

EurAdopt's Demand for Minimum Standards for Post-Adoption Services



LIST OF CONTENT

1	INTRODUCTION	3
2	POST-ADOPTION SERVICES ACCORDING TO THE HCCH.....	4
3	ARGUMENTS WHY POST-ADOPTION SERVICES ARE NEEDED.....	5
3.1	THE RIGHTS AND VOICE OF THE ADOPTEE.....	5
3.2	LIFELONG SUPPORT	5
3.3	LEGAL RESPONSIBILITY	6
3.4	EQUALITY	6
3.5	SPECIALIZATION OF ADOPTION-SPECIFIC SUPPORT	6
3.6	EVIDENCE BASED RESEARCH TO DEVELOP GOOD QUALITY PAS	7
4	MINIMUM STANDARDS PROPOSED BY EURADOPT	7
4.1	PAS SHALL BE ANCHORED IN LAW	7
4.2	PAS SHALL BE FINANCED BY STATE FUNDING	7
4.3	PAS SHALL CONSTANTLY BE RESEARCHED	8
4.4	PAS SHALL BE PROVIDED BY QUALIFIED EXPERTS	8
4.5	POST ADOPTION SERVICES FOR BIRTH FAMILIES.....	9
4.6	PAS SHALL BE VERSATILE, DYNAMIC AND EASILY ACCESSIBLE.....	9
5	REQUIREMENTS TO IMPLEMENT THESE STANDARDS	10
6	GOOD PRACTICE EXAMPLES	10
6.1	PAS FOR ADOPTIVE FAMILIES AND ADOPTEES.....	11
6.2	PAS FOR OTHERS	12
6.3	PAS RESEARCH SECURING QUALITY	13
6.4	PAS FOR BIOLOGICAL FAMILIES	13
6.5	FINANCING FOR PAS.....	13
7	CONCERNS AND NEW DEVELOPMENTS	14
7.1	DNA BANKS AND SEARCHING	14
7.2	EFFECTS OF SEARCHING AND SENDING COUNTRIES PERSPECTIVE IN PAS	14
7.3	MISSION FOR FINDING SPECIAL RESOURCE FAMILIES	14
7.4	SEARCH POSSIBILITIES OF USING INTERNET BASED ON-LINE SUPPORT METHODS	15
8	CONCLUSIONS	15
8.1	AVAILABILITY OF LIFE-LONG ADOPTION SUPPORT	15
8.2	CONTENT, QUALITY AND AVAILABILITY OF PAS	15
8.3	FUNDING STRUCTURES	16
8.4	BUILDING ADOPTION EXPERTISE.....	16
8.5	COST-EFFICIENT PREVENTION.....	16
8.6	COLLABORATION POSSIBILITIES.....	16
9	REFERENCES	17

1 INTRODUCTION

“Nowhere in paediatrics is the incredible resilience of children so obvious as in international adoption. Abandoned children who have suffered multiple adversities change into happy, healthy, thriving kids by the ‘simple’ act of adoption.” This is how Laurie Miller, adoption specialized paediatrician and researcher starts her Handbook of International Adoption Medicine (2005). On the other hand, Douglas and Philpot (2003) state: “While most adoptions work well, no adoption is simple”.

Many Western countries have facilitated intercountry adoptions for children for many years. The number of intercountry adoptions worldwide during the years 2004 to 2016 has recently been estimated as amounting to 331.567 adopted children (Selman, 2016). From 1998 to 2007 yearly between 14.000 and 20.000 children were adopted in Europe¹.

During the last decades, there has been increasing attention for preparation of adoptive parents, as they will parent children who may have suffered orphanage care, neglect, abuse, loss and complex trauma and adjustment stress. Knowledge on the impact of relinquishment and adoption is still increasing², including knowledge on the development of adoptees following their adoption, up to adulthood³. Research shows the dramatic developmental drawbacks on young children in institutional care and shows the incredible healing capacities of adoption⁴. Although adoptees do generally well, relinquishment and adoption play a life-long role, in for instance trauma, development, relationships and searching for roots⁵. Positive effects of Post-Adoption Services, PAS, has been shown in many studies⁶. One important factor shown by several is the importance of adoption competency of professionals⁷.

Meanwhile, receiving countries try to solve the issue on whether and which post-adoption services are necessary for the adoptive families and adoptees. There is however, no clear guidance in existing conventions and regulations, such as The Hague Convention on Protection of Children and Co-operation in Respect of Intercountry Adoption (HCCH, 1993) and the HCCH Guide for Good Practices. Regulations and the actual situations around PAS differ between countries (See Annex). In many countries, adoptees and adoptive families are only entitled to the general social, health and psychiatric care, without adoption specific competence. This often leads them to contacting their non-governmental Accredited Body (AB) that mediated the adoption. As many ABs are struggling to respond to the growing support needs and maintaining PAS services without adequate state funding, EurAdopt decided to make an inventory of the PAS provided in the countries represented in EurAdopt.

The Hague Convention on Protection of Children and Co-operation in Respect of Intercountry Adoption (HCCH, 1993) Article 9c states: “Central Authorities shall take, directly or through public authorities or other bodies duly accredited in their State, all appropriate measures, in particular to promote the development of adoption counselling and post-adoption services in their States”. This has been elaborated on in the HCCH Guide for Good Practices 1 (2008), but according to the experience of EurAdopt members, those Guidelines do not cover the minimum needs of the adoptees, adoptive parents and biological parents.

¹ Selman, 2009

² Brodzinsky et al, 1993; , Juffer et al, 2011; Van IJzendoorn & Juffer, 2006

³ Juffer & van IJzendoorn, 2005; Melero & Sanchez-Sandoval, 2017; Storsbergen et al, 2011; ter Meulen et al, to be published; Tieman et al, 2005; van der Vegt et al, 2009

⁴ Miller, 2005; Rushton, 2013

⁵ Brodzinsky et al, 1993; Juffer et al, 2011

⁶ e.g. for overviews see Casey Family Services, 2001

⁷ Brodzinsky, 2013; Child Welfare Information Gateway, 2012; Livingstone-Smith, 2010; Selwyn, 2017

From the HCCH and from the EurAdopt questionnaire regarding PAS, based on a scientific literature search and practice experience from the EurAdopt members, EurAdopt concludes that:

- the actual situation in the different countries does not guarantee the minimum requirements that the Guide to Good Practice sets
- the minimum requirements of the HCCH do not cover the minimum necessary services, neither is there guidance for these practices
- According to the HCCH adoption convention, states have the obligation to provide the facilitations for these requirements
- States can learn from each other's good practices
- New developments may ask for new minimal requirements and standards

As EurAdopt foresees that the demand for post-adoption services will keep increasing from the 200 000 of adoptees that have already been adopted to European countries, and after gathering results from the EurAdopt member questionnaire it became clear to EurAdopt that attention needs to be raised as to what should be required and provided as PAS in all European receiving states. Therefore, EurAdopt started a working group to develop an evidence and practice based statement on post-adoption services, which is presented in this document.

2 POST-ADOPTION SERVICES ACCORDING TO THE HCCH

The Hague Convention on Protection of Children and Co-operation in Respect of Intercountry Adoption (1993) Article 9c states: "Central Authorities shall take, directly or through public authorities or other bodies duly accredited in their State, all appropriate measures, in particular to promote the development of adoption counselling and post-adoption services in their States".

According to the Guide to Good Practice no 1 (2008) (GGP) the convention thus imposes an obligation on Central Authorities (CA's), to promote counselling and PAS. The nature and extent is not specified, but States must take all appropriate measures to promote PAS. This should be interpreted as meaning that States must do everything within their powers and resources to carry out the obligation. CAs are not obliged to provide PAS themselves, they may delegate PAS services through social service personnel or AB's, but the responsibility to secure that support is available and further developed is theirs.⁸

According to the Guide to Good Practice PAS should not only protect the adoptees, but also help to integrate into their new environment.⁹ A connection and continuity between pre-adoption preparation and PAS is evident.¹⁰ The necessary support for the adoption applicants throughout the adoption process is justifiable as they may be considered, de facto, as central partners in the protection of children. The Guide to good Practice emphasizes the importance of counselling of children, birth parents and adoptive parents by professionals with expertise in intercountry adoption, to prevent more serious problems later.¹¹ PAS should also include measures to assist adopted children to preserve their cultural links with their country of origin and assist adoptees in searching for and gaining access to information in their country of origin and

⁸ GGP 579

⁹ GGP 580

¹⁰ GGP 582

¹¹ GGP 584

searching for their families.¹² Most PAS will take place in the receiving States, but States of origin may wish to establish services for searching, and to provide support services to the biological parents and demand collaboration from their partnering accredited bodies in the receiving countries.¹³ Therefore, PAS shall be performed to protect all parties in the adoption triangle; the adoptee, the birth family and the adoptive family, and requires collaboration between all mediating authorities involved in the adoption process.

The Guide to Good Practice sets a list of minimum requirements for PAS for receiving countries¹⁴:

- the connection of knowledge and experience
- research on the problems of adult adoptees
- access to inexpensive qualified counselling for parents and children
- education of social workers, therapists, doctors, nurses, teachers and others who are likely to deal with IA
- assistance in the search for family
- access to files

3 ARGUMENTS WHY POST-ADOPTION SERVICES ARE NEEDED

3.1 The rights and voice of the adoptee

Today many adopted children have grown into adult adoptees who are voicing their rights, needs and experiences. They are demanding better support for themselves in their different life situations but also highlight the fact that adoptees as a group are entitled to support. By sharing their experiences of post-adoption services that they have been receiving, or more often been missing, as well as expressing their needs for preventive post-adoption support, they help us protect the rights of the children that were adopted after them or will be adopted in the future. **EurAdopt believes that the responsible receiving States have a moral obligation to hear the ideas, initiatives and support needs of the adoptees who have been adopted into receiving States through the existing adoption systems.**

3.2 Lifelong support

Adoption is a permanent solution but not the solution to everything. As a consequence of the relinquishment and adoption, adoptees may face trauma, loss, attachment and identity issues in different situations during their entire lives¹⁵. EurAdopt stresses that *there should be a natural obligation to provide a continuing spectrum of support in adoption from pre-adoption preparation to post-adoption support. It should be provided with regards to the whole adoption triangle*; adoptive parents, adoptees in all ages and the birth family that might suffer from life-long trauma of relinquishment. Support to the biological family will also help the adoptee as international research has demonstrated that knowledge about one's own origin, information exchange and contact with the family of origin can be positive for the development of personality of the adopted children.¹⁶ **Therefore EurAdopt believes that support for the adoption triangle should be available as long as they need, through the different periods of life.**

¹² GGP 580

¹³ GGP 589

¹⁴ GGP 588

¹⁵ Brodzinsky et al. 1993

¹⁶ EFZA

3.3 Legal responsibility

Adoption is a legal procedure, meaning that there needs to be governmental responsibility for the whole life-long journey that adoption is. Today pre-adoption procedures are highly regulated in many countries, while post-adoption services are not to the same degree. In many countries, the lack of regulation of PAS affects the funding of PAS, which often is inadequate. **EurAdopt believes that the HCCH underpins the legal responsibility of States to provide life-long, adequate PAS.**

3.4 Equality

EurAdopt argues that international adoptees should have the right to receive the same level of support as domestic adoptees and foster children, as they all have had similar levels of pre-placement adversities. Unfortunately, this is not the case in all countries. There should be equal attention and possibilities for post-adoptive support for example in search issues irrespective of the fact that these take place in different environments. **EurAdopt believes that equality should be the bases in the funding of services for post-adoption services for both domestic and international adoptees and their families.**

3.5 Specialization of adoption-specific support

Scientific evidence concludes that PAS should be provided by adoption specific professionals and clinicians. Much of the required knowledge and expertise is similar to foster care, but intercountry adoption adds issues of change of language and cultural environment and lack of knowledge of the birth family, which might lead to complex issues like attachment, trauma, loss, grief and identity issues. Therefore, intercountry adoption-specific help should be available in all support services.

Unspecialized help may do more harm than good.¹⁷ Research shows that adoption gives the opportunity for an incredible catch-up from adverse early life and that most adoptees do well¹⁸. However, the adverse early life situations and identity issues still reflect in the increased presence of psychological and psychiatric problems in adoptees¹⁹ and the overrepresentation of adoptees in psychiatric clinics.²⁰ This research is also supported by practical experiences that the EurAdopt ABs have collected from adoptive parents. Adoptive parents have reported that going through support systems that have no specialization in adoption can cause substantial extra burden for the adoptive parents who often find themselves in the role of having to produce basic information on adoption issues before finding understanding to the underlying problems and actually getting support. To avoid that those who struggle get severe problems, EurAdopt argues that intercountry adoption-specific help should be available in all support services.

EurAdopt believes that Adoption Competent Practitioners are needed as an important preventing measure.

¹⁷ Brodzinsky, 2013; Brodzinsky & Lemaire, 2018

¹⁸ Juffer & van Ijzendoorn, 2005; Juffer et al, 2011

¹⁹ E.g. Bakermans-Kranenburg et al, 2011; Berlin et al, 2011; Tieman et al, 2005; van der Vegt et al, 2009; Zeanah et al, 2011.

²⁰ Brodzinsky, 2013

3.6 Evidence based research to develop good quality PAS

Research implies that post-adoption services actually help and can have preventive effects which will save individuals from feeling bad and society to pay for expensive corrective care. Although not extensively studied, several studies have shown positive effects of preparation and post-adoption services²¹ The Dutch study on 1200 adult adoptees shows that adult adoptees were more satisfied with their adoption and life when they had been adopted after the professionalization of adoption preparation of adoptive parents and PAS, than the adoptees adopted in earlier times²². **EurAdopt believes that the complexity of relinquishment and adoption deserves continuing research to develop and maintain good quality PAS.**

4 MINIMUM STANDARDS PROPOSED BY EURADOPT

The HCCH and especially the Guide to Good Practice sets a list of minimum requirements for PAS for receiving countries. EurAdopt argues that these do not cover the minimum necessary services, with regards to the needs of all parties in the adoption triangle experience during their diverse life situations. EurAdopt proposes the following:

4.1 PAS shall be anchored in law

Following the HCCH and the Guide to Good Practice it is fundamental for PAS to be more specifically anchored in law. PAS needs to be equally well regulated as pre-adoption preparations. To date, the legislators have been in agreement that the accreditation and monitoring of ABs, and the screening of the suitability of prospective adoptive parents have to be anchored in law. Until now PAS has not been regulated in most countries, despite the life-long perspectives of adoption. An efficient PAS system where pre-adoption preparations are followed by access to continuous post-adoption support can offer both safety and emotional stability to individuals involved and have preventive effects for societies all in all. **EurAdopt believes that it is necessary that PAS should receive the right legal base in order to secure its availability and quality**

4.2 PAS shall be financed by state funding

The Guide to Good Practice states that there shall be “access to *inexpensive* qualified counselling for parents and children”. EurAdopt claims that the aim should be government funded PAS services, affordable for those who need support.

The German research group EFZA, together with several adoption experts concludes in 2017, that there should be “legal obligation for the provision of offers on PAS for birth parents and adopted families” ... “as well as ensuring the necessary resources to guarantee a flexible structuring of PAS offers that are continuously available and are oriented on the individual needs of the involved parties.”

By financing PAS governmentally, the States avoid the situation where PAS is a privilege for those who can afford it. Public funding will also make it possible for the PAS system to work efficiently preventing suffering and expensive corrective costs. **EurAdopt believes that the statement in the Guide to Good Practice needs to be widened to the extent that the government should provide specialized care, as every person should get the help it needs, being adopted or non-adopted.**

²¹ Johnson 2009, ter Meulen et al, 2018

²² ter Meulen et al, to be published

4.3 PAS shall constantly be researched

The Guide to Good Practice states that the “connection of knowledge and experience” shall be made and “problems of adult adoptees should be researched”. EurAdopt argues that knowledge and experience shall be verified by research and that research shall include all post-adoption services. As EFZA states: “To ensure a professionally grounded, result-oriented PAS, the services and their consultation models and interventions with adopted families, adopted children and birth parents have to be systemically researched”.

Recent studies of several interventions for foster care show no significant positive long-term effects²³. Other evidence based interventions have been developed specifically for adopted children and/or foster children, some have shown to work in one country, but not in another. Therefore, it is important to study effects of PAS in each country. **EurAdopt stresses the importance and the need of support of research in adoption, translation of research results to the practice and evidence-guided PAS.**

4.4 PAS shall be provided by qualified experts

The Guide to Good Practice states that that there shall be “access to inexpensive *qualified counselling* for parents and children”. Given the recent research that general support might even do more harm than good (Brodzinsky) and the importance of specialized intercountry-adoption help, EurAdopt argues that PAS should be given by specialized and/or qualified experts in intercountry adoption. Qualified experts can be staff at accredited bodies or state departments for child protection in the country of origin and in the receiving country. It can also be professionals in other places specializing in adoption.

EurAdopt sees that the need for qualified experts has increased and will continue to increase in the future as almost all adoptions today concern children that are hard to place with families. There is an increased intensity in the suitability certification and preparation of applicants and there is higher demand on expert counselling also after the adoption. Therefore, access to adoption competent training and strong networks between adoption competent professionals are important.²⁴ The difference in the numbers of adoption over the years asks for a flexible system of expertise and PAS. To obtain this level of specialization, centralization of services should be supported when possible.

The Guide to Good Practice states that there shall be education of social workers, therapists, doctors, nurses, teachers and others who are likely to work with internationally adopted children and their families. The increasing support demands from different professionals require access to adoption consultation for professionals kindergarten and school teachers, medical doctors, psychologists, psychiatrists, etc. As intercountry adopted children usually have medical issues when arriving in receiving countries, medical checks upon arrival should be done based on specialized protocols and preferably by or under supervision of professionals with knowledge of tropical diseases²⁵.

Not only the knowledge and expertise of professionals is important, also their attitude: “A respectful, appreciative and recognising attitude is equally important as the build-up of a trustful relationship and the perception of openness and transparency towards the involved parties.”²⁶ EurAdopt also argues that networking between different experts will be very helpful. **Concluding: given the importance of specialized**

²³ Maaskant et al, 2017

²⁴ Brodzinsky, 2013

²⁵ Jones, 2012

²⁶ Neil, 2017; Selwyn, 2017

adoption help EurAdopt believes that PAS should be given by specialised and/or qualified experts in adoption.

4.5 Post adoption services for birth families

The HCCH states that CAs shall “promote the development of adoption counselling and post-adoption services *in their States*”. The Guide to Good Practice emphasizes “counselling of children, birth parents and adoptive parents” and that “PAS should also include measures to assist adopted children to preserve their cultural links with their country of origin and assist adoptees in searching for and gaining access to information in their country of origin and search for their families.”

Sending countries have responsibilities towards the birth families, both after relinquishment and in the process of searching and reunion. No post-adoption enquiry from an adoptee in a receiving country should proceed without consideration of the situation of the birth family in the country of origin. The right of the adoptee to know about his or her roots must always be balanced with respect for the birthfamily, which may require a lot of cultural sensitivity. Both adoptees and birth families may need guidance in the contacts both before and after reunions. Either party may need further counselling in situations where further contact is no longer needed or wished from the other party. Good collaboration between states is an essential thing in this sensitive work. **EurAdopt believes that within the scope of the HCCS, the Guide to Good Practices and the UN Guidelines for Alternative Care adequate services should equally be provided for birth families in sending countries.**

4.6 PAS shall be versatile, dynamic and easily accessible

Following the opinion of EFZA, EurAdopt is in favour of life-long, dynamic, tailor-made and easily accessible PAS. EFZA states: “In the discussion between experts as well as in the analysis of international research literature by Selwyn (2017) and Neil (2017) it was made clear that the need for support in different phases of the adoption cycle and also in dependence of the life situation of the child, the receiving or delivering parents can vary. Support measures should therefore be flexible, be oriented on the individual needs of the families and should not follow a rigid time structure. Consequently, even if parents do not need continuous support, they would know who to turn to in a crisis situation and what agency is responsible for them.”²⁷ From the experiences of EurAdopt we know that in case of trauma and/or attachment problems short-term therapies are usually not sufficient, and that long-term support may be necessary. Therefore, PAS should be structured and offered in a way that as many as possible individual thematic areas are covered.

Information about where PAS is available should be easily accessible. As adoptions have taken place for many years and several parties have been involved, the services should be somewhat centralized, maybe even internationally. The adoptees do not necessarily have the information and care about which adoption organization handled their adoption case, but rather need accessible information about available services.

The involved party should know that his or her concern, while being of individual character, will be taken on by good, professional hands.

Concluding: Euradopt believes that PAS should be life-long, dynamic, tailor-made and easily accessible.

²⁷ EFZA, 2017; Neil, 2017.

5 REQUIREMENTS TO IMPLEMENT THESE STANDARDS

Euradopt states that the following requirements may be needed for the implementation of the post-adoption service minimum standards:

1. It is essential to have public funding to secure high quality post-adoption services that are stated both in the Hague Convention and those minimum standards suggested in this document. High costs should not be a boundary to access post-adoption services.
2. Continuous research in the field of adoptees and adoption will be needed developing PAS.
3. To secure the quality and professionalism of post-adoption services it is important to ensure enough centralization of adoption knowledge (national and perhaps even international, as origins and issues of adoptees are often similar).
4. Specific intercountry adoption training and tutoring needs to be available to those who will work directly with post-adoption services.
5. Other professionals working with adoptive families and adoptees should also have access to intercountry adoption specific training.
6. Maintaining well-functioning cooperation between sending and receiving countries is something that will improve the work with post-adoption services and root seeking issues. This applies both to accredited bodies and central authorities.
7. Adopters and adoptees need easily accessible information on what support is available and where it is found.

As intercountry post-adoption services in all countries will have to deal with common complex issues, it might be helpful and cost-saving to establish an international expert and expertise centre on PAS, serving both sending and receiving countries. An international Centre might have the basic information for all countries (e.g. research results, books, folders, webinars, online trainings, best practices), which can be translated to the national (or even smaller scale) characteristics.

Ideas for good practices can be found in the next chapter.

6 GOOD PRACTICE EXAMPLES

To be helpful and effective, Post Adoption Services have to start from day one of the adoption and then accompany adoptees through their whole life. Adoptees benefit directly from PAS for themselves, but also indirectly of support directed to their adoptive parents, for their extended family, for their nursery teachers and school teachers, for doctors and health care employees, for psychologists and social workers and everybody they are in touch with.

To meet as much as possible of the needs of the adoptees -with the limited resources available- CA's and AB's in EurAdopt countries have invented an incredible wide range of PAS.

We want to give you a short impression of what has already been identified as Good Practice examples by EurAdopt member organisations:

6.1 PAS for adoptive families and adoptees

Adoption resource centres	The adoption resource centre has a quite large field of action in the PAS. It is intended for adoptive families, adoptees as well as professionals to help them cope with specific adoption related topics. Especially when population density of adoptees in the general population is low, it is hard to establish specialized services for adoptees. A service like a centralized national adoption service centre is a solution that works well.	Luxembourg Netherlands
Low cost adoption specialized video intervention attachment support	Video Interaction Guidance (VIB) is short term counselling for parents of adoptive children up to 12 years old, using video recordings to promote the positive interactions between the child and the parents. Parents are supported to improve the relationship with their child and to stimulate the development of the child. The Dutch Adoption Resource Centre in the Netherlands has a low-cost VIB service for all adoptive parents after they arrive in the Netherlands.	Netherlands
Chat room for adoptive parents	The AB offers a chatroom for adoptive applicants as well as adoptive parents, where experiences regarding pre- and post-adoption topics can be shared and discussed. Professionals are available low-threshold and independent of time and location.	Austria
Centralized adoption counselling system through a specialized service providers	Municipalities who do not have adoption competence outsource adoption counselling to specific specialized service providers to secure adoption competence for this service. In Finland adoption counselling includes both pre-adoption counselling and post-adoption counselling. In the post-adoption phase adoption competent social workers provide psycho-social support for both adoptive parents and adoptees of different ages and support families in screening the support needs of the adoptive families.	Finland
Adoption specialised medical care	Some hospitals offer specialised screening section for adoptive children.	some Italian regions
	When an internationally adopted child arrives, there is a mandatory check on tuberculosis. After arrival, adopted children are checked by paediatricians, following a standard, specialized, regularly updated medical protocol	Netherlands
Adoption specialised school service	There is a law that establishes the guidelines for a successful integration of the adoptive children at school	Italy
Telephone help line	An independent adoption telephone help line exists to support adopters, adoptive parents, adoptees and professionals that meet adoptive children. The discussions are confidential and may continue into a supportive process if needed or be single calls.	Finland
Podcasts, Facebook, on call for adoptees	There exist many Facebook groups about adoption (one for each organisation and many private groups – including groups of adoptees).	Norway
	The organization All Our Children supports Adoption Pod Cast activities that are produced by adult adoptees. Adult adoptees interview people and discuss adoption related issues with them and raise awareness on adoption from the adult adoptees perspective.	Finland
Teenage peer groups and adoptees camps	Teenage adoptees meet for weekends to share experiences, discuss adoption-related issues or just have fun together. Two days are filled with workshops, preparing meals and enjoying them together, bonfire, ...	Germany
	There is a camp for adopted adolescents with the aim to de-dramatize adoption. By meeting for a week doing fun things together and	Sweden

	exchanging different experiences, the camp often strengthens the participants.	
	Teenage peer group activity for adoptees from 13 - 18 years is available during the school year with monthly meetings. Group activities range widely following the adoptees own interests and may include for example creative activities and outings. Adoption as a discussion topic is included based on the interests and needs of the group members as these topics actualize in the daily lives of the adoptees.	Finland
Financial contribution for searching of origin	The AB.Children of the World (Verdens Barn) offers funds where adoptees can apply for some financial contributions to search for origin.	Norway
Accompanied root-seeking group tours	ADA organises guided group tours to Colombia; for some attendants, it means visiting their country of origin, for others it also means visiting the family of origin.	Germany
	One of the accredited bodies offers accompanied root seeking group tours to South Korea, where staff from the accredited body is present in Korea at a certain week to give support and assistance to adoptees who are there to seek roots.	Sweden
	Accompanied root seeking tours have been taking place in visits to Russia as this adoptees group is large and active in post-adoption searches and visit requests. The groups tours include a visit program to children's homes as well as cultural visit program and group activities during the tour.	Finland
DNA Bank	offered by Government	France
	organised by Adoptees	Netherlands
Free psychological counselling sessions for grown-up adoptees	Both individual counselling and group counselling is offered to grown up adoptees. In a group course, which means 8 meetings á 3 hours, thoughts, feelings, and experiences are exchanged with others who have an adoptive background.	Denmark

6.2 PAS for others

Education about adoption to teachers and day-care parents	The CA provides free education to professionals, who are in contact with adopted children. It's focus lies on adoption related issues in the adopted child's life in school or institution. It's a 4 hours course free of charge.	Denmark
Training-meetings for relative family members and friends in the social circle	Information gathering for relative family members and friends of adoptive applicants are offered. Focus is on encouraging relatives and friends to join in the adoptive family's life in a sensitive and supportive way and how the network of the family is an important part and resource for the family.	Finland Netherlands Austria

6.3 PAS research securing quality

Promotion, facilitation and application of scientific research;	There is long and extensive tradition of adoption research, many studies relevant for the adoption practice have been published in international scientific journals. In 2001, ADOC (the Adoption Triad Research Triangle) was founded under supervision of Professor Juffer to promote adoption research and to make the results of scientific research on adoption available to the field ²⁸ . Specifically, the results of the studies are used to elaborate prospective adoptive parents' training and post-adoption services (PAS). Large meta-analytic studies were started. Unfortunately, the ADOC had to stop in 2017, but the work is continued by its former coordinator Gera ter Meulen in Knowledge Bureau ter Meulen ²⁹ .	Netherlands
Adoption consultation	The Dutch adoption service Centre provides website pages for professionals to alert and inform them on adoption issues, and provide references to information, adoption-competent professionals, and trainings	Netherlands

6.4 PAS for biological families

Exchanging information with the birth family	Adoptive parents provide pictures and some information about the child at the partner organisation in the country of origin- for the biological parents to collect if they feel ready.	Austria
PAS for the birth family	This kind of post-adoption service was identified as an area, where no best practice examples could be found and which needs more focus and development	

Additional to best practice examples regarding the post-adoption services as such, EurAdopt member organizations have collected information on how the services have been funded so far. We could identify a small number of countries, in which the government participates in providing or financing PAS on its own or contributes financial resources, being aware of the importance and responsibility of state involvement.

6.5 Financing for PAS

Government funding their own post adoption services	The government/CA itself offers and funds PAS, including individual counselling, group meetings and education for professionals.	Denmark
Government funding for accredited bodies post adoption services	PAS offered by the AB's are 100% funded by government and include the follow-up visits but also all the specific PAS work.	Luxembourg
	The government gives support <ul style="list-style-type: none"> for joint information work, which is mainly used for information brochures, meetings, professional seminars on adoption. An increased focus in this area is PAS. (€ 19.000) for administrative work, etc. Since some of the work is done «on behalf of» the government, the AB's receive a subsidy every year. The total amount in 2018 was ca. € 250.000. 	Norway
	The government supports and finances the AB's work	Finland

²⁸ <http://www.socialsciences.leiden.edu/educationandchildstudies/ADOC>

²⁹ <http://www.kbtermeulen.nl/KnowledgeBureauTerMeulen>

	<ul style="list-style-type: none"> • for providing post adoption services in accordance to the law “Finnish Adoption Act” (keeping archives, access to these files, support) • for assistance in searching for origins and birth-country visits, as the law states this should be free of charge for the clients. • The state finances on a yearly basis. In advocating for this state funding, the accredited bodies raised awareness that a financing model based on fees for current new adopters cannot realistically sustain the growing amounts of post-adoption enquiries coming to the accredited bodies. 	
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7 CONCERNS AND NEW DEVELOPMENTS

Several new developments challenge all adoption work future developments. They should be considered in existing and developing post-adoption services.

7.1 DNA banks and searching

Risks and possibilities in DNA banks in connection to identity and search issues of adoptees: Private companies are providing DNA testing services and databanks which allow for connecting people with similar DNA. The bases of these DNA banks are commercial and although they open new possibilities, their motivation as businesses may place individuals in risk of financial exploitation and false belief in fast search results. In post-adoption services there is vast experience on the importance of sufficient and professional counselling and special support in connection to searching of roots. Post-adoption service providers need to take into consideration that adoptees may be considering and using DNA searches to speed up their possibilities for reunions and risk new disappointments or uncontrollable processes. Simultaneously, post-adoption service providers should maintain an open outlook and continue to follow up on the developments of new DNA testing possibilities.

7.2 Effects of searching and sending countries perspective in PAS

The international context in international adoption comes with different contexts also in post-adoption procedures in the sending and receiving countries. Consequences of search contacts to birth families and existence or lack of counselling directly to biological families poses ethical dilemmas, as a search initiated by an adoptee receiving post-adoption counselling, may continue to affect birth family members which may or may not be receiving equal level of post-adoption support from the local adoption authorities. Sending countries post-adoption service systems need to receive equal and simultaneous attention as receiving countries are strengthening their possibilities to address adoptees and adoptive families’ post-adoption requests. This calls for continuing discussion and sharing of experience between sending and receiving countries and joint platforms to discuss practical work and find ways of respectful collaboration, taking into account multiple realities.

7.3 Mission for finding special resource families

As sending countries possibilities to find domestic options for children needing care develops, international adoption is mainly taking place with older children and special needs children. This means that receiving countries need to pay attention to how this affects families and children’s support needs and adjust post-adoption service provision adequately. Adopting an older child comes with several additional challenges, as the child may have had adverse experiences prior to the adoption, several placements and life changes,

prolonged effect of institutionalization and lack of one-to-one attention and support. Older children risk also having a shorter time for adjusting to the family prior to adolescent and puberty phase, as well as bigger risk for attachment disorders. Adjusting to the social environment, language change and new school environment may also require more attention and sensitivity as the child comes with a different cultural and language code. Children with physical special needs have always been a relevant group of children in international adoptions, but the relative proportion of these adoptions have been growing in the past 10 years. The aim of international adoptions is to recognize and train special resource families for these children. This has meant several new work steps into adoption processes and required more attention in finding the most suitable special families for these children. According to a Finnish interview survey, families that adopted children with physical special needs experienced that the biggest challenges in their adoptions had been in the emotional issues, that are the attachment adjustments the child and family needs to make in the process, and which are in fact the same challenges for all adoptive families. Families adopting special needs children need adequate support for attachment issues that may be complex also when a child has physical special needs affecting the everyday life.

7.4 Search possibilities of using internet based on-line support methods

Digitalization of services is a possibility also in modern social work and service modelling. With new generations of adopters adapted to use of internet and social media, possibilities of applying internet based on-line support methods should be considered, as these can serve a large number of people with easy accessibility benefit and relatively low cost of service provision.

8 CONCLUSIONS

EurAdopt wants to raise adoption Central Authorities and Receiving State's awareness of the existing realities in international adoption collaboration. We foresee a growing amount of post-adoption support needs in the adoptive families in all European countries. The reasons behind this growth is complex, but is to a big extent a consequence of the demographic changes in the receiving countries adoptive families. The number of adoptive families with children in their active school and teenage years as well as the amount of adoptees in adolescence and young adulthood is coming soon to its peak years, as the largest numbers of adoptions took place some 15 years ago.

8.1 Availability of life-long adoption support

Adoption is a life-long process, actualizing in several life stages and demanding attention from states and service providers, not only in the much considered initial stages of the adoption, but also as the child is placed in the family, as the child and family later experience life changes that resonate the adoptees earlier life experiences and as the growing up adoptee becomes an active subject in her or his own adoption process, with personal search and identity issues.

8.2 Content, quality and availability of PAS

Availability of post-adoption support has become a growing area of concern for all those involved in adoptions. Simultaneously the Hague Convention states that the receiving States are to follow up and develop availability of post-adoption services. There is however little to no follow-up on how receiving

States are fulfilling this task and what is the actual availability of such services in relation to the growing support demands. **EurAdopt would like to invite the CAs to encourage each other to apply the minimum standards presented in this paper and hopefully also proceed further, to add regulation to secure the availability and finance of PAS as required in the HCCH from the receiving States.**

8.3 Funding structures

EurAdopt wishes to raise awareness that accredited bodies are but one part of the adoption systems and as such these organizations are taking care of tasks that have been outsourced to them by their states or adoption central authorities. The question of to what extent these accredited bodies can respond to the growing post-adoption support needs, should be further elaborated, as to what public resources are addressed for this work by the receiving States. **EurAdopt and its member organizations strongly advocate for developing public funding and centralized structures to secure the development of equal, high quality and competent post-adoption support for internationally adopted children, their families and biological parents alike.**

8.4 Building adoption expertise

Supporting the development of specialized international adoption professionals is equally important as argued before in this document. In most receiving countries, adoptive parents and children are entitled to the same general health, social and psychiatric care as families in general, which is an important safety net and bases of equality. Little attention has been given to the fact that adoption services as such require a high level of specialization to be truly effective and helpful. **In EurAdopt's view, receiving States in international adoptions have the important responsibility to secure the development and maintaining of high quality adoption specific services** that are effective and suitable to address the support needs of families adopting or bringing up an internationally adopted child. Equally, receiving states have the responsibility to ensure that adoptees of different ages have access to professional counselling and support in the attachment, identity and search issues in relation to the adoption experience.

8.5 Cost-efficient prevention

EurAdopt raises attention that adoptees and adoptive families form very small numbers (in comparison to the general public) and the number of new adoptions are also low. These measures would have a preventive effect and save resources in the long run, as corrective care is notably more expensive. **EurAdopt and its member organizations are willing to participate in discussions to promote the development of stronger, state financed post-adoption services in our countries.**

8.6 Collaboration possibilities

EurAdopt welcomes and promotes international collaboration to share good practise examples. It is our belief that the development of post-adoption services demands new state level attention and that securing such development requires also continuing follow-up and research on the developments.

An extended goal of developing PAS in Europe would be a better understanding of adoption in our society, which would be beneficiary not only for individual adoptees and adoptive families, but our societies all in all.

9 References

- Bakermans-Kranenburg, M. J., Steele, H., Zeanah, C. H., Muhamedrahimov, R. J., Vorria, P., Dobrova-Krol, N. A., . . . Gunnar, M. R. (2011). III. Attachment and emotional development in institutional care: characteristics and catch up. *Monographs of the Society for Research in Child Development*, 76(4), 62-91.
- Berlin M, Vinnerljung B & Hjern A. (2011). School performance in primary school and psychosocial problems in young adulthood among care leavers from long term foster care. *Children and Youth Services Review*, 33(12), 2489-2497.
- Brodzinsky D & Lemaire J (2018). *Clinical workshop Special Needs Adopted Youth*. ICAR6 Conference Montréal, Canada.
- Brodzinsky D, Schechter, M & Henig RM (1993). *Being adopted: The lifelong search for self*. New York: Doubleday.
- Brodzinsky DM (2013) *A need to know. Enhancing adoption competence among mental health professional. Policy Perspective*. The Donaldson Adoption Institute.
- Casey Family Services. (2001). Post Adoption Services. Available at: <http://www.aecf.org/upload/publicationfiles/post-adoption%20services.pdf>
- Child Welfare Information Gateway. (2012). Finding and Using Post Adoption Services. Available at: http://www.childwelfare.gov/pubs/f_postadoption.cfm Dance Casey Family Services, 2001
- Douglas A & Philpot T (2003). *Adoption, changing families, changing times*. London: Routledge.
- EFZA Bovenschen I, Bränzel P, Heene S, Hornfeck F, Kappler S, Kindler H & Ruhfaß M (2017) *Nachgehende Begleitung von Adoptiveltern, Adoptivkindern und Herkunftseltern*.
- Johnson D, Neville SE & Pinderhughes EE (2018). *Waiting child, ready parents: Parent's perceptions of pre-adoption preparation for China's waiting child program and child well-being*. Tufts University. Abstract presented at the 2018 Rudd Adoption Conference
- Juffer F and Van IJzendoorn MH (2005) Behavior problems and mental health referrals of international adoptees. *JAMA the Journal of the American Medical Association*: 293(20), 2501-2515.
- Juffer F, Palacios J, Le Mare L, Sonuga-Barke EJS, Tieman W, Bakermans-Kranenburg MJ, . . . Verhulst FC (2011) Development of adopted children with histories of early adversity. *Monographs of Livingstone-Smith S. (2010). Keeping the Promise: the critical need for post adoption services to enable children and families to succeed*. Evan B Donaldson Institute. New York.
- Maaskant A M, van Rooij FB, Overbeek GJ, Oort FJ, Arntz, M & Hermanns, JA (2017). Effects of PMTO in foster families with children with behavior problems: A randomized controlled trial. *Journal Of Child And Family Studies*, 26(2), 523-539.
- Melero S and Sanchez-Sandoval Y (2017) Mental health and psychological adjustment in adults who were adopted during their childhood: A systematic review. *Children and Youth Services Review*: 77, 188-196.
- Miller L (2005). *The Handbook of International Adoption Medicine. A guide for physicians, parents and providers*. Oxford University Press.
- Neil E (2017) Helping birth parents in adoption. A literature review of birth parent support services, including supporting post adoption contact. München: DJI. https://www.dji.de/fileadmin/user_upload/bibs2017/Neil_Helping_birth_parents_in_adoption.pdf
- Rushton AG, Feast MJ and Simmonds J (2013) The British Chinese Adoption Study: orphanage care, adoption and mid-life outcomes. *Journal of Child Psychology and Psychiatry*: 54(11), 1215-1222.
- Selman P (2009). The rise and fall of intercountry adoption in the 21st century. *International Social Work* 52 (5), 575-594.
- Selwyn J (2017) Post-adoption support and interventions for adoptive families: Best practice approaches. An expertise for the German Research Centre on adoption (EFZA). Deutsches Jugendinstitut e.V., DJI https://www.dji.de/fileadmin/user_upload/bibs2017/Selwyn_Post_adoption_support.pdf

- Storsbergen HE, Juffer F, van Son MJM and 't Hart H (2010) Internationally adopted adults who did not suffer severe early deprivation: The role of appraisal of adoption. *Children and Youth Services Review: 32(2)*, 191-197.
- Ter Meulen G (2018) *Adoption in the Netherlands. Preparation and post-care of adoptees, biological parents, adoption applicants and adoptive families in the Dutch adoption practice*. Deutsches Jugendinstitut e.V., DJI.
- Ter Meulen G, Smeets D and Juffer F (2019). Feelings about relinquishment and adoption of adult intercountry adoptees are strongly related to their satisfaction with life. *To be published*
- Tieman W, van der Ende J and Verhulst FC (2005) Psychiatric disorders in young adult intercountry adoptees: an epidemiological study. *American Journal of Psychiatry: 162(3)*, 592-598.
- Van der Vegt EJM, Tieman W, van der Ende J, Ferdinand RF, Verhulst FC and Tiemeier H (2009) Impact of early childhood adversities on adult psychiatric disorders. *Social Psychiatry and Psychiatric Epidemiology: 44(9)*, 724-731.
- Van IJzendoorn MH and Juffer F (2006) The Emanuel Miller Memorial Lecture 2006: Adoption as intervention. Meta-analytