachment interview (AAI)</td>
<td>76</td>
</tr>
<tr>
<td>3.1.2.2</td>
<td>Family Systems Test (FAST)</td>
<td>77</td>
</tr>
<tr>
<td>3.1.2.3</td>
<td>Heimler Scale of Social Functioning (HSF)</td>
<td>78</td>
</tr>
<tr>
<td>3.1.2.4</td>
<td>Generalized Contentment Scale (GCS)</td>
<td>78</td>
</tr>
<tr>
<td>Section</td>
<td>Title</td>
<td>Page</td>
</tr>
<tr>
<td>---------</td>
<td>-------</td>
<td>------</td>
</tr>
<tr>
<td>3.1.2.5</td>
<td>Keirsey Temperament Sorter (KTS-II)</td>
<td>79</td>
</tr>
<tr>
<td>3.1.2.6</td>
<td>Personal Multi-screening Inventory (PMSI) / Multi-Problem Screening Inventory (MPSI)</td>
<td>80</td>
</tr>
<tr>
<td>3.1.2.7</td>
<td>Prepare/Enrich</td>
<td>80</td>
</tr>
<tr>
<td>3.1.3</td>
<td>Theme 3: Challenges with assessment protocols</td>
<td>81</td>
</tr>
<tr>
<td>3.2</td>
<td>RECOMMENDATIONS</td>
<td>82</td>
</tr>
<tr>
<td>3.3</td>
<td>REFERENCES</td>
<td>85</td>
</tr>
<tr>
<td>ANNEXURE 1</td>
<td>ETHICS APPROVAL</td>
<td>86</td>
</tr>
<tr>
<td>ANNEXURE 2</td>
<td>INTERVIEW SCHEDULE</td>
<td>87</td>
</tr>
</tbody>
</table>
LIST OF TABLES

Table 1.1  Profile of participants................................................................. 13
Table 1.2  Ethical risk level descriptors ....................................................... 17
Table 2.1  Assessment instruments used in prospective adoptive parent assessments ........ 59

LIST OF FIGURES

Figure 2.1: Assessment protocols used in South African adoption practice .................... 58
Figure 3.1  Assessment process ..................................................................... 73
Figure 3.2  Assessment instruments .................................................................. 76
Figure 3.3  AAI ................................................................................................. 77
Figure 3.4  FAST .............................................................................................. 78
Figure 3.5  HSF ............................................................................................... 78
Figure 3.6  GCS ............................................................................................... 79
Figure 3.7  KTS-II ........................................................................................... 79
Figure 3.8  PMSI ............................................................................................. 80
Figure 3.9  Prepare/Enrich ............................................................................. 81
Figure 3.10 Challenges .................................................................................. 82
Figure 3.11 Protocol recommendations ................................................................ 83
A REVIEW OF ASSESSMENT PROTOCOLS USED IN SOUTH AFRICAN ADOPTION PRACTICE

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CONTEXTUALIZATION

The Children’s Act (38/2005) (hereafter referred to as ‘the Act’) determines that a child is adopted if the child has been placed in the permanent care of a person or persons in terms of an adoption order. Adoption can thus be viewed as a form of permanency planning (Holland, 2011:149), which constitutes that a child has been removed from temporary substitute care and placed in the permanent care of another familial entity (Frey et al., 2008:13).

The Act states that a child may be jointly adopted by a husband and wife, partners in a permanent life partnership, or by other persons sharing a common household and forming a permanent family unit. The Act lists several other persons who may adopt a child, the common criteria amongst the aforementioned being that the applicant must be older than 18 years of age.

The Act furthermore states that persons who have applied to adopt a child have to be ‘properly assessed’ by an adoption social worker to ensure that the applicants comply with the following:

- the persons must be fit and proper to be entrusted with full parental responsibilities and rights in respect of the child; (and)
- must be willing and able to undertake, exercise and maintain those responsibilities and rights.

The Act does not, however, define the criteria for a prospective adoptive parent to be found ‘fit and proper’ and does not specify the criteria for a prospective adoptive parent to be able to maintain the rights and responsibilities of the adoptable child. These decisions are most likely based on recommendations made by the adoption worker’s assessment of these constructs.
1.1 PROBLEM STATEMENT

Assessment is a professional activity recognized by most major counselling organizations worldwide and conducted by social workers as part of the helping process (Peterson et al., 2014:90), but during preliminary investigation, no plausible standardised assessment protocols could be found according to which the assessment of prospective adoptive parents in South Africa is to be conducted. International protocols regarding the assessment of prospective adoptive parents could, however, be obtained, doubt exists as to whether these are contextually relevant and appropriate. Reference will be made to the international protocols throughout this study.

Assessment of prospective adoptive parents based on individual preferences and organisational processes leads to a lack of uniformity, weak psychosocial evaluations, ineffective information gathering or lack of analysis tools, judgments based on worker bias and irrelevant home-study reports (Consortium For Children, 2005). The lack of uniformity in South African assessment protocol thus leads directly to potentially inconsistent assessment outcomes. No standardised prospective adoptive parent assessment protocol with specific assessment tools within the protocol exists in South Africa (Venter, 2015; Kruger, 2015). A preliminary investigation was carried out by consulting social workers rendering adoption services. According to Ms Venter (2015) each organisation assesses prospective adoptive parents according to organisational policy, assessment protocols and instruments. Dr Kruger (2015) mentions that instruments such as the Heimler Scale of Social Functioning (Heimler, 1967), Social Assessment Scales (Taylor et al., 1998:210-218) and the Parental Bonding Instrument (Murphy et al., 1997) are occasionally used to assess prospective adoptive parents. The Consortium for Children (2005) indicated the use of international assessment protocols, such as the Structured Analysis Family Evaluation (SAFE), used in the United States of America and Canada, the Prospective Adopter’s Report (PAR) (British Association for Adoption and Fostering, 2013) used in the United Kingdom and the Trauma Informed Partnering for Safety and Permanence - Model Approach to Partnerships in Parenting (TIPS-MAPP) used in Kansas in the United States of America (Children’s Alliance of Kansas, 2014). The TIPS-MAPP is a model program that utilises 15 tools designed to assist prospective adoptive parents in understanding the adoption process and what is expected of them. For the adoption social worker it ensures that family assessments are objective and describe the relevant behavioural terms (Children’s Alliance of Kansas, 2014). The British Association for Adoptions (2013), namely Prospective Adopter’s Report (PAR), is utilised as assessment tool in the United Kingdom and comprises 2 parts. Part 1 concerns an assessment report and part 2, factual information. From the gathered information regarding the PAR it is clear that the PAR is a self-report instrument consisting of 2 broad categories, which each comprises a series of open-ended as well as closed-ended questions.
Consultation with Department of Social Development (DSD), Johannesburg Child Welfare, Gift of Life, Adoption, YourParenting.com, as well as discussions with social workers rendering adoption services, the following could be considered elements of a local screening protocol:

- Completion of an administrative application form by prospective adoptive parents.
- Adoption orientation interviews conducted by a social worker.
- Assessment of adoptive parents/parents’ medical health conditions.
- Completion of Psychometric tests by adoptive parents.
- A marriage assessment needs to be conducted, if the applicants are married.
- Home visits need to be conducted by the social worker.
- Police clearances have to be obtained.
- Confirmation that applicants’ names do not appear on the national sexual offenders register.
- Character references of the prospective adoptive parents need to be obtained.

Although the aspects listed above can be considered steps in the adoption process, there is no evidence of any instruments being used or procedures proposed to systematize the screening and assessment processes. Addoption (2015) describes their screening of prospective adoptive parents as follows:

*The screening process normally involves orientation meetings, interviews with a social worker, full medicals, marriage and psychological assessments, home visits, police clearance and references. The screening process basically allows social workers to get to know prospective adopters as a family, their motivation to adopt and their ability to offer a child a warm, loving and stable home.*

In an article educating prospective adoptive parents on the process and requirements of adoption in South Africa, the website YourParenting.com (2015), mentions that each agency has its own set of requirements and provides the following adoption-related information regarding the application of adopting a child:

*In South Africa, the only way in which you can legally adopt a child is by working through an accredited adoption agency, or with the assistance of an adoption social worker functioning within the statutory accredited adoption system.*

*When working through an adoption agency, the process usually starts with the prospective adoptive parents submitting an application to the agency.*

YourParenting continues by describing the screening process as follows:
The screening process allows social workers to get to know prospective adopters as a family, their motivation to adopt and their ability to offer a child a warm, loving and stable home.

From the gained information it is unclear what the screening process entails. It is, however, made clear that the prospective adoptive parent will be submitted to psychological assessments. From discussions with social workers rendering adoption services, it could be accepted that the prospective adoptive parent will be subjected to the 16 Personality Factor Questionnaire (which will be discussed).

Gift of life (2009) notes that the adoption screening process in South Africa consists of an orientation meeting, completion of all application forms and certificates and a home visit by the social worker, where after the Children’s Court process will take place.

Although not scientific, Gift of life (2009) provides the most comprehensive explanation of the screening process, by mentioning that parents applying to adopt a child will need to prove their health, character, social and financial status by supplying medical certificates, character references, bank/financial statements and criminal record clearance. Even though this is the most comprehensive and detailed explanation of the adoptive parent screening process, it is still unclear what is meant by a person’s social status.

From the descriptions of the screening processes of the formerly mentioned organisations and sources of information it is unclear what the social worker will be assessing while a ‘visit’ to the client’s home or the screening of other fundamentals is conducted. It is also unclear what criteria should be met by the prospective adoption parents.

Dickerson and Allen (2007:9-16) and Miller and Bentovim (2007:30) report significant variation in qualifications of adoption assessors, including that of social work and psychology and with varying levels of skill and method used. The authors found that unless supervisors in agencies were former assessors or screeners themselves who had moved up the ranks within the agency, assessors were unlikely to ever have received authoritative instruction on how to screen foster care and adoptive applicants. As a result of this, as argued by the authors, standards vary considerably from agency to agency and private adoption social worker to private adoption social worker, with levels of excellence typically set by individual supervisors without regard to uniform applications of accepted practice. The only common denominator is an expectation, false as it often turns out, that foster and adoptive home studies will follow an established outline for providing required information regarding the applicants.
Farmer et al. (2010:1-8) mention that the use of standardised, protocols, questionnaires and tools in the assessment of prospective adoptive parents is under debate. In their survey of adoption practice they concluded that ‘few adoption organisations occasionally’ used the 
Attachment Style Interview or the Adult Attachment Interview format to assess attachment styles displayed by prospective adoptive parents. The authors continue by stating that social workers are still inclined to depend on the skills of external professionals such as clinical psychologists to inform them of personality characteristics of prospective parents. It is important to note that the authors make it clear that standardised assessment tools are only occasionally used. This implies that there is a definite lack in standardised procedures followed by adoption social workers.

Although standardised assessment instruments are occasionally used, there still is no uniform assessment protocol prescribing the use of certain standardised assessment procedures and instruments associated with these procedures. The lack of a standardised assessment protocol or sequential plan of how to conduct an adoption assessment poses certain challenges such as lack of uniformity, no psychosocial evaluation, no effective information gathering or analysis tools, judgments based on worker bias and irrelevant home study reports (Consortium for Children, 2005), which could be eliminated by implementation of a standardised prospective parent assessment protocol. Clinical assessment protocols, according to InterRAI (2015), are designed to assist assessors in systematically interpreting information recorded. The Merriam-Webster dictionary (2015) describes a protocol as ‘a system of rules that explain the correct conduct and procedures to be followed in formal situations’. Roestenburg (2011:69) describes assessment protocols as ‘structured assessment procedures designed to provide a systematic character to the assessment sequence’. An assessment protocol, according to the author, is the third component of the triangulation process in Ecometrics. A standardised protocol can thus be described as a detailed system, set of rules or procedure that has to be adhered to. This set of rules or procedure has the same particular features and level of quality.

Much of the critique against previous assessment models, according to Hunter (1989:130), is ascribed to the overuse of the ‘diagnostic’ model, which has mainly been derived from psychoanalytic theory. The diagnostic model strongly emphasises personality development, the influence of past childhood experiences and the unconscious. The diagnostic theory led to a rather narrow and occasionally dogmatic approach to assessment. This inclines social workers to pay less attention to current experiences and environmental factors.

Assessments regarding alternative care and services in the South African context is difficult due to the lack of norms for the well-being of children, the multiple cultural variables involved and the unstable state of service contexts, to name but a few of the challenges. The use of international
Instruments developed elsewhere in the world can assist with the assessment of variables such as self-esteem, depression, attachment and so forth, is problematic in the statutory process. This might, however, change as more locally appropriate tools are developed and services become more stable and better resourced (Lofell, 2007:213).

The need for adoption-competent practices has been well researched in the United States of America. Since 2008 the Centre for Adoption Support and Education has provided a multi-layered initiative in training of U.S.-based adoption practitioners. The curriculum was designed to develop the specific knowledge skills, values and competencies of professionals rendering adoption services (Centre for Adoption Support and Education, 2015). In their study regarding the need for adoption-competent mental health services Atkinson et al. (2013:156-174) evaluated the effectiveness of the training in the practice of professionals. Participants reported that after having received training they were collecting more background information, were more aware of adoption issues, were using new assessment procedures and were comfortable asking new questions. The participants clearly indicated that there was an improvement in their adoption practices following the introduction of new and structured assessment procedures.

Although not South African-specific, Miller and Bentovim (2007:29-32) suggest a range of assessment approaches and further suggest that it is helpful to use a combination of approaches when making an assessment. An evidence-based approach is recommended as part of the assessment process in order for the assessments to be based on clear and systematic ways of collecting and analysing information. The authors furthermore suggest the use of standardised assessment tools, which are grounded in good practice and empirically validated to provide results that can be well evidenced. The authors recommend using the Assessment Framework, which provides a range of standardised evidence approaches to interviewing children and families and assessing their needs. The assessment framework includes the Home Inventory, the Family Pack of Questionnaires and scales, the Family Assessment, the Attachment Style Interview for Adoption and Fostering and the In My Shoes interview.

Miller and Bentovim (2007:32-36) continue to suggest the process of assessment by using the Assessment Framework at different stages when assessments are made of support needs. The suggested model involves a process of assessment, analysis and planning. This assessment process includes collecting information about the needs of each dimension (adoptive developmental needs of the child, parenting capacity and family and environmental factors), analysis of the relationship between each of the dimensions of each other and an analysis of the interrelationship between the dimensions of the different domains. This analysis can then be applied to identify the support needs of the adoptable child and prospective adoptive parents.
The analysis will also provide insight into what support, interventions and services will be most effective to respond to the identified needs of the child and the family in question (Department for Education and Skills, 2006:33-46).

The following research questions inform this study:

- What is the content and nature of assessment protocols used by South African adoption social workers to assess prospective adoptive parents?
- What are the assessment instruments or tools associated with the assessment practices of adoption social workers?
- What are the assessment tools used by social workers in local prospective adoptive parent assessment practices?
- What should a South African-specific prospective adoptive parent protocol consist of?

1.2 RATIONALE FOR THE STUDY

Based on the above problem statement it can be concluded that there is significant variation in the way adoption assessments are conducted and that there is no local, uniform protocol being followed in conducting screening and assessments for adoption. Further to this, a need seems to exist for the development of a systematic protocol for such assessments that include the selection and use of standardized assessment tools. This study may therefore be beneficial to adoption practice in South Africa and towards the formulation of such standardized protocols in future practice.

This study explored the assessment methods and instruments used currently within the South African context to assess prospective adoptive parents. This can be regarded as a foundation for determining whether a need exists for the development and refinement of a standardised prospective adoptive parent assessment protocol and for providing some guidelines towards future standardization.

The research project can contribute to the field of adoption social work by providing results that will directly improve current processes implemented in adoption social work services. This research project may generate information that increases our understanding and directly influences future research (Emmanuel et al., 2010:4).

It can be argued that once adoption practitioners have identified and formulated a standardised assessment protocol, including a selection of standardised assessment tools within such a protocol, they will be able to conduct more accurate and accountable prospective adoptive parent assessments. This in turn would enable practitioners to make more accurate and more accountable recommendations to the Children's Court with regard to the vetting of prospective
adoptive parents. Indirectly this study may contribute to a more efficient system that operates in the best interests of child protection in general.

The output of the research findings contributed to a longer-term objective, namely to design, test and implement a standardised assessment protocol specifically for use within the South African context.

1.3 AIM OF THE STUDY

The aim of the study was to conduct a broad exploration and description of the nature, content and utilization of assessment tools, scales and systematic procedures and whether these are used within a structured protocol/process in adoption assessments.

1.4 THEORETICAL ORIENTATION

The theoretical argument is that if adoption social workers utilize specific, structured and systematic adoption assessment tools in their practice of assessing for adoption the chances of supporting permanent and better-fitting adoptions will be enhanced. However, this study does not aim at determining whether the use of protocols and assessment tools do improve assessment quality – it merely aims at exploring ‘what’ and ‘how’ questions regarding the use of such tools.

In defence of the above theoretical argument the guidelines for assessment, as encapsulated in the SACSSP’s Policy on Ecometric Technology (2011), are used as frame of reference. The concepts represented by this policy document are based on the argumentation of Roestenburg (2011) and others with respect to the value of adopting Ecometric principles in the assessment of clients. Roestenburg (2011:24-25) notes that Ecometric technologies are generally catalogued in two main categories, which are quantitative and qualitative categories. The author explains the quantitative category as consisting primarily of standardized measurement scales that are completed by the client him- or herself and produce metrics that are interpreted. These scales usually have a high degree of confirmed validity and reliability and are based on a trail of evidence obtained by validation studies of the scale’s properties. The author continues by explaining the qualitative category as a range of different procedures and techniques that promotes interaction, exploration of issues and the generation of large amounts of textual or descriptive data. In contrast to the quantitative category, the qualitative category is highly reliant on the assessor’s appraisal of the data, rather than on a mechanical interpretation of numbers. However, both approaches generally play a role in the assessment of clients, and the adoption context is no exception
Ecometrics, according to Roestenburg (2011:21-22), is an approach towards viewing assessment as a scientific process that can be accurately controlled by the social worker and used in a way that promotes accountability and the production of valid, reliable practice and knowledge. Based on an Ecological perspective, Ecometrics is interested in the fit between the person and the social environment. No single, set definition of the ecological systems framework exists. Compton and Galaway (2010:123) mention that the ecological systems framework informs us regarding the person-environment interrelatedness, as well as transactions that take place in this interrelatedness. In her master's dissertation, Watson (2013:6-12) argues that the ecological model offers a suitable and relevant framework for assessing individuals. The ecological system’s framework emphasises the interactions and transactions that take place between the individual and his / her environment instead of assessing each of these in isolation. According to the author, this perspective ‘helps provide perspective on the transactions the individual engages in’ and will be used in this study as underlying theoretical framework for interpretation.

Ecometrics advocates the use of three important principles of assessment, which include a weighty reliance on scientific theory as reference framework, reliance on qualitative and quantitative technologies as assessment tools and a reliance on structured and planned assessment processes. Ecometrics essentially proposes that if the social worker starts the assessment in a planned manner by using specific pre-conceived sequences or protocols, the first step towards an accountable assessment will be achieved. If the social worker then uses a mix of qualitative and quantitative assessment technologies, extensive coverage of the topic being assessed will occur. If the social worker then reflects the assessment findings against appropriate theoretical frameworks, it is likely that an accountable assessment product will be reached. In this study the researcher aims at exploring the assessment practices of adoption social workers and at determining what tools they do use and how these are used.

It furthermore seems fitting to integrate Ecometrics with the assessment of prospective adoptive parents. Ecometrics refers to the methodology of measurement of all assessment areas in social work and focuses on quantifying the mutual adaptive interactions between people and their environments. Ecometric technologies are developed primarily for assessment purposes and not for facilitating the making of a diagnosis. The core principles of Ecometrics entail feasibility, accountability, clarity, promotion of adherence to ethical principles, and promotion of cultural sensitivity and cross-cultural work (SACSSP, 2011:4-11).

Van Breda (2004:164-171) in his Doctoral Dissertation identified numerous theoretical frameworks used to assess persons and their interaction with their environment. He mentions that, resilience theory (Van Breda, 2001), salutogenesis (Antonovsky, 1979), hardiness

No prescribed structured assessment protocols exist that are used locally, such as the Structured Analysis Family Evaluation (SAFE) (Consortium for Children, 2005), used in the USA and Canada; the Prospective Adopter’s Report (PAR) (British Association for Adoption and Fostering, 2013) used in the United Kingdom and the Trauma Informed Partnering for Safety and Permanence – Model Approach to Partnerships in Parenting (TIPS-MAPP) used in Kansas in the United States of America (Children’s Alliance of Kansas, 2014); available in the South African context but not known to be used.

Luke and Sebba (2013:12-14) have identified a range of scales that are used in assessing prospective foster parents. Scales that seem relevant in assessing prospective adoptive parents include, but are not limited to, the Parental Bonding Instrument (PBI) (Parker, 1990:281-282), the Social Readjustment Rating Scale (SRRS) (Holmes & Rahe, 1967:213-218), the Kansas Marital Satisfaction Scale (KMS) (Schumm et al., 1986:381-387), the Overt Interparental Hostility Scale (OIH) (Cummings et al., 1989:1035-1043) and the Kansas Parenting Satisfaction Scale (KPS) (Schumm et al., 1983:583-588), but do not seem to be used locally.

Common themes emerged from preliminary interviews with Kruger (2015) and Venter (2015), two registered adoption social workers, one working in private practice and the other in a government setting. According to these practitioners, the 16 PF questionnaire (Irving et al., 2014:38) is frequently used, the Heimler Scale of Social Functioning (Heimler, 1967) in some cases, the Social Assessment Scale (Taylor et al., 1998:210-218) and Parental Bonding Instrument (Murphy et al., 1997) are used by some South African adoption social workers for assessing prospective adoptive parents.

An inquiry into the need for a standardised assessment protocol, the design thereof and the implementation of such a protocol would provide a standard for practice and for aligning assessment criteria, as well as provide plausible evidence and protocols to practitioners.
1.5 RESEARCH METHODOLOGY

Botma *et al.* (2010:210) and Fouché and Schurink (2011:323) define research methodology as a process that involves the application of a variety of standardized methods and techniques in pursuit of knowledge (Botma *et al.*, 2010:110; Fouché & Schurink, 2011:321). A qualitative research approach was utilised as the research approach of choice. A qualitative research approach is a form of social enquiry that aims at understanding how people interpret the environment in which they live, work, receive care etc. A variety of approaches exist in qualitative research, but most of them share the same characteristics, which are to describe and interpret different phenomena as perceived by the persons involved (Malagon-Maldonado, 2014:120).

A qualitative research approach was followed in order to enquire about the protocols or procedures and assessment tools within these protocols followed by South African social workers rendering adoption services. By this the researcher aimed at understanding the protocols used by the various individuals. These protocols were then interpreted and described.

1.5.1 Research design

Henn *et al.* (2006:46) describe the research design as the plan, or strategy that will be utilised to shape the research project. This study will be of an exploratory-descriptive nature.

This study is of an exploratory-descriptive nature. Burns and Grove (2009) and Kothari (2004) state that exploratory research aims at gaining familiarity with a phenomenon, or at achieving new insights into it. The main purposes of such studies are those of formulating a problem for more precise investigation or of developing the working hypotheses from an operational point of view. The major emphases in such studies are on the discovery of ideas and insights. In this study, the researcher wished to learn about the assessment protocols and assessment tools within the protocols used by adoption social workers to assess prospective adoptive parents. The researcher aimed at gaining insight into assessment protocols and into tools within the specific protocols followed by South African social workers rendering adoption services. Descriptive research refers to research studies that have, as their main objective, the accurate portrayal of the characteristics of persons, situations or groups (Polit and Hungler, 2004:716). This approach is used to describe variables rather than to test a predicted relationship between variables.

1.5.2 Respondents and sampling

Purposive sampling was used where the researcher wanted to better understand situations. Purposive sampling can be applied to research in a number of ways, such as in preliminary
studies where the researcher is still testing the feasibility of a proposed study, sampling informants with a specific type of knowledge or skill (Li et al., 2006:62), case studies and when the population is too small for a random sample (Tongco, 2007:151). In this study the researcher aimed at purposively selecting participants based on their known expertise.

For purposes of this study the researcher aimed at including adoption social workers specifically certified as adoption specialists with the SA Council for Social Service Professions (SACSSP), and practitioners working within non-government organisations accredited with Department of Social Development (DSD) that offer adoption services, who are known for being specialist and rigorous assessors. The researcher started recruitment by contacting the individuals mentioned above and asking for referral to other professionals that fit the criteria outlined in this proposal. This implied that the researcher identified participants who fitted the criteria of this study’s sample by means of snowball sampling. The size of the population was not critical in this study since the researcher continued sampling until a saturation in content, processes or repetition in themes or practices was encountered. Guest et al. (2006) and Romney et al. (1986) are of opinion that 4-12 participants are sufficient in a study such as this, of which the participants have a high level of knowledge and experience in relation to a topic, where there is a narrow research scope and a homogenous target audience. Data saturation was achieved after having interviewed 8 participants.

Professionals employed by these organisations were contacted telephonically by a mediator, where after an electronic mail containing all the relevant information and documentation was sent to identify professionals for inclusion. In this study the researcher was not aiming for representation in the sample or generalization to the larger population, but rather obtaining experts who were able to inform the topic of this research. Transcriptions were made verbatim and analysed using scientific software, where after data analysis, spiralling and coding was used to thematically analyse the data.

1.5.2.1 Inclusion criteria

Participants were private adoption social workers, accredited in terms of section 250 of the Children’s Act (38/2005), or were accredited social workers working within an organisation accredited to render adoption services, or were employed by organisations specialising in adoption services.

1.5.2.2 Exclusion criteria

Any person who is not an accredited adoption social worker in terms of Section 250 of the Children’s Act (38/2005), or who is not employed by an organisation that is accredited to render adoption services was excluded from the study.
1.5.2.3 Profile of participants

The table below (table 1.1) contains the profile of the participants of the study. Only the participants with the setting in which they practice and their years of experience in the assessment of prospective adoptive parents are displayed.

<table>
<thead>
<tr>
<th>Participant number</th>
<th>Type of practice</th>
<th>Years of experience</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Private practice</td>
<td>18</td>
</tr>
<tr>
<td>02</td>
<td>Private practice</td>
<td>16</td>
</tr>
<tr>
<td>03</td>
<td>Private practice</td>
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<tr>
<td>05</td>
<td>Private practice</td>
<td>21</td>
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<tr>
<td>06</td>
<td>Organization</td>
<td>26</td>
</tr>
<tr>
<td>07</td>
<td>Private practice</td>
<td>16</td>
</tr>
<tr>
<td>08</td>
<td>Private practice</td>
<td>22</td>
</tr>
</tbody>
</table>

Table 1.1 Profile of participants

1.5.3 Data collection

Two data sets were compiled in this study. Firstly, after recruitment procedures had been followed and participants had agreed to participate, a participant was given detailed instructions regarding the compilation of a portfolio containing copies of tools, scales, or any systematic assessment procedures or references to such or report formats they follow in their practices. This was the first step of participation after recruitment. For this purpose selected participants were given three weeks’ time to compile such portfolio in preparation for the interview that was to be conducted.

As second data collection strategy, each participant was subjected to a semi-structured interview where participants discussed these artefacts and answers to semi-structured questions regarding their assessment practices and protocols followed. The various procedures or protocols used by South African social workers were determined by conducting in-depth interviews – a qualitative research technique that involves conducting intensive individual interviews with a small number of respondents to explore their perspectives on a particular idea, program, or situation (Botma et al., 2010; Boyce & Neale, 2006). The procedures and protocols were described, once interpreted. Commonalities and/or differences among the various procedures used were then described.
1.5.4 Research procedures

The respondents were requested to provide the researcher with a professional portfolio. In broad terms, a professional portfolio could be described as a collection of material or artefacts put together in a meaningful way to demonstrate the practice of the professional (Forde et al, 2009:2). The researcher requested respondents to compile a portfolio consisting of the following sections:

a. An explanation of the assessment tool, scale or systematic assessment procedure and associated protocol that is followed.

b. An explanation of the assessment criteria that qualify / disqualify a prospective adoptive parent.

c. An example of assessment protocols followed.

d. An example of assessment tools used.

e. An example of a recommendation or non-recommendation report, as provided to the Children’s Court.

Please note that respondents will be requested to remove all identifying details from the report.

Semi-structured interviews are frequently used by health professionals (Whiting, 2008:35-36) and are used when the research would benefit from a fairly open framework. They are also used when more useful information can be obtained from focused, yet conversational two-way communication with the participants (Pathak & Intratat, 2012). Rubin and Babbie (2013:114) point out that the researcher may ask open- and closed-ended questions. When asking open-ended questions, the respondent is asked to provide his / her own answer to the question. The researcher aimed at requesting respondents to answer open-ended questions that were contained within the interview schedule.

The researcher conducted semi-structured interviews that consisted of mainly open-ended questions.

The described methods of data collection provided the researcher with rich data which were coded and recoded. These methods enabled the researcher to administer thematic analysis to the obtained data.

1.5.5 Data analysis

Data obtained from the study were transcribed, where after data analysis, spiralling and coding was used to thematically analyse the data (Creswell, 2014:195). Transcriptions were made verbatim. Braun and Clark (2006:79) describe the process of thematic analysis as: identifying, analysing and reporting patterns (themes) within data. It minimally organises and describes a data set in detail. For the purpose of processing data obtained from the qualitative Interviews, the process of thematic analysis was implemented. Braun and Clark (2006:79) describe the
process of thematic analysis as: ‘identifying, analysing and reporting patterns (themes) within data’. It minimally organises and describes one’s data set in detail.

However, frequently it goes further than organizing data, and interpretations are made regarding various aspects of the research topic and research questions. The aforementioned authors furthermore identify 6 stages of thematic data analysis. The steps in this process are described as: becoming familiar with the data, generating initial codes, searching for themes, reviewing themes, defining and naming themes and producing the report.

The researcher applied a qualitative thematic data analysis strategy (Braun & Clark, 2006:79; Creswell, 2014:159). The following steps were utilised for data analysis:

- **Preparation, organisation and familiarising**: After having collected the data by conducting a series of semi-structured interviews, the researcher needed to make sure that all recorded data were fully captured before commencing with the analysing process. By typing and organising recorded data, the researcher had the opportunity of becoming familiarised with the data.

- **Reading, memoing and generating initial codes**: The researcher read data repeatedly in order to obtain a general sense of the information at which time the researcher started identifying general thoughts, codes and themes within the transcribed data.

- **Searching, reviewing, defining and naming themes**: By continuously reviewing themes and then transcribed data, the researcher, with the assistance of an assistant coder, named themes and assigned the relevant data to the different themes.

- **Representation of data and producing the report**: In order to compile a reflective report of the analysed data the researcher selected captivating extracts from the transcribed data in an effort to ensure trustworthiness.

The process of thematic analysis, as described, was utilised to analyse both the identified data sets. For the purpose of processing the obtained qualitative data, Atlas Ti Software was utilised. Telephonic interviews were digitally recorded using the Sony Audio Recorder, downloadable from the Google Play Store (Google, 2016), and transcribed in text format on a word-processor. Text files were entered into an Atlas Ti project in preparation for analysis. The researcher performed the analysis under supervision of the supervisor, who is knowledgeable regarding computerized analysis methods such as Atlas Ti. The results were processed, analysed and interpreted. During this process the researcher was looking for themes present in the entire set or sub-sets of data, which created a framework for making comparisons and tracing contradictions between the different respondents (Gomm, 2008:244). The researcher furthermore utilized graphical representations generated by the Atlas software to illustrate identified themes.
The second data set consisting of portfolio data was treated as artefacts or examples of scales and measurement tools, obtained prior to the interviews. These were organized either as offline data, in which case references to these artefacts were added to the Atlas database, or scanned and entered as textual data, depending on the volume realized. Artefactual data were linked to each participant’s interview data and subjected to analysis. Where needed and for trustworthiness purposes images of artefactual data were entered as raw data into the Atlas project. In doing so the artefact data were integrated with the main analysis and not regarded as being part of a separate dataset.

1.5.5.1 Literature review

A literature review has different purposes and strategies – this is dependent on the researcher’s use of quantitative or qualitative research methods. The literature review does, however, have certain elements common to both. A literature review aims at giving the researcher a clearer understanding of the nature of the problem that has been identified (Fouche’ & Delport, 2011:133-140).

Marshall and Rossman (2011:43) are of opinion that a literature study contributes in a number of ways. Amongst others, a literature study contributes as a source of focussing on or selecting a topic, confirmation that the same study has not been conducted elsewhere, denoting the assumptions of the research question, as well as the researcher’s knowledge pertaining to the most recent research on the field of study.

In this study an initial literature overview was used to explore the main philosophical direction and focus of the study. Assessment protocols, as well as assessment instruments used by practitioners in other countries, such as the United States of America and the United Kingdom, were studied. The main purpose of the literature study was for comparative reasons at conclusion of the data analysis process. In this case the literature was used as a control measure to determine the extent to which local findings confirm, refute or add to international findings regarding adoption assessment practices. The literature control thus enabled the researcher to reach viable and plausible conclusions regarding the state of local adoption assessment practices and how these compare to international practices. The researcher furthermore used literature to determine whether the assessment tools and associated protocols used locally can be considered sufficiently systematic, rigorous and adequate for local purposes.
1.6 ETHICAL ASPECTS

Ethical standards can be seen as principles that an individual or a group of people see as morally acceptable (Gray, 2009:576). Strydom (2011:114) sees it to be the researcher’s responsibility to follow ethical standards. The researcher received approval from the Health Research Ethical Committee of the Faculty of Health Sciences, Potchefstroom Campus (NWU-00011-16-A1) to conduct this study in the Social Work Child Protection field (Annexure 1).

According to the ethical risk level descriptors, this study is a low-risk study with minimum risk to participants. The applicable ethical risk level descriptors are contained within table 2:

<table>
<thead>
<tr>
<th>Ethical risk level descriptors</th>
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<tbody>
<tr>
<td><strong>Risk level</strong></td>
</tr>
<tr>
<td>Low risk (Minimal risk to human participants)</td>
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<td></td>
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<tr>
<td>No ethical approval needed</td>
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</tbody>
</table>

Table 1.2 Ethical risk level descriptors

1.6.1 Probable experience of the participants

Due to the fact that the study carried a low- to no-risk factor it was not foreseen that participants would experience anything out of the ordinary. Since participants explored facets of their own practices it was concluded that they directly benefitted from the discussion by explaining what they do within the constraints of their practice. This is not out of the ordinary as they have to explain these practices in their reports that are submitted to courts.

1.6.2 Dangers / risks and precautions

Due to the fact that the study carried a low- to no-risk factor, according to the provided risk descriptors, few dangers or risks could be foreseen. Factors such as the accidental disclosure of identifying details were addressed in the instructions given to the participants.
1.6.3 Benefits for participants

The outcomes of the research project could lead to further studies on the specific topic, which could in turn, lead to the development of a standardised adoption protocol that could be followed by adoption social workers in South Africa.

The study will be relevant and add value to the field of adoption social work, due to the following fundamental contributions:

- The study will provide information on prospective parent assessment protocols that are currently being used in South Africa.
- The study will provide guidelines regarding aspects that should appear in assessments.
- The study will provide information regarding the difference between the processes of screening and assessment.
- The study will compare assessment protocols being used by other countries, such as the United States of America and Canada, with those used locally.

This research will be cardinal in availing valuable information that can be utilised by adoption social workers in South Africa. The information contained within the research results and recommendations can be used by adoption social workers to determine important elements that should be addressed in the design and implementation of criteria used to assess prospective adoptive parents.

This study will afford the participants the opportunity of discussing their practices. This in turn will offer the participants the opportunity of critically evaluating their own practices, of learning from these evaluations and of improving them where necessary and possible.

1.6.4 Expertise, skills and legal competencies

The researcher is competent to conduct the study due to previous experience in research. This is based on the researcher’s educational record, knowledge and experience within his undergraduate studies, as well as his current field of practice.

The researcher received training at North-West University, Potchefstroom Campus predominantly in conducting in-depth interviews and analysing qualitative data by means of Atlas Ti prior to the execution of this research. The researcher has undergone training regarding the basics of Health Ethics research provided by the HREC. The researcher, however, needed continuous support and monitoring by the supervisor.
1.6.5 Facilities

Facilities were not required, as the research was conducted by utilising telephonic- and information technology equipment.

1.6.6 Legal authorization

The researcher determined whether he was required to obtain permission from any other entity in order to conduct the research. In the event that permission was needed, the permission was obtained preceding the commencement of the research project.

In the instance of respondents working in private practice, authorisation was needed from that specific practitioner. In the instance of an organisation, permission and authorisation was needed from the organisational head office. In all other instances the researcher requested participating organizations whether any goodwill or permissions are required prior to workers participating in the research. In all instances information regarding specific organizations was kept confidential and protected.

Authorisation with regard to the research project was obtained from the Human Research Ethics Committee. Authorisation was obtained by means of a letter concisely stating the aim and objectives of the research project. This letter was sent to the relevant person who was able to grant the researcher authority to undertake the research project within the specific organisation. It was requested that all permission and authorisation from organisational Head Offices be provided to the researcher in writing.

A written confidentiality agreement was undertaken with the mediator. The mediator poses no challenges to confidentiality, as the mediator is a long-practicing forensic social worker with a strong sense of ethical obligations.

1.6.7 Distributive justice

The recruitment of participants was fair and just in that the participants were selected on their scope of practice. No participant was disqualified or discriminated against due to gender, race, religion, or sexual orientation. The selection of participants was based on sound, scientific principles.

1.6.8 Voluntary participation

The voluntary participation of any participant is absolutely essential. This constitutes to the participant having legal capacity to consent, should do so by exercising free power of choice. This must happen without the intervention of any means. The Nuremburg Code (1949) concludes that no element of fraud, force, deceit, duress, over-reaching, or ulterior form of
constraint or cohesion may be used. The code further states that the participant should possess sufficient knowledge of the subject matter in order to enable him / her to understand and make an informed decision regarding participation.

Only participations willing to participate in the research project was considered to participate. Participation in the project was wholly voluntary. Participants were made aware that they may choose to discontinue participation at any time during the process.

1.6.9 Informed consent

Informed consent is a critical element in ethical research and can be described as a person's legal effective permission to participate in a study. This consent can be obtained from the person participating, or from a person's authorised representative. Informed consent is achieved when a subject receives full disclosure of the intent of the research project. This was ensured by providing the participants with an information- and consent form. The fact that participation is voluntary implies that the participant could stop, or withdraw from the research project at any time (Brown & Strega, 2005:4).

The aim and objectives of the study was disclosed to the participants. Participants were fully informed regarding all procedures followed during the research process. All possible advantages, disadvantages and risks were fully disclosed to the participants.

An information brief was sent to the participants prior to the interviews. The brief conveyed all relevant information. Participants were requested to sign the brief and consent to participation in the study. After the informed consent forms had been signed, the participants were requested to send them back to the researcher by means of electronic mail or a facsimile.

1.6.10 Publication of results

The findings of the study will be published in an accredited social work journal. Publication of results writing allows the researcher to convey the facts of the study. By publishing the findings, other researchers can use the findings to improve on their own study. The researcher thus has an ethical responsibility to publish the findings (Strydom, 2011:126).

1.7 TRUSTWORTHINESS

The truth and value of the study, its applicability, consistency and neutrality should be determined. Four alternative constructs are identified. De Vos (2005:345) describes these constructs as follows:

- How credible are the particular findings of the study?
• How transferable and applicable are the findings to another setting or group of people?
• How can we be reasonably sure that the findings would be replicated if the study was done with the same participants and the same context?
• How can we be sure the findings are reflective of the subjects’ views and not the creation of the researcher’s biases or prejudice?

Creswell (2014:201-203) recommends the use of multiple approaches that should enhance the researcher’s ability to assess the accuracy of findings, as well as to convince readers of that accuracy. The author mentions 8 primary strategies that can be followed to ensure the accuracy of findings. Of the mentioned 8, the researcher will triangulate different data sources, use rich and thick descriptions to convey findings and present negative or discrepant information that runs counter to the identified themes.

The research findings were trustworthy in that data saturation took place and due to the fact that in-depth and detailed data were obtained. It was possible to code and recode the obtained data in order to confirm the trustworthiness of the obtained data (Botma et al., 2010:232-233).

Credibility was ensured by means of peer debriefing, as described by Anney (2014:276). The researcher tested the growing insights into the study by exposing himself to searching questions of professionals willing to provide scholarly guidance.

Barnes et al. (2012:4) note that transferability is a process performed by the readers of research. They note that ‘readers note the specifics of the research situation and compare them to the specifics of an environment or situation with which they are familiar’. Thick descriptions were given, providing specific information and a detailed description of the topic under investigation in order to ensure transferability.

Confirmability, according to Anney (2014:215), refers to the degree to which the results of the inquiry could be confirmed or corroborated by other researchers. Conformability was achieved by providing an audit-trail. Visible evidence of the process and the product was offered – this will prove that the researcher did not simply find what he was set out to find, or that the findings were figments of his imagination.

1.8 LIMITATIONS OF THE STUDY

1.8.1 Time

The participants that practice privately are self-employed. The concept no work no pay played a major factor. The participants were pressed for time, as interviews were conducted during working hours. The less clients the participants were able to consult, the less their income was. These factors thus led to participants not divulging all the necessary information in full detail.
1.8.2 Missed consultations

Many participants had to sacrifice consultations in order to participate in the study. This implied a loss of income to the participants and many of the participants were frustrated and annoyed during the interviews. This led to shortened or rushed interviews and a lack of detail in the divulged information.

1.8.3 Trade secrets

Many of the participants did not wish to share documents with the researcher, as they view their documentation as trade secrets that give them an edge above their competition in adoption practice.

1.8.4 Cost of assessment instruments

Many of the participants did not want to share their assessment instruments, which are costly, with the researcher, as they have bought rights to use and interpret the assessment instruments.

1.9 DESCRIPTION OF TERMINOLOGY

1.9.1 Adoption

According to section 228 of The Children’s Act (38/2005), a child is adopted if the child has been placed in the permanent care of a person in terms of a court order that has the effects contemplated in section 242.

1.9.2 Adoptive parents

Adoptive parents refer to a person who has adopted a child in terms of any law (The Children’s Act, 38/2005).

1.9.3 Assessment

Assessment is a professional activity recognized by most major counselling organizations worldwide and conducted by social workers as part of the helping process (Peterson et al., 2014:90).

1.9.4 Assessment protocol

Clinical assessment protocols, according to InterRAI (2015), are designed to assist assessors in systematically interpreting information recorded. Roestenburg (2011:69) describes assessment protocols as ‘structured assessment procedures designed to provide a systematic character to the assessment sequence’.
1.9.5 Social work

The social work profession promotes social change, problem-solving in human relationships, and the empowerment and liberation of people to enhance wellbeing. Utilizing theories of human behavior and social systems, social work intervenes at the points where people interact with their environments. Principles of human rights and social justice are fundamental to social work (Hare, 2004:407-424).

1.10 DISSEMINATION OF THE RESEARCH REPORT

This report consists of three sections:

- Section A: Orientation to the study
- Section B: Manuscript for examination
- Section C: Conclusions and recommendations
REFERENCES

Acts see South Africa.


Centre for Adoption Support and Education. 2015. Centre for Adoption Support and Education. http://adoptionsupport.org/ Date of access: 25 May. 2015.


SECTION B

A REVIEW OF ASSESSMENT PROTOCOLS USED IN SOUTH AFRICAN ADOPTION PRACTICE

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Willem JH Roestenburg
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ABSTRACT

Child adoption is a highly specialised field that has, as its main objective, providing a child with a permanent form of care. Adoption practitioners are faced with the gruelling task of selecting suitable caregivers for the adoptable child. The South African Children’s Act (38/2005) provides limited guidance to practitioners on how to undertake this task, leaving practitioners to their own devices. This article explores and describes the practice of eight rigorous adoption assessors, finding that adoption assessment protocols differ from practitioner to practitioner. The various protocols consist of different methodologies and instruments, used at the assessor’s discretion.

Keywords

Adoption, South Africa, Protocol, Assessment

2.1 INTRODUCTION

Adoption ranks among the most drastic and far-reaching orders a court can issue in respect of a child (Fenton-Glynn, 2013). In line with international and regional commitments such as the United Nations Convention on the Rights of the Child (United Nations, 1989) and the African Charter on the Rights and Welfare of the Child (Organization of African Unity, 1990), these policies encourage the uptake of permanent forms of alternative care such as adoption for children with inadequate or no parental or family care. This support is premised on the fact that unlike less permanent forms of care such as fostering and residential care, adoption potentially provides permanency and protection to the relationship between the adopted child and the adoptive family (Mokomane and Rochat, 2011). The Children’s Act (38/2005) determines that a child is adopted if the child has been placed in the permanent care of a person, or persons in terms of an adoption order. Adoption can thus be viewed as a form of permanency planning.
(Holland, 2011), which constitutes that a child has been removed from temporary substitute care and placed in the permanent care of another familial entity (Frey et al., 2008).

The Act states that a child may be jointly adopted by a husband and wife, partners in a permanent life partnership, or by other persons sharing a common household and forming a permanent family unit. The Act lists several other persons who may adopt a child, the common criteria amongst the aforementioned being that the applicant must be older than 18 years of age.

The Act furthermore states that persons who have applied to adopt a child have to be ‘properly assessed’ by an adoption social worker to ensure that the applicants are ‘fit and proper to be entrusted with full parental responsibilities and rights in respect of the child; and must be willing and able to undertake, exercise and maintain those responsibilities and rights’.

According to the South African government (South Africa, 2016), an adoption agency should be contacted, where after ‘the adoption agency will conduct a screening/home study to check whether the applicants are fit and proper to adopt a child. If the agency is satisfied with the results, they will put you on a Register of Adoptable Children and Adoptive Parents while they help you search for a child who is available for adoption.’ The Act does not, however, define the criteria for a prospective adoptive parent to be found ‘fit and proper’ and does not specify the criteria for a prospective adoptive parent to be able to maintain the rights and responsibilities of the adoptable child. These decisions are most likely based on recommendations made by the adoption worker’s assessment of these constructs.

The aim of the study was to conduct a broad exploration and description of the nature, content and utilisation of assessment tools, scales and systematic procedures and to determine whether these are used within a structured protocol/process in adoption assessments.

2.2 CURRENT ASSESSMENT PRACTICES

The assessment of parenting capacity is one of the core functions of child protection. Literature that adequately assesses how effectively current parenting capacity assessments inform decisions regarding the child is very sparse (White, 2005). Although literature examining the process of adoption that needs to be followed by adoption practitioners is greatly lacking (Doubell, 2014), it has been found that in South Africa, the only way in which one can legally adopt a child is by working through an accredited adoption agency, or with the assistance of an adoption social worker functioning within the statutory accredited adoption system. When working through an adoption agency, the process usually starts with the prospective adoptive parents submitting an application to the agency. The process is described as a screening
process normally involving orientation meetings, interviews with a social worker, full medicals, marriage and psychological assessments, home visits, police clearance and references. The screening process allows social workers to get to know prospective adopters as a family, their motivation to adopt and their ability to offer a child a warm, loving and stable home (YourParenting, 2015). Gift of life (2009) notes that the adoption screening process in South Africa consists of an orientation meeting, completion of all application forms and certificates and a home visit by the social worker, where after the Children’s Court process will take place. Gift of life provides the most comprehensive explanation of the screening process by mentioning that parents applying to adopt a child will need to prove their health, character, social and financial status by supplying medical certificates, character references, bank/financial statements and criminal record clearance. Even though this is the most comprehensive and detailed explanation of the adoptive parent screening process, it is still unclear what is meant by a person’s social status.

Dickerson and Allen (2007) and Miller and Bentovim (2007) report significant variation in qualifications of adoption assessors, including that of social work and psychology and with varying levels of skill and method used. The authors found that unless supervisors in agencies were former assessors or screeners themselves who had moved up the ranks within the agency, assessors were unlikely to ever have received authoritative instruction on how to screen foster care and adoptive applicants. As a result of this, according to the authors, standards vary considerably from agency to agency and private adoption social worker to private adoption social worker, with levels of excellence typically set by individual supervisors without regard to uniform applications of accepted practice. The only common denominator is an expectation, false as it often turns out, that foster and adoptive home studies will follow an established outline for providing required information regarding the applicants.

Farmer et al. (2010) mention that the use of standardised, protocols, questionnaires and tools in the assessment of prospective adoptive parents is being debated. In their survey of adoption practice they concluded that ‘few adoption organisations occasionally’ used the Attachment Style Interview or the Adult Attachment Interview format to assess attachment styles in prospective adoptive parents. The authors continue by stating that social workers are still inclined to depend on the skills of external professionals, such as clinical psychologists, to inform them about personality characteristics of prospective parents. It is important to note that the authors make it clear that standardised assessment tools are only occasionally used. This implies that there is a definite lack in standardised procedures followed by adoption social workers.
Although standardised assessment instruments are occasionally used, still no uniform assessment protocol exists that prescribes the use of certain standardised assessment procedures and instruments associated with these procedures. The lack of a standardised assessment protocol or sequential plan for conducting a procedure poses certain challenges such as lack of uniformity, no psychosocial evaluation, no effective information gathering or analysis tools, judgments based on worker bias and irrelevant home study reports (Consortium for Children, 2005), which could be eliminated by implementation of a standardised prospective parent assessment protocol. Clinical assessment protocols, according to InterRAI (2015), are designed to assist assessors to systematically interpret information recorded.

2.3 RATIONALE FOR THE STUDY

The need for adoption-competent practices has been well researched in the United States of America, but research on the topic lacks in the South African context. Since 2008 the Centre for Adoption Support and Education has provided a multi-layered initiative for training US-based adoption practitioners. The curriculum was designed to develop the specific knowledge skills, values and competencies of professionals rendering adoption services (Centre for Adoption Support and Education, 2015). In their study regarding the need for adoption-competent mental health services, Atkinson et al. (2013) evaluated the effectiveness of the training in the practice of professionals. Participants reported that after having received training they were collecting more background information, were more aware of adoption issues, were using new assessment procedures and were comfortable asking new questions. The participants clearly indicated that there was an improvement in their adoption practices following the introduction of new and structured assessment procedures.

Miller and Bentovim (2007) suggest a range of assessment approaches and further suggest that it is helpful to use a combination of approaches when making an assessment. An evidence-based approach is recommended as part of the assessment process, in order for the assessments to be based on clear and systematic ways of collecting and analysing information. The authors furthermore suggest the use of standardised assessment tools, which are grounded in good practice and empirically validated to provide results that can be well evidenced. The authors recommend using the Assessment Framework, which is an analysis of the needs of the child and the parenting capacity to respond appropriately to those needs within the family context (Lancashire County Council, 2016). This provides a range of standardised evidence approaches to interviewing children and families and assessing their needs. The assessment framework includes the Home Observation for Measurement of the Environment (Home) Inventory (Caldwell and Bradley, 1984, 2003), the Family Pack of Questionnaires and scales (Cox and Bentovim, 2000), the Family Assessment (Bentovim and Miller, 2001), the
Attachment Style Interview for Adoption and Fostering (Bifulco et al., 2008) and the In My Shoes interview (Calam et al., 2000).

Miller and Bentovim (2007) continue to suggest the process of assessment by using the Assessment Framework at different stages when assessments of support needs are made. The suggested model involves a process of assessment, analysis and planning. This assessment process includes collecting information on the needs of each dimension (adoptable child’s developmental needs, parenting capacity and family and environmental factors), analysis of the relationship between each of the dimensions of each other and an analysis of the interrelationship between the dimensions of the different domains. This analysis can then be used to identify the support needs of the adoptable child and prospective adoptive parents. The analysis will also provide insight into what support, interventions and services will be most effective to respond to the identified needs of the child and family in question (Department for Education and Skills, 2006).

This study explored the assessment processes, protocols or methods and instruments currently used within the South African context to assess prospective adoptive parents. This can be regarded as a foundation for determining whether a need exists for the development and refinement of a standardised prospective adoptive parent assessment protocol and for providing some guidelines towards future standardization.

The quality of assessments is important. While it is not always straightforward to show that good outcomes for children necessarily follow from good assessments, there is certainly evidence to support the link and, conversely, demonstrate that bad or inadequate assessments are likely to be associated with worse outcomes (Turney et al., 2011). This article can contribute to the field of adoption social work by providing results that will directly improve current processes implemented in adoption social work services. This research project may generate information that increases our understanding and directly influences future research (Emmanuel et al., 2010).

Roestenburg (2011: 69) describes assessment protocols as ‘structured assessment procedures designed to provide a systematic character to the assessment sequence’. An assessment protocol, according to the author, is the third component of the triangulation process in eometrics. A standardised protocol can thus be described as a detailed system, set of rules or procedure that has to be adhered to. This set of rules or procedure has the same particular features and level of quality.

It can be argued that once adoption practitioners have identified and formulated a standardised assessment protocol, including a selection of standardised assessment tools within such a
protocol, they will be able to conduct more accurate and accountable prospective adoptive parent assessments. This in turn would enable practitioners to make more accurate and accountable recommendations to the Children’s Court with regards to the vetting of prospective adoptive parents. Indirectly this study may contribute to a more efficient system that operates in the best interests of child protection in general.

The output of the research findings can contribute to a longer-term objective, namely design, testing and implementing a standardised assessment protocol specifically for use within the South African context.

2.4 METHODOLOGY AND RESEARCH DESIGN

A qualitative research approach was utilised as the research approach of choice. A qualitative research approach is a form of social enquiry that aims at understanding how people interpret the environment in which they live, work, receive care etc. A variety of approaches exist in qualitative research, but most of them share the same characteristics, which are to describe and interpret different phenomena as perceived by the persons involved (Malagon-Maldonado, 2014). A qualitative research approach was followed in order to enquire about the protocols or procedures and assessment tools within these protocols followed by South African social workers rendering adoption services. In doing so, the researcher aimed at understanding the protocols used by the various individuals. These protocols were then interpreted and described.

This study is exploratory-descriptive in nature. Burns and Grove (2009) and Kothari (2004) state that exploratory research aims at gaining familiarity with a phenomenon, or at achieving new insights into it. The main purposes of such studies are those of formulating a problem for more precise investigation or of developing the working hypotheses from an operational point of view. The major emphases in such studies are on the discovery of ideas and insights. In this study, the researcher wished to learn about the assessment protocols and assessment tools within the protocols used by adoption social workers so as to assess prospective adoptive parents. The researcher aimed at gaining insight into assessment protocols and into tools within the specific protocols followed by South African social workers rendering adoption services. Descriptive research refers to research studies that have, as their main objective, the accurate portrayal of the characteristics of persons, situations or groups (Polit and Hungler, 2004). This approach is used to describe variables rather than to test a predicted relationship between variables. The various procedures or protocols used by South African social workers were determined by conducting in-depth interviews – a qualitative research technique that involves conducting intensive individual interviews with a small number of respondents to explore their perspectives on a particular idea, program, or situation (Botma et al., 2010; Boyce and Neale, 2006). The
procedures and protocols will be described, once interpreted. Commonalities and/or differences among the various procedures used will then be described.

Purposive sampling was used as the researcher wanted to better understand situations. Purposive sampling can be applied to research in a number of ways, such as sampling informants with a specific type of knowledge or skill, case studies, and when the population is too small for a random sample. The researcher engaged in a series of strategic choices regarding with whom, where and how to conduct the research (Tongco, 2007; Palys, 2008). In this study the researcher aimed at purposively selecting participants on grounds of their known expertise, that were limited to social workers specifically accredited as adoption specialists with the SA Council for Social Service Professions (SACSSP) and who are known to be rigorous assessors.

Sampling continued until data saturation was achieved. Guest et al. (2006) are of opinion that there is not a one-size-fits-all method to reach data saturation, because study designs are not universal. Researchers do, however, agree that when no new data, no new themes and no new codes occur, data saturation has been achieved (Fusch and Ness, 2015). Guest et al. (2006) and Romney et al. (1986) are of opinion that 4-12 participants are sufficient in a study such as this, where the participants have a high level of knowledge and experience concerning a topic, where there is a narrow research scope and a homogenous target audience. Data saturation was achieved after having interviewed 8 participants.

Two data sets were compiled in this study. Firstly, after recruitment procedures had been followed and participants had agreed to participate, a participant was given detailed instructions regarding the compilation of a portfolio containing copies of tools, scales, or any systematic assessment procedures or references to such or report formats they follow in their practices. This was the first step of participation after recruitment. For this purpose selected participants were provided three weeks’ time to compile such a portfolio in preparation for the interview that was to be conducted. As second data collection strategy, each participant was subjected to a semi-structured interview where participants discussed these artefacts and answers to semi-structured questions regarding their assessment practices and protocols they followed.

Semi-structured interviews are frequently used by health professionals (Whiting, 2008) and are used when the research would benefit from a fairly open framework. They are also used when more useful information can be obtained from focused, yet conversational two-way communication with the participants (Pathak and Intratat, 2012). According to Rubin and Babbie (2013), the researcher may ask open- and closed-ended questions. When asking open-ended questions, the respondent is asked to provide his/her own answer to the question. The
researcher aimed at receiving answers from respondents to open-ended questions contained within the interview schedule. The researcher conducted semi-structured interviews that consisted of mainly open-ended questions. The described methods of data collection provided the researcher with rich data that were coded and recoded. These methods enabled the researcher to administer thematic analysis to the obtained data.

2.4.1 The participants

For purposes of this study the researcher included 8 adoption social workers specifically accredited as adoption specialists with the SA Council for Social Service Professions (SACSSP) and practitioners working within non-governmental organisations accredited with the Department of Social Development (DSD), which offer adoption services, and are known for being specialist and rigorous assessors. The researcher started recruitment by contacting the individuals mentioned above and asking for referral to other professionals that fit the criteria outlined. The size of the population was not critical in this study since the researcher continued sampling until saturation in content, processes and repetition in themes or practices was encountered. This implied that the researcher identified participants who fitted the criteria of this study's sample by means of snowball sampling, which is a method suitable for identifying participants with very specific inclusion criteria (Hennink et al., 2011).

Participants were private adoption social workers, accredited in terms of section 250 of the Children’s Act (38/2005), or were accredited social workers working within an organisation accredited to render adoption services in terms of section 251 of the Children’s Act (38/2005), or were employed by organisations specialising in adoption services. The participants were selected based on their experience, of which all had more than 10 years’ experience in the adoption field, had developed their methodologies and processes over time and had experience regarding practice accepted by the judicial system. Any person who is not an accredited adoption social worker in terms of section 250 of the Children’s Act (38/2005), or who is not employed by an organisation that is accredited to render adoption services was excluded from the study.

Qualifying professionals were contacted telephonically by a mediator, where after an electronic mail containing all the relevant information and documentation was sent to identify professionals for inclusion. In this study the researcher was not aiming for representation in the sample or generalization to the larger population, but rather at obtaining experts who are able to inform the topic of this research.
2.5 THEMES FROM NARRATIVES

2.5.1 Theme 1: Assessment process

2.5.1.1 Type of adoption determines the protocol

The participants were strongly in agreement that the type of adoption the prospective adoptive parents apply for determines the protocol that will be utilised to conduct the prospective adoptive parent assessment.

*If it’s a new adoption, like adoption, you know, from scratch, not a stepparent or whatever, then we look at motivation for adoption and we use a sand tray to look at issues, you know, like is there infertility, you know, what has brought them to that point.* (Participant 02)

*You know, prospective adoptive parents can… you get different types of adoptive parents. Because you get, for example, parents that apply for a stepparent adoption. Then you get parents that apply for a baby adoption, or you’ll get adoptive parents that are foster parents and then want to adopt the child. So it differs in that respect what one will do.* (Participant 03)

*For me, as a practitioner and an adoptive social worker, circumstances are different, as I say to you.* (Participant 05)

*All adoptions are not the same, you know. If it is stepparent child adoptions, it differs from baby adoptions. You know, the age of the children. So every adoption’s content will change and the assessments according to that as well.* (Participant 07)

The adaptation of the process is in accordance with the views of Matthews and Cramer (2006) who note that there are basic components that need to be considered in all screening processes. Each one will nevertheless be tailored to match the uniqueness of every prospective adoptive parent. In the South African context four types of child adoptions are distinguished. The main types of adoption that can be applied for are stepparent adoptions, related adoptions, unrelated adoptions and foster child adoptions (Child Welfare Information Gateway, 2013a; Raquel et al., 2007; Child Welfare Information Gateway, 2013b). The participants indicated that they follow a distinctive assessment protocol for each of the different types of adoptions.

2.5.1.2 No standard protocol

The Children’s Act (38/2005) states that persons who have applied to adopt a child have to be ‘properly assessed’ by an adoption social worker to ensure that the applicants are ‘fit and
proper’ to be entrusted with full parental responsibilities and rights in respect of the child and be willing and able to undertake, exercise and maintain those responsibilities and rights. The Act does, however, not provide a protocol to assess a prospective adoptive parent in order to determine whether that person is fit and proper. Assessment protocols therefore vary according to the distinctive adoption practitioner and/or organisation that employs adoption practitioners. According to the participants:

_They [adoption practitioners] don’t know... you don’t know, that the standards of the adoptions that they are doing are going to be the same. So, you know what I mean? There are those challenges and then off course the affordability thing, ’cause some people... they won’t have to do it, they won’t go through all the steps. Look, we have about 4 or 5 sessions with a client, whereas someone will do a home visit that includes an informal adult assessment. You know, they’ll just do it more... rather than use formal tools, just use their observation and put it in a smaller quicker process to make it more affordable, but you don’t know how really... (Participant 02)_

_Every person follows his own head. There aren’t any protocols that should be followed. (Participant 07)_

_Look, I think it could be good [a standardised assessment protocol]. I definitely think so, because everybody actually does what they want to. I think such a standardised one would be very good. (Participant 04)_

_...but currently there is no scale for adoptions, so I sometimes feel the more money I have, the easier I can adopt, because I have money power. (Participant 08)_

_...you have your guideline that you follow. There isn’t anything in writing that tells a person what should be done. (Participant 07)_

In a 2009 study by Mokmane and Rochat (2011) portraying trends and patterns in South African adoption practice, the findings confirm the lack of a standardized assessment protocol, indicating that social workers felt that there was a lack of consistency and uniformity in the interpretation and implementation of the adoption legislation. Public sector social workers particularly felt, and acknowledged, that they did not adequately understand the requirements and processes of the legislation regarding child adoption. The adoption process in South Africa is notoriously viewed, both by service providers and adoptive parents, to be long, painful and complicated.
2.5.1.3 Interviews and psychosocial investigation

Although no standardised prospective adoptive parent assessment protocol exists, there are commonalities that exist in the practices of all participants. The most prominent assessment activities reported by the participants include an individual interview with the applicants, followed by an interview with the applicants as a couple so as to conduct a psychosocial investigation, as the participants explained:

…if they [prospective adoptive parents] contact me for an adoption, irrespective of the type of adoption, I start with an individual interview. (Participant 03)

I use an interview. Uhm, basically I use interviews with the parents, to get to know them better. Who are they? Where do they come from? The usual social investigation. (Participant 04)

During the interviews with the prospective adoptive parents, the practitioners focused on a variety of psychosocial elements that include communication patterns, conflict management, emotional factors, financial aspects, interpersonal relationships, personality components, problem-solving abilities, crisis-management skills, past experiences, infertility issues, support structures, work and parenting skills. This enquiry does not follow a systematic route and the various elements listed above are mostly dealt with simultaneously. As one participant accurately summarised her assessment of the applicants as individuals, as well as a couple:

Because it is not that they [the prospective adoptive parents] always appear before the magistrate, so that magistrate needs to get to know them from my report. Uhm, then I start… them I get the whole pedigree, you know. So then they must tell me where they were born, where did they grow up, experience of childhood, went to school, after school. Uhm, you know- everything… work, uhm, where did they meet until now- where they are now. So a person gets that complete from them. (Participant 03)

The interview, according to Stanley (2005), is the primary mechanism whereby social workers gain information. The validity of the interview is strengthened through the collection of evidence. Information gathering is the primary purpose for conducting an interview with prospective adoptive parents.

2.5.1.4 Motivation for adoption

The couple’s motivation for adoption is strongly taken into consideration. The participants are of opinion that the motivation for adoption should be in the best interest of child and for no other reason, such as fulfilling an emotional need of the prospective adoptive parents.
If it’s a new adoption, like adoption, you know, from scratch, not a stepparent or whatever, then we look at motivation for adoption and we use a sand tray to look at issues, you know, like is there infertility, you know, what has brought them to that point…
(Participant 02)

Where I focus, uh, what is their motivation for adoption… It must not be to fulfil their [prospective adoptive parents] emotional needs. It must really be about the child.
(Participant 03)

This is in accordance with Fahlberg (2012), Gallinger (2012) and Denby et al. (2011) who place strong emphasis on the motivation of prospective adoptive parents to adopt a child. The authors mention that the motivation for the need to adopt a child needs to be explored. The authors note that it is important to determine why a family wants to adopt, why now and what their expectations for a child are. A major factor in evaluating the strength of the family’s motivations is to understand the family’s own stories and the effect their experiences will have on their parenting abilities.

2.5.1.5 Battery Screening

A battery screening is required in terms of section 126 of the Children’s Act (38/2005). This battery screening includes confirmation that the applicants do not have a criminal record and that their names do not appear on the national register for sex offenders (NRSO). The prospective adoptive parents are required to apply for a police clearance certificate and submit a form 30 (Regulation 44) to the Director-General of the Department of Social Development, which is an inquiry by a person to establish whether his/her name is included in part B of the national child protection register.

And then obviously the battery check, uh, to check for the sexual offences register. That’s standard for all the adoptions and then get a letter from the Department to say that they are not on that list and they need police clearance as well. So those are required by the court in any case. (Participant 02)

…there are screening programs by the government… police clearance and sex offenders and this thing about sex offenders. (Participant 05)

…it they have done a police clearance to make sure they aren’t criminals, uhm, obviously with the police. Then there is also a form 30 for sexual the sexual offenders register to make sure that their names don’t appear on the list for sexual offenders in South Africa. They can still get away if they have a criminal record for drunk driving, or something like
that and it was long ago. Then a person can take it into consideration, but is there a sexual offence against them, they are rejected. For sure. (Participant 04)

A background and criminal check of prospective adoptive parents is in accordance with international requirements and standards, varying slightly from country to country. The safety and welfare of the child is paramount and the practitioner must conduct checks on prospective adopters and any adult member of their household. The practitioner should make it clear that prospective adoptive parents will not be able to proceed with the adoption where criminal checks identify them or any adult member of their household as having been convicted of a specific offence that include, but are not limited to, offences against children and sexual offences (Department for Education, 2014; Child Welfare Information Gateway, 2016).

2.5.1.6 Marriage assessment

A marriage assessment seems to be at the centre of the assessment protocol. If the applicants are not married, stability in the relationship is the considered factor.

_Uhm, obviously, I think the marriage is also important, because the adoption… bringing a child into… especially when you got older children coming in, that does put a lot of stress in the family circle._ (Participant 02)

_I usually do a marital screening, uhm, according to my know… my experience and what I have learnt in my training regarding marriage counselling. So I always do a marital screening…_ (Participant 04)

_That the marriage must be a healthy marriage. We look at their communication with each other, their conflict management, uhm, do they grant each other space for development, personal development, that kind of stuff._ (Participant 05)

The importance of the stability of the marriage/relationship of the prospective adoptive parents is important in the views of Wilson and Wilcox (2006), who noted that emerging research on family structures suggest a clear conclusion; children raised in intact married families do significantly better on a range of social, behavioural and emotional outcomes.

2.5.1.7 Interactional analysis and home study

The participants assess the interaction between the applicants and any children already in the family system. The views of children already in the family system are taken into consideration.
We kinda look at their actual house and it’s also an opportunity to look at the interaction in the family- especially if there are children already. Especially in that situation. (Participant 02)

If this couple has other children, I interview these children to determine how they feel about the adoption. Are they happy if mommy and daddy adopt another child? I have interviews with everybody. (Participant 06)

And if there are children in an existing family- where there are already biological children. What are the relationships there? What are the emotional factors? What are things that need attention? How do they understand the adoption? (Participant 07)

An interactional analysis is in line with the views of Falloon (2015) and the Iowa Department of Human Services (2008) who mention that an interactional family analysis is the foundation of good planning. Assessing includes understanding the family functioning and family systems, the functional strengths and needs within the domains and cycle of need. The focus is extended beyond the dyad of parent and child and includes the social context of the marriage and family.

A home study is conducted. The home study can be conducted during any phase of the assessment process. Many participants combine the home study with other processes. No formal assessment guidelines are available to conduct the home assessment. The participants consider different variables when conducting a home study. The participants rely strongly on informal assessment procedures, such as knowledge, intuition and professional observation when conducting a home study.

We do a home visit, you know, to see the interaction at home and to see what the facilities look like and then I would, if there is an older child involved I would do a child assessment. (Participant 02)

I do one home visit. Uh, if there is… if it is a family, I do a family interactional analysis. I forgot to tell you. It deals with relationships, communication patterns, family patterns and that type of thing. Then I also do a normal home visit, you know, to see what there is and what there is not and what are the risks around the home- where is it situated and so forth. (Participant 04)

Then you can see, you know… how they [prospective adoptive parents] react, their living environment; you see how the children go on with their daily routine. You pick up quickly- is there a comfortability. Is it the place where the parents can relax? If something is very itchy, you will see it very quickly. (Participant 03)
I look at the circumstances. What is the community that they live in, uhm ja, so I’m not very… you don’t need 4 bedrooms and now you… you can’t adopt a child. You can do it from a shack. It is about that you live where you say you live, uhm, and that that child will be safe. So actually its more about safety, if I place the child there, because we can’t force our standards on others. (Participant 07)

The home study is an important step in the adoption process according to the Child Information Gateway (2015) and Wilson et al. (2005), who mention that the home study is an intensive process that can be overwhelming to adoption seekers if not dealt with appropriately. The authors are of opinion that the home study serves three main purposes in that it educates and prepares the prospective adoptive parents, evaluates the capability and sustainability of the family to adopt and gathers information about the prospective adoptive family.

2.5.1.8 Experience in the adoption field, clinical judgement, knowledge, professional observation

Participants mostly rely on experience in the adoption field, clinical judgement, knowledge, professional observation and intuition:

So many times a person must listen to your gut feeling. (Participant 03)

If it seems dodgy, I would do more home visits… You can, I can, because I have done it for many years, I can see- here, this situation is not going to work. It is too much for me. I think it’s a person’s gut feeling. Because I have been doing it for so many years. (Participant 04)

I don’t always use those things as precisely [assessment instruments]. Sometimes I use other things. Sometimes I use my own knowledge, so it differs from it each situation. It really differs. (Participant 05)

If I say risk, then it is also in terms of the interviews that you do with the people. You know, in your interviews you pick up things and then you investigate it further. (Participant 07)

… we have about 4 or 5 sessions with a client, whereas someone will do a home visit that includes an informal adult assessment. You know, they’ll just do it more… rather than use formal tools, just use their observation and put it in a smaller quicker process to make it more affordable. (Participant 02)
If I am in any way unsure about my own observation, then I refer them to someone else—only for a couple of sessions. It might be for a personality analysis, or that somebody else gives attention to it… (Participant 04)

The participants’ reliance on informal assessment techniques is in line with the views of O’Loughlin and O’Loughlin (2015) who maintain that observation is a key part of social work and, in essence, adoption practice. The authors maintain that observation informs understanding, recording and analysing what is seen, which links to the practitioner’s assessment.

2.5.1.9 Character references

The participants greatly rely on character references from referees. The character references serve a dual purpose, which includes both fact checking and determining those prospective adoptive parents’ characters, as perceived by external sources.

And then we ask them for references and then we get… we have a standard questionnaire that we get them to fill out that includes, you know, references from different people in their lives—someone that’s family, someone that’s a friend, someone that’s like a spiritual leader or a mentor kind of person. (Participant 02)

I assess it and thereafter I ask for character references from anybody who knows the stepfather alone as a stepfather. To explain to me the kind of person that he is. And also the stepmother… I mean the biological mother and the third one should be someone who knows them together as a couple… from the time they were previously married and since they have been married. (Participant 05)

You talk to uncles and aunts and grandmas and grandfathers. They will tell you quickly. You shouldn’t throw away ministers. (Participant 07)

I want characteristics, so it’s all about the characteristics. I ask the people—how would you describe these people? Remember now— I have questionnaires. So if these things don’t correlate at the end of the day… if you say in your questionnaire, if you for example… if your friends say you are an extrovert and you like this [activities] and I look back and these things don’t correlate, then I wonder and I would call these people [referees] in. (Participant 03)

Sar (2000) confirms the importance of character references from referees and the study of autobiographical statements as an activity to supplement the assessment process. It is surprising that in a study by Doubell (2014) only 33.3% of adoption practitioners interviewed
indicated that they make use of character references to supplement their assessment of prospective adoptive parents. The contrast in literature and empirical data proves that, once again, this assessment practice is left to the discretion of the practitioner.

2.5.1.10 Medical assessments

Participants refer the prospective adoptive parents to medical professionals and medical specialists for an examination and a report that forms part of the final report that is submitted to the Children’s Court. The main purpose of a medical assessment is to determine whether the prospective adoptive parents have any chronic illnesses or disease that could hinder them from fulfilling parental responsibilities. The presence of any physical ailments does not disqualify the prospective adoptive parents from adopting a child, if the applicant receives the relevant form of treatment for the ailment.

You know, we have a GP do a medical and state if that person has any chronic illnesses that could hinder them from being a parent. (Participant 02)

They must hand in a letter, if it is regarding infertility, then they must hand in a letter from a gynaecologist and, uhm, a letter from a general practitioner stating that they are healthy, or it is under control, or whatever. (Participant 03)

… If they for instance have psychiatric problems, say they are for example bipolar, I want a doctor’s letter from a psychiatrist and there must be a doctor’s letter in any case for both applicants. (Participant 04)

Sometimes I also ask for a medical, especially if it is a young couple in their 30s. To show that there is infertility and that they did make an effort. Some of them – there is nothing medically wrong. They just can’t get pregnant. (Participant 05)

The physical- are they healthy? Will they be able to look after a child in the longer term? (Participant 06)

They [general practitioners] must look at things like mental illness, impaired hearing, impaired sight, speech defects, chemical imbalances, disease, abnormalities, cancer, heart condition, allergies, diabetes, arthritis, other medical conditions (which could also be HIV), ulcers, depression. Usually a physical examination where you look at all those things. Ability to have own child. Has person received treatment for infertility. (Participant 07)

I ask for a medical, a complete medical. I have designed a form for the doctor to make sure that the people are healthy, or not. If they are not healthy- it does not mean I will
A major and complex factor, according to the Department for Education and Skills (2006), lies in assessing whether a prospective adopter has the capacity and potential longevity to care for a child. As part of the checks, the practitioner should consider the health of the prospective adoptive parents. Health problems need to be identified and assessed by a medical practitioner.

### 2.5.2 Theme 2: Assessment instruments

The participants indicated that they make use of various assessment instruments in the assessment of specific factors of the prospective adoptive parents’ psychosocial functioning. The instruments used include the Adult attachment interview (AAI), the Family Systems Test (FAST), the Heimler Scale of Social Functioning (HSF), the Generalized Contentment Scale (GCS), the Keirsey Temperament Sorter (KTS-II), the Personal multi-screening inventory (PMSI) or Multi-Problem Screening Inventory (MPSI), the Prepare/Enrich Relationship Assessment Inventory and a combination of the mentioned instruments. It is important to note that the use of specific assessment instruments, or the use of assessment instruments are not a legislative requirement in order to adopt a child. The purpose of the practitioners’ use of assessment instruments is to scientifically verify their final adoption recommendations, which are then presented to the Children’s court. These instruments will briefly be discussed are discussed in detail in figure 2.1.

#### 2.5.2.1 Adult attachment Interview (AAI)

Participants 02 and Participant 08 indicated that they use the adult attachment interview as an assessment instrument to determine the prospective adoptive parents’ ability to form secure attachment with the adoptable child.

> …in terms of our assessments we would do… We use the RP Clinic’s adult assessment. (Participant 02)

> I also do an adult assessment. Years ago I attended a course of Renee Potgieter about this assessment where you use projection techniques and questionnaires… (Participant 08)

The adult attachment interview stems from attachment theory as originally defined by Bowlby (1958, 1969, 1973, 1980, 1982, 1988), which determined that for social and emotional development to occur normally, children and infants need to develop a relationship with at least one primary caregiver. Warmuth and Cummings (2015) note that the adult attachment interview was developed to assess adults' caregiving capacity and ability to raise secure infants with
remarkable accuracy. It finally provides a reliable measure of attachment security that predicts
the quality of parent–infant attachment (Blazey et al., 2013; Borelli et al., 2013).

The participants' use of attachment theory provides powerful insights into the areas of selection
of alternative care. Practitioners will benefit from embracing concepts of attachment as they can
add depth, meaning and sophistication to their assessments in that it ultimately provides a
scientifically rigorous framework to improve the success of a placement (Walker, 2008;
Schofield and Beek, 2006).

2.5.2.2 Family Systems Test (FAST)

You know, to see the interaction at home and to see what the facilities look like and then
I would, if there is an older child involved, I would do a child assessment using the FAST
assessment. F.A.S.T. Dr Louis Aucamp does the training for that. So I use either
interactional analysis or a child socio-emotional assessment for the children. (Participant
02)

The Family Systems Test (FAST) has been in development since the early 1980s. The test can
be described as an approach for the quantitative and qualitative analysis of relational structures
with strong psychometric properties with its theoretical basis in structural family systems theory
(Minuchin, 1974), developmental family psychology and psychopathology. It allows for
interpretation and comparison of individual and collective perceptions of a vast variety of social
situations (Gehring, 1992; Rigazio-digilio, 1993). The use of the FAST as prospective adoptive
parent assessment instrument is in line with Ward (1997) who is of opinion that in order to
understand what will happen in new adoptive families, it is important for the practitioner to focus
on the current family system itself.

2.5.2.3 Heimler scale of social functioning (HSF)

…I use it [Heimler scale of social functioning] so much in my practice – for individual
counselling, part of selections - for everything. (Participant 03)

…you know a combination of the Hudson and Heimler scales balances it out. So if they
[prospective adoptive parents] attempt to manipulate it, it will show somewhere.
(Participant 03)

The Heimler scale of social functioning (HSF) was conceptualised in the 1950s and has been in
development ever since (Heimler International, 2016). The HSF has an easy scoring method
that gives both a numerical value for these areas and a diagram that represents the individual’s
experience of satisfaction and frustration that enables them to ‘see’ their feeling experience
(British Association of Social Functioning, 2016). The use of the HSF has been found effective
by Jordan and Roday (1984) in the assessment of prospective alternative caregivers, which justifies the use of the instrument by the participant.

2.5.2.4 Generalized contentment scale (GCS)

*With the Hudson scales, I use the generalized contentment, the index of self-esteem and the marital relationship.* (Participant 03)

*So it is three separate questionnaires that people complete, but then, dependant on the situation…* (Participant 03)

The generalized contentment scale (GCS) (Hudson and Proctor, 1977; Hudson, 1982) was designed as a short-form measure of nonpsychotic depression. The instrument focuses largely on affective aspects of clinical depression, examining respondents’ feelings regarding a number of behaviours, attitudes and events associated with depression. No literary evidence could be traced for the use of the GCS in the assessment of prospective adoptive parents.

2.5.2.5 Keirsey Temperament Sorter (KTS-II)

*I use the Keirsey model… I do that- and I like Arnold Mol’s… are you an introvert or extrovert- many of them calls it something else. Hettie Brittz calls it… she describes people in trees. Arnold Mol’s is the sanguine, melancholic. So I like those – it gives you an idea about people… how they handle conflict, how they handle, uhm, disappointment… what happens to them. So I do that too.* (Participant 07)

The Keirsey Temperament Sorter (KTS-II) is a self-assessment personality instrument based on the Keirsey temperament theory (Keirsey and Bates, 1984). The KTS-II assists individuals in discovering their personality types. The personality types are grouped in four basic temperament categories, which are then subdivided into sixteen character types. The penultimate assignment of the instrument is to assist individuals in discovering and addressing their most important challenges faced and opportunities presented on a daily basis (Keirsey, 2010; Montgommery, 2002).

Keirsey (1998) describes the KTS-II as a 50-year clinical study of differences in temperament in mating, parenting, leading and intelligence. From this description of the KTS-II, it seems to be a fitting instrument to determine and especially predict parenting capacity and capability.

2.5.2.6 Multi-Problem Screening Inventory (MPSI)

*We do separate and combined face to face interviews, we use the PMSI for each individual that apply for adoptions.* (Participant 01)
The PMSI is an eco-metric measuring instrument and a form of self-assessment that evaluates a person’s strengths and weaknesses in 33 different areas of personal, emotional, interpersonal, spiritual and physical functioning. (Participant 01)

The Multi-Problem Screening Inventory (MPSI), according to Fischer and Corcoran (1994), is a multidimensional self-report measure that assists the assessor in better understanding the severity or magnitude of client problems across 27 different areas of personal and social functioning (Hudson and McMurtry, 1997).

The MPSI draws on a variety of theoretical frameworks and assess the severity and magnitude of client problems. This is a relevant assessment tool used for assessing prospective adoptive parents, as it determines current problems and predicts problems that might be experienced relating to the adoption of a child.

2.5.2.7 Prepare/Enrich

Various participants mentioned that they use the Prepare/Enrich in order to assess the relationship between the prospective adoptive parents.

The Prepare Enrich Relationship Assessment Inventory is utilised to assess the couple’s relationship. This is also a self-assessment tool designed and developed to identify a couple’s strength and growth areas. The assessment covers the following areas: personality issues, communication, conflict resolution, financial Management, leisure activities, sexual relationship, family and friends, role relationship and spiritual beliefs. (Participant 01)

…this would be the next session and then during this time, in that same session, we get them to do a questionnaire, which is an online questionnaire for the enrich, the next session would be a feedback on that enrich questionnaire. (Participant 02)

I do relationship analysis where I use the prepare/enrich. (Participant 07)

The Prepare/Enrich is an online-based couple’s assessment instrument that has the ability to identify a couple’s strength and growth areas. It is described as one of the most widely used programs for marriage counselling and marriage enrichment. An adoption/fostering version has recently become available specifically for couples who wish to adopt or foster a child. In addition to the original version 3 new scales were developed for couples preparing to adopt or foster a child (Prepare/Enrich, 2016; Olson et al., 2012; Olson et al., 2009).

The Prepare/Enrich has, in recent years, added a scale that assesses the domain of children and parenting. This seems to be an effective assessment instrument, as each of these scales
Consist of ten statements which assess a couple’s readiness and commitment to the adoption process, how realistic or unrealistic each individual is about the natural challenges faced by couples and families throughout the adoption process and agreement on issues related to adopting a child.

### 2.5.2.8 Combination of assessment instruments

The participants indicated that they use a combination of assessment instruments for various reasons, which include reliability of tests, testing honesty of the applicants, prevention of manipulation and circumstantial variables:

*So then usually we do the adult assessment and then, uhm… this would be the next session and then during this time, in that same session, we get them to do a questionnaire, which is an online questionnaire for the enrich, the next session would be a feedback on that enrich questionnaire.* (Participant 02)

*…you know a combination of the Hudson and Heimler scales balances it out. So if they [prospective adoptive parents] attempt to manipulate it, it will show somewhere.* (Participant 03)

*I do not always use those things [assessment instruments] as precise. Sometimes I also use others. Sometimes I use my own knowledge, so it really differs in each situation.* (Participant 04)

*I use other forms that were done different people. I have combined some of those – things that work for me.* (Participant 04)

*…after twenty two years, I mix these things [assessment instruments]. So obviously each test, -piece of material that you use is somewhere.* (Participant 08)

*My tools work good for me, ja. I must tell you- a person adapts them.* (Participant 07)

This is in accordance with the views of Sandqvist (2007) and Clemons (2014) who state that because each assessment instrument normally has a specific focus and due to the variety of clients that are assessed, a single instrument generally does not address all the multiple factors involved in a person’s functioning. Assessors should therefore use two or more instruments in combination. A combination of instruments can provide the assessor with a more complete picture of the family’s functioning (Hepworth et al., 2013).
2.5.2.9 No assessment instruments and referral for psychological assessments

Participants that indicated that they do not use any assessment instruments and refer the prospective adoptive parents for psychological assessments explained their reasons as follows:

I don’t really use assessment instruments. I send them for an assessment at a psychologist, then I tell the psychologist- these are adoptive parents and they usually do an assessment for me. I then get a report back that says if they are capable of acting as adoptive parents and if there are other problems, such as psychological problems or so. (Participant 06)

At this stage I rely on what I get out of it [the interviews]. If there were psychological reports, I would consider that and my interviews. So I don’t have [assessment instruments]. To date I could not find a measuring instrument that I feel is good. There are other countries that are very good. (Participant 07)

No, I don’t use them. I don’t want to use them ‘cause we don’t have yet a South African design tool for assessment that is relevant to the situation in the country. The other ones I found them to be American. (Participant 05)

Not using assessment instruments is in sharp contrast with the views of Turney et al. (2012), who maintain that the assessment of prospective adoptive parents generally relies on verbal communication. If applicants are inarticulate, passive, have learning disabilities, have communication impairments or there are cultural misunderstandings, cooperation and engagement might be misinterpreted.

Prospective adoptive parents are occasionally referred to external professionals for assessments, such as psychologists. This echoes the observation of Gerrand and Nathane-Taulela (2015) who note that the screening process for unrelated adoption typically involves thorough psychological assessments. These assessments have the primary function of ensuring emotional stability and engagement in healthy, stable relationships (Bifulco et al., 2008; Rushton, 2004). Nichting (2016) provides a list of countries that require prospective adoptive parents to be psychologically assessed – South Africa does not appear on this list. It can thus be viewed that psychological assessments are not a requirement to adopt a child in South Africa and is an additional activity. This notion is confirmed by Chantler (2014) who states that some countries require psychological assessments complete with individual and couple assessments, and examination using psychometrically validated tools measuring personality and psychopathology, while other countries require only a simple statement of ‘sanity’.
2.5.3 Theme 3: Challenges with assessment protocols

The participants were requested to identify challenges they experience with their practice. Thereafter the participants were requested to make recommendations for the improvement of adoption practice and the development of a standardised assessment protocol in South Africa.

2.5.3.1 The need for a simplified, accessible and affordable protocol

So, to find something that’s maybe more user friendly, more kind of… I’m thinking of people in the poorer communities that are able to adopt, but you know, don’t necessarily have computers and so on. Here’s something… we need sort of a more simplified tool that would be effective to be able to assess families and ja. (Participant 04)

They don’t know… you don’t know, that the standards of the adoptions that they are doing are going to be the same. So, you know what I mean? There are those challenges and then off course the affordability thing, ‘cause some people… they won’t have to do it, they won’t go through all the steps. Look, we have about 4 or 5 sessions with a client, whereas someone will do a home visit that includes an informal adult assessment. You know, they’ll just do it more… rather than use formal tools, just use their observation and put it in a smaller quicker process to make it more affordable, but you don’t know how really… (Participant 02)

I think one of the challenges would be, like with the enrich, because it’s an online thing, is if a family isn’t comfortable or familiar with using computers, it would be a bit more of a challenge. They recently have made it completely online. Before they had the option of having it written. I mean in our context, being in private where people specifically are able to do that sort of… it’s not personally a challenge, but I could see that maybe being a challenge. (Participant 03)

In a controversial article titled ‘the free market approach to adoption: the value of a baby’ by Goodwin (2006), the author explores the cost of child adoption and the exclusion of certain groupings from adopting a child due to financial implications. The author concurs with the views of the participants that adoption process can be quite costly if all aspects of the process are calculated, and proposes that a cap on child adoption costs be examined.

2.5.3.2 A uniformed, thorough process acknowledged by courts is needed in South Africa

It will be very valuable if there are standardized assessment protocols that can be used by all different agencies and are acknowledged by our courts. It will also help adoptive parents to experience a more uniform screening process. (Participant 01)
So I think that a standardised protocol and scales and things can at least prevent that exploitation [financial] and that the same protocol should be followed by everybody. (Participant 03)

Look, I think it could be good [a standardised assessment protocol]. I definitely think so, because everybody actually does what they want to. I think such a standardised one would be very good. (Participant 06)

I think it would be nice if there are standardised things. It would be nice very nice, uhm, to have uniformity. I kind of like uniformity. (Participant 08)

According to Addoption (2016) and the Department of Social Development (2007) prospective adoptive parents need to undergo a screening process which differs from organisation to organisation. The process can take anything from 4 months and longer. This echoes the views of the participants that there is no uniformed process in South African adoption practice.

2.5.3.3 Culture, beliefs, values and norms are being neglected

I believe that we used the abovementioned assessments [prepare enrich and PMSI] as this gives us a clearer understanding of the individuals and of them as a couple. I am not aware of any other protocols that can be used. These assessments also do not make provision for the differences in culture and value and norm systems for all the different cultural groups in South Africa. (Participant 01)

And obviously if there’s language barriers, you know, so… language barriers can obviously be a challenge, even using the tools that you can apply to different cultures easily. If you obviously don’t have the language that you can understand or that the client doesn’t understand the enrich to convey what they are talking about, then obviously that can be a challenge. (Participant 02)

Renee Potgieter’s [training] was basically based on the whites and it’s completely different with non-whites. Black people, brown people, Indians, so there I use my own head, because there aren’t… I don’t have any measuring instruments for that. (Participant 04)

No, I don’t use them [assessment instruments]. I don’t want to use them ‘cause we don’t yet have a South African design tool for assessment that is relevant to the situation in the country. The other ones I found them to be American. (Participant 05)

In a study by Doubell (2014) on trans-racial adoptions, the researcher noted that none of the participants to the study, who were adoption practitioners, had completed any form of training.
that focussed on skills of cultural competence. This is in accord with the views of the participants that cultural competence is a neglected domain of prospective adoptive parent assessment practice. This can prove to be problematic in the South African context which is rich in cultural, racial, religious and other variables.

2.5.3.4 The best interest of the child should be paramount in each situation

*I must recommend… I must recommend that that adoption is in the child’s best interest. Not just now, but 20 years from now I must still be able to prove that it was in the child’s best interest. So I must prove to the court that they will be able to care for this child.*

(Participant 03)

This principle of the best interest of the child being paramount in all decisions regarding the child is in accordance with sections 2(b)(iv), 6(2)(a), 7 and 9 of the Children's Act (38/2005), as well as section 3 of the United Nations Convention on the Rights of the Child (United Nations, 1989). Statutory adoptions in South Africa are currently dealt with in terms of section 240(2)(a-e) of the Children’s Act which provides that an application for adoption shall not be granted by a children’s court to which such application was made, unless it is satisfied that the proposed adoption will serve the interests and conduce to the welfare of the child. This is an absolute requirement which must be met before an adoption order is granted (Ferreira, 2009). The practitioner therefore is obliged to ensure that the adoption satisfies judicial requirements regarding the best interest of the child. This cannot be achieved without sound assessment practices.

2.6 DISCUSSION AND IMPLICATIONS

There is a definite lack regarding prospective adoptive assessment protocols in the South African context (Doubell, 2014). From available information on assessment protocols and consultation with adoption practitioners, it is evident that no standardised assessment protocol exists in the South African context and that assessment protocols differ from practitioner to practitioner and organisation to organisation. From consultation with the mentioned sources, certain commonalities emerged which are illustrated in figure 2.1.

Commonalities among assessment activities include the assessment of certain variables that are related to a specific assessment domain (illustrated in figure 2.1). It is important to note that assessment activities do not follow a sequential direction and many of the assessment activities are combined. The point of departure for any prospective adoption lies in determining the type of adoption prospective adopters apply for. The type of adoption determines the protocol that will be followed and the assessment activities that will be undertaken. Based on the type of
adoption, individual and combined interviews are conducted with both the prospective adoptive parents. The assessment domain for the interviews is that of a complete psychosocial assessment. The prospective adoptive parents' motivation for assessment is strongly taken into consideration. Determining the motivation for adoption is indicative of the domain of whether the adoption is in the best interest of the child. A legislative required activity is that of battery screening in order to determine whether the applicants’ names appear on the national register of sex offenders and whether they have a criminal record, so as to confirm the safety of the child. An assessment of the stability of the relationship between the prospective adopters is done in order to assess the stability of the relationship which is undertaken as to ensure caregiver stability in the child’s life. An interactional analysis and home study, which are mostly conducted simultaneously, incorporates an assessment of the variables of interaction with family members and other children within the home and the physical home environment. This activity provides insight into the prospective adopters’ parenting capacity, the home environment, physical home and the child’s general safety. Character references are gathered in order to gain objective opinions concerning the prospective adopters. This activity serves a dual purpose of supplementing the psychosocial investigation and confirming information gathered from other assessment activities. A medical assessment is conducted by a medical practitioner so as to determine the prospective adopters’ potential longevity to care for the child.
Predominant assessment instruments called upon are dependent on the discretion of the practitioner and are not always used. The identified assessment instruments include the MPSI, AAI, FAST, HSF, GSC, Prepare/Enrich and the KTS-II. The mentioned instruments are occasionally used in combination. The instruments assess the domains of attachment, family interaction, satisfaction, frustration, synthesis, depression, temperament, personal functioning, social functioning and couple strengths/growth areas respectively. These assessment instruments are grounded in various theoretical frameworks and consist of various scales that assess specific psychosocial functioning domains. Practice experience, clinical judgement, knowledge and professional observation is applied throughout the assessment process as an informal method of assessment. These instruments are discussed in table 2.1.
<table>
<thead>
<tr>
<th>Instrument</th>
<th>Indices</th>
<th>Theoretical framework</th>
<th>Assessment variables</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult attachment interview (AAI)</td>
<td>-</td>
<td>Attachment theory (Bowlby, 1958)</td>
<td>Caregiver-child relationship, Caregiving capacity, Ability to raise secure infants</td>
</tr>
<tr>
<td>Family Systems Test (FAST)</td>
<td>Current conflicts, Past events, Anticipated events</td>
<td>Structural family systems theory (Minuchin, 1974), Developmental family psychology</td>
<td>Cohesion, Hierarchical dimensions, Familial relationships, Subsystem representations, Individual representations, Joint representations, Family interaction, Interpersonal structures</td>
</tr>
<tr>
<td>Generalized contentment scale (GCS)</td>
<td>-</td>
<td>Psychopathology</td>
<td>Non-psychotic depression</td>
</tr>
<tr>
<td>Keirsey Temperament Sorter (KTS-II)</td>
<td>Abstract vs. concrete, Cooperative vs. pragmatic, Directive vs. informative, Expressive vs. attentive</td>
<td>Keirsey temperament theory (Keirsey and Bates, 1984)</td>
<td>Temperament grouping, Role variants</td>
</tr>
<tr>
<td>Multi-Problem Screening Inventory (MPSI)</td>
<td>Severity of problems, Magnitude of problems</td>
<td></td>
<td>Positive psychosocial functioning, Negative psychosocial functioning</td>
</tr>
</tbody>
</table>
Currently no prescribed structured assessment protocols are used locally, such as the Structured Analysis Family Evaluation (SAFE) (Consortium for Children, 2005), used in the US and Canada; the Prospective Adopter’s Report (PAR) (British Association for Adoption and Fostering, 2013) used in the United Kingdom and the Trauma Informed Partnering for Safety and Permanence - Model Approach to Partnerships in Parenting (TIPS-MAPP) used in Kansas in the US (Children’s Alliance of Kansas, 2014) available in the South African context.

The assessment practices described in this study prove that no standardised criteria exist for prospective adoptive parents to qualify/disqualify them for/from adopting a child. The only common denominator being that an applicant must be over the age of 18 years, should not have a criminal record and must not appear on the national sexual offenders register. Although it is maintained and agreed that the applicants must ultimately be able to uphold the rights and responsibilities with regard to the adoptable child, it is problematic in the sense that qualifying/disqualifying variables are left to the discretion of the adoption practitioner facilitating the adoption process. These methods can, however, be flawed by virtue of their simplicity and can be prone to biases, which can ultimately result in consistent and predictable errors in judgement (Kahneman and Klein, 2009). Kirkman and Melrose (2014) undertook extensive research regarding assessments based on experience, clinical judgement, knowledge and professional observation. The research suggested that there is a range of overarching behavioural factors that complicate or reduce the efficiency of social workers’ decision-making. These factors include time and workload pressures, a range of behavioural biases affect social workers’ ability to make objective judgements, the complexity of social workers’ decision-making
is increased by the fact that many sequential decisions need to be made in the course of a single day, which leads to depletion or decision fatigue, as well as the information provided to social workers often tending to be of relatively low quality. The findings concluded that intuitive judgements can be prone to biases when made by using heuristics.

2.7 CONCLUSION

Assessments regarding alternative care and services in the South African context are difficult due to the lack of norms for the well-being of children, the multiple cultural variables involved and the unstable state of service contexts, to mention but a few of the challenges. The use of international instruments developed elsewhere in the world can assist with the assessment of variables such as self-esteem, depression, attachment and so forth is problematic in the statutory process. This may, however, change as more locally appropriate tools are developed and services become more stable and better resourced (Lofell, 2007).

The absence of a standardised assessment protocol, lacking in systematic character to the assessment sequence, places prospective adoptive parents in a vulnerable position and at risk of exploitation. Exploitation can occur in various ways, as many of the prospective adoptive parents are desperate to adopt a child and are willing to go to great lengths in order to legally achieve this. Exploitation can occur by subjecting applicants to irrelevant tests and consultations that can add up to a vast amount of funds being spent and unnecessary time being wasted. The adoption screening process in South Africa is generally costly, intense and time-consuming.

Although adoption service fees at accredited adoption agencies are usually charged on a sliding scale, based on prospective adopters’ monthly income, typically the screening process for unrelated adoption involves thorough medical assessments and psychological and marital assessments, over and above the social workers’ assessment costs. Many applicants do not enjoy the benefit of medical aid and thus find it difficult to complete the screening process (Gerrand and Nathane-Taulela, 2015).

The non-uniform nature of assessment procedures being followed at the discretion of the adoption practitioners constitute a variation in standards of assessments, as well as in qualifying/disqualifying criteria.

2.8 RECOMMENDATIONS

It is strongly recommended that adoption social workers refer to- and apply ecometric technologies, as encapsulated in the South African Council for Social Service Professions’ Policy on Ecometric Technology (2011). The concepts represented by this policy document are based on the argumentation of Roestenburg (2011) and others with respect to the value of
adopting ecometric principles in the assessment of clients. Roestenburg (2011) notes that ecometric technologies are generally catalogued in two main categories, which are quantitative and qualitative categories. The author explains the quantitative category as consisting primarily of standardized measurement scales that are completed by the client him- or herself and produce metrics that are interpreted. These scales usually have a high degree of confirmed validity and reliability and are based on a trail of evidence obtained by validation studies of the scales’ properties. The author continues by explaining the qualitative category as a range of different procedures and techniques that promotes interaction, exploration of issues and the generation of large amounts of textual or descriptive data. In contrast to the quantitative category, the qualitative category is highly reliant on the assessor’s appraisal of the data, rather than on a mechanical interpretation of numbers. However, both approaches generally play a role in the assessment of clients, and the adoption context is no exception.

Ecometrics, according to Roestenburg (2011: 21-22), is ‘an approach towards viewing assessment as scientific process that can be accurately controlled by the social worker and used in a way that promotes accountability and the production of valid, reliable practice and knowledge. Based on an ecological perspective, ecometrics is interested in the fit between the person and the social environment.’ No single, set definition of the ecological systems framework exists. Compton and Galaway (2010) mention that the ecological systems framework informs us regarding the person-environment interrelatedness, as well as transactions that take place in this interrelatedness. In her Master’s dissertation, Watson (2013) argues that the ecological model offers a suitable and relevant framework for assessing individuals. The ecological system’s framework emphasises the interactions and transactions that take place between the individual and his/her environment instead of assessing each of these in isolation. According to the author, this perspective ‘helps provide perspective on the transactions that the individual engages in’.

Ecometrics advocates the use of three important principles of assessment, which include a weighty reliance on scientific theory as reference framework, reliance on qualitative and quantitative technologies as assessment tools and a reliance on structured and planned assessment processes. Ecometrics essentially proposes that if the social worker starts the assessment in a planned manner by using specific pre-conceived sequences or protocols, the first step towards an accountable assessment will be achieved. If the social worker then uses a mix of qualitative and quantitative assessment technologies, extensive coverage of the topic being assessed will occur. If the social worker then reflects the assessment findings against appropriate theoretical frameworks, it is likely that an accountable assessment product will be reached.
It seems fitting to integrate ecometrics with the assessment of prospective adoptive parents, as ecometrics refer to the methodology of measurement of all assessment areas in social work and focuses on quantifying the mutual adaptive interactions between people and their environments. Ecometric technologies are developed primarily for assessment purposes and not to facilitate the making of a diagnosis. The core principles of ecometrics entail feasibility, accountability, clarity, promotion of adherence to ethical principles, and promote cultural sensitivity and cross-cultural work (SACSSP, 2011) and will undoubtedly improve the quality of prospective adoptive parent assessment.
2.9 REFERENCES


British Association of Social Functioning (2016) What is the Scale (HSSF): A brief description of Heimler Scale of Social Functioning (HSSF); also known as the HSF scale. Available at: http://www.basl.org.uk/what-is-hsf/what-is-the-scale-hssf/ (accessed 02 September 2016).


SECTION C

CONCLUSIONS AND RECOMMENDATIONS

These conclusions and recommendations are based on the empirical findings, as described within this study. This section of the dissertation provides a more in-depth discussion of the conclusions and recommendations of the study. The researcher will in the course of the discussion attempt to unpack the meaning of the different themes as identified through the study in greater detail and reflect upon the implications for practice of a lack of standardization in procedures.

3.1 CONCLUSIONS

3.1.1 Theme 1: Assessment process

Figure 3.1 illustrates the combined processes as described by the participants. When analysed using scientific software it becomes clear that there is not set protocol that is followed by adoption practitioners.
Considering the model portrayed in figure 3.1 it is evident that there are no fixed patterns whereby prospective adoptive parents are assessed. The lack of structure and structural similarities are a major contributing factor to the many differing variables contained within assessment protocols of respective assessment practitioners.

The absence of a standardised assessment protocol, lacking in systematic character to the assessment sequence, places prospective adoptive parents in a vulnerable position and at risk of exploitation. Exploitation can occur in various ways, as many of the prospective adoptive parents are desperate to adopt a child and are willing to go to great extents in order to legally achieve this. Exploitation can occur by subjecting applicants to irrelevant tests and consultations that can add up to a vast amount of funds being spent and unnecessary time being wasted.

Although adoption service fees at accredited adoption agencies are usually charged on a sliding scale, based on prospective adopters’ monthly income, typically the screening process for unrelated adoption involves thorough medical assessments and psychological and marital assessments, over and above the social workers’ assessment costs. Many applicants do not enjoy the benefit of medical aid and thus find it difficult to complete the screening process (Gerrand and Nathane-Taulela, 2015).

The non-uniform nature of assessment procedures being followed at the discretion of the adoption practitioners constitute to a variation in standards of assessments, as well as qualifying/disqualifying criteria.

3.1.2 Theme 2: Assessment instruments

The participants indicated that they make use of various assessment instruments in the assessment of specific factors of the prospective adoptive parents’ psychosocial functioning. The instruments used include the Adult attachment interview (AAI), the Family Systems Test (FAST), the Heimler Scale of Social Functioning (HSF), the Generalized Contentment Scale (GCS), the Keirsey Temperament Sorter (KTS-II), the Personal multi-screening inventory (PMSI) or Multi-Problem Screening Inventory (MPSI), the Prepare/Enrich Relationship Assessment Inventory and a combination of the mentioned instruments. It is important to note that the use of specific assessment instruments, or the use of assessment instruments are not a legislative requirement in order to adopt a child. Practitioners’ use of assessment instruments have the purpose to scientifically verify their final adoption recommendations that are presented to the Children’s court.
Analysis of the assessment instruments used (figure 3.2) indicates that various instruments are used to assess different domains of psychosocial functioning that include, but are not limited to:

- Caregiver-child relationship
- Caregiving capacity
- Ability to raise secure infants
- Cohesion
- Hierarchical dimensions
- Familial relationships
- Interpersonal structures
- Work
- Finances
- Friends
- Family
- Personal
- Energy
- Health
- Moods
- Escape routes
- Future
- Life’s meaning
- Self-expression
- Experienced struggles
- Non-psychotic depression
- Temperaments
- Role variants
- Positive and negative psychosocial functioning
- Self-perception
- Interpersonal functioning
- Spiritual functioning
- Physical functioning
- Couple strength and growth areas
- Parenting styles
- Confidence in parenting
- Family communication
- Family satisfaction
- Financial aspects
- Goals
- Stressor indication
Figure 3.2  Assessment instruments

Figure 3.2 indicates that assessment instruments that are used have similarities in their purpose. The different assessment instruments assess various domains of psychosocial functioning that contribute to the end goal of quantifying variables considered as important for assessment.

Each of the assessment instruments that underlie the assessment practices will concisely be discussed, as to understand the motivation for the use thereof in practice.

3.1.2.1  Adult attachment interview (AAI)

The adult attachment interview (figure 3.3), which can be described as a structured semi-clinical interview, focuses on early attachment experiences. This provides a standard method of assessment to determine internal working models of childhood attachment experiences and the influence thereof on a person’s current state of mind. It finally provides a reliable measure of attachment security that predicts the quality of parent–infant attachment (Blazey et al, 2013; Borelli et al, 2013).
3.1.2.2 Family Systems Test (FAST)

Depending on the issue at hand, the standard test procedure can be modified to include various phases of current conflicts, as well as past and anticipated events. The test delivers results regarding independence of cohesion and hierarchy dimensions, relationships between family and subsystems representations, individual representations of fathers, mothers and child family members' individual and their joint representations, as well as observed patterns of family interaction and portrayed interpersonal structure. Cohesion and hierarchy in the family and its subsystems, quality of generational boundaries and the flexibility of family structures are ultimately the dimensions tested by the FAST (figure 3.4) (Gehring, 1992; Rigazio-digilio, 1993).
3.1.2.3 Heimler Scale of Social Functioning (HSF)

The HSF questionnaire is divided into three sections that include the satisfaction index, frustration index and synthesis index (figure 3.5). Within each index there are 5 broad areas each consisting of 5 questions (Van Breda, 2002). The satisfaction index includes work, finance, friends, family and personal. The frustration includes energy, health, circumstances, moods and escape routes. The synthesis index relates to ambition, future, life’s meaning, self-expression and experienced struggles.

3.1.2.4 Generalized Contentment Scale (GCS)

The generalized contentment scale (GCS) (Hudson and Proctor, 1977; Hudson, 1982) was designed as a short-form measure of nonpsychotic depression. The instrument focuses largely on affective aspects of clinical depression, examining respondents’ feelings regarding a number of behaviours, attitudes and events associated with depression (figure 3.6).
3.1.2.5 Keirsey Temperament Sorter (KTS-II)

The Keirsey Temperament Sorter (KTS-II) is a self-assessment personality instrument based on the Keirsey temperament theory (Keirsey & Bates, 1984). The KTS-II assists individuals in discovering their personality types. The personality types are grouped in four basic temperament categories, which are then subdivided into sixteen character types (figure 3.7).
3.1.2.6 Personal Multi-screening Inventory (PMSI) / Multi-Problem Screening Inventory (MPSI)

The Multi-Problem Screening Inventory (MPSI), according to Fischer and Corcoran (1994), is a multidimensional self-report measure that assists the assessor in better understanding the severity or magnitude of client problems across 27 different areas of personal and social functioning (Hudson and McMurtry, 1997) (figure 3.8).

Figure 3.8 PMSI

3.1.2.7 Prepare/Enrich

The Prepare/Enrich (figure 3.9) has, in recent years, added a scale that assesses the domain of children and parenting. This seems to be an effective assessment instrument, as each of these scales consist of ten statements which assess a couple’s readiness and commitment to the adoption/foster process, how realistic or unrealistic each individual is about the natural challenges faced by couples and families throughout the adoption/foster process and agreement on issues related to adopting/fostering a child, while concurrently maintaining their couple relationship. An adoption/fostering version has recently become available specifically for couples who wish to adopt or foster a child. In addition to the original version three new scales were developed for couples preparing to adopt or foster a child (Prepare/Enrich, 2016).
3.1.3 Theme 3: Challenges with assessment protocols

Participants indicated prospective adoptive parents’ accessibility to adoption services is the most prominent challenge currently experienced. Prospective adopters are every so often limited to decent adoption services due to cultural factors, beliefs, values / norms, language barriers and cultural insensitive procedures.

Prospective adoptive parents are exposed to various forms of exploitation, especially due to a range of irrelevant tests that they may be subjected to. A lack of uniformity and prescription in assessment procedures can ultimately be held responsible for this phenomenon in adoption activities.

The self-reporting nature due to a lack of standardised procedures poses a challenge to assessors, as the participants perceive prospective adoptive parents to sometimes being deceptive in their reporting of personal psychosocial factors.

Participants expressed their frustration with the reliance on third party legislative requirements, which is a time consuming process. These processes are a legislative requirement. It is referred to as the battery screening process throughout this study.

The relation of affordability or money power (as referred to by one of the participants) remains a prominent challenge within South African adoption practice. The challenge ultimately weighs affordability against thorough assessment practices.

The reported challenges within South African prospective adoptive parent assessment are illustrated in figure 3.10.
From the empirical investigation it is evident that there is not standard prospective adoptive parent assessment protocol in the South African context. Adoption practitioners are left to their own devices and discretion to assess prospective adopters. Recommendations with regards to adoptions are made at the discretion of the assessor- how they reach conclusions in order to make recommendations to the Children’s Court is a neglected field of study and practice.

Neglect of systematic, scientifically verifiable procedures have numerous implications for the practitioner, as well as the prospective adoptive parents, which ultimately has repercussions for the adoption and in essence has a great influence on the best interest of the child.

3.2 RECOMMENDATIONS

It is recommended, as illustrated in figure 3.11, that multi-disciplinary research be undertaken to explore the design and development of a South African specific prospective adoptive parent assessment protocol that addresses issues and possibilities relating to:

- A standardised protocol that is acknowledged by courts, that holds the practitioner accountable, can be used by different agencies and that is scientifically verifiable.
- A uniform process that proves consistency and thoroughness with psychometric and econometric properties that regards cultural differences, beliefs, norms, values and language variations.
Affordability should not be synonym to the quality of assessments and should be accessible to all socio-economic classes.

Figure 3.11   Protocol recommendations

It is strongly recommended that adoption social workers refer to- and apply ecometric technologies, as encapsulated in the South African Council for Social Service Professions’ Policy on Ecometric Technology (2011) to address the challenges and to achieve the recommendations as described.. The concepts represented by this policy document are based on the argumentation of Roestenburg (2011) and others with respect to the value of adopting ecometric principles in the assessment of clients.

Roestenburg (2011:24-25) notes that ecometric technologies are generally divided into two main categories, which are quantitative and qualitative categories. The author explains the quantitative category as consisting of primarily of standardized measurement scales that are completed by the client him- or herself and produce metrics that are interpreted. These scales usually have a high degree of confirmed validity and reliability and are based on a trail of evidence obtained by validation studies of the scales’ properties.
The author continues to explain the qualitative category as a range of different procedures and techniques that promotes interaction, exploration of issues and the generation of large amounts of textual or descriptive data. In contrast to the quantitative category, the qualitative category is highly reliant on the assessor’s appraisal of the data, rather than on a mechanical interpretation of numbers. However, both approaches generally play a role in assessment of clients, and the adoption context is no exception.

Ecometrics, according to Roestenburg (2011:21-22), is an approach towards viewing assessment as scientific process that can be accurately controlled by the social worker and used in a way that promotes accountability and the production of valid, reliable practice and knowledge.

Ecometrics advocates the use of three important principles of assessment, which include a weighty reliance on scientific theory as reference framework, reliance on qualitative and quantitative technologies as assessment tools and a reliance on structured and planned assessment processes. Ecometrics essentially proposes that if the social worker starts the assessment in a planned way by using specific pre-conceived sequences or protocols, the first step towards an accountable assessment will be achieved. If the social worker then uses a mix of qualitative, as well as quantitative assessment technologies, extensive coverage of the topic being assessed will occur. If the social worker then reflects the assessment findings against appropriate theoretical frameworks, it is likely that an accountable assessment product will be reached.

It seems fitting to integrate ecometrics into the assessment of prospective adoptive parents, as ecometrics refer to the methodology of measurement of all assessment areas in social work and focuses on quantifying the mutual adaptive interactions between people and their environments. Ecometric technologies are developed primarily for assessment purposes and not to facilitate the making of a diagnosis. The core principles of ecometrics entail feasibility, accountability, clarity, promotion of adherence to ethical principles and promote cultural sensitivity and cross-cultural work (SACSSP, 2011:4-11).

It is strongly recommended that a multi-disciplinary approach is followed in undertaking future research with regards to the development of a South-African specific prospective adoptive parent assessment protocol. This approach is especially important with regard to the development of assessment instruments.
3.3 REFERENCES


85
ANNEXURE 1: ETHICS APPROVAL

2019/03/17

ETHICS APPROVAL CERTIFICATE OF STUDY

Based on approval by Health Research Ethics Committee (HREC) on 07/09/2016, the North-West University Institutional Research Ethics Regulatory Committee (NWU-IERC) hereby approves your study as indicated below. This implies that the NWU-IERC grants its permission that provided the special conditions specified below are met and pending any other authorisation that may be necessary, the study may be initiated, using the ethics number below.

Study Title: A Review of Assessment Protocols used in South African Adoption Practice

Study Leader/Supervisor: Prof WJH Roetenburg

Student: I Kanes

Ethics number: NWU-IERC-15-15-01

Application Type: Single Study

Commencement date: 20/10/00-97

Continuation of the study is dependent on receipt of the annual (or as otherwise stipulated) monitoring report and the concomitant issuing of a letter of continuation up to a maximum period of three years.

Special conditions of the approval (if applicable):

- Translation of the informed consent document to the languages applicable to the study participants should be submitted to the HREC if applicable.
- Any research at governmental or private institutions, permission must still be obtained from relevant authorities and provided to the HREC.
- Ethics approval is required before approval can be obtained from these authorities.

General conditions:

While this ethics approval is subject to all declarations, undertakings and agreements incorporated and signed in the application form, please note the following:

- The study leader (principal investigator) must report in the prescribed format to the NWU-IERC via HREC:
  - upon completion of the study, and upon completion of the study:
  - without any delay in case of any adverse event or incident (or any matter that interrupts sound ethical principles) during the course of the study.
- A number of studies may be randomly selected for an external audit.
- The approval applies strictly to the proposal as stipulated in the application form. Any changes to the proposal deemed necessary during the course of the study, the study leader must apply for approval of these amendments at the HREC prior to implementation. Without there being notified from the study proposal without the necessary approval of such amendments, the ethics approval is immediately and automatically forfeited.
- The ethics approval indicates the first date that the study may be started.
- In the interest of ethical responsibility the NWU-IERC and HREC retains the right to:
  - request access to any information or data at any time during the course of or after completion of the study;
  - to ask for further questions, seek additional information, require further modification or monitor the conduct of your research or the informed consent process;
  - withdraw or postpone approval if:
    - any unethical principles or practices of the study are revealed or suspected;
    - it becomes apparent that any relevant information was withheld from the HREC or that information has been false or misrepresented;
    - the required amendment, annual (or otherwise stipulated) report and reporting of adverse events or incidents was not done in a timely manner and accurately;
    - new institutional rules, national legislation or international conventions demand it necessary.
- The IRERCC can be contacted for further information or any report template via Ethics@nwu.ac.za or 018 259 1200.

The NWU-IERC would like to remain at your service as scientist and researcher, and wishes you well with your study. Please do not hesitate to contact the IRERCC or HREC for any further enquiries or requests for assistance.

Yours sincerely,

Prof LA Du Plessis

Digitally signed by:

Prof LA Du Plessis

Date: 2019/06/23 10:34:49 +02'00'

Prof Linda du Plessis

Chair NWU Institutional Research Ethics Regulatory Committee (IRERCC)
ANNEXURE 2: INTERVIEW SCHEDULE

A Review of Assessment Protocols used in South African Adoption Practice

Semi-structured interview schedule

1. Please describe the assessment protocol that you use to assess prospective adoptive parents in your adoption practice.
2. Please describe the assessment tools within the protocol that you use to assess prospective adoptive parents.
3. What challenges do you currently experience with the use of your prospective adoptive parent assessment protocol?
4. What challenges do you currently experience with the assessment tools used in your prospective adoptive parent protocol?
5. Do you think that a standardised South African-specific prospective adoptive parent assessment protocol is needed? If yes, what would you suggest, should such a protocol entail?
6. What suggestions can you make with regard to the design of a South African-specific assessment protocol?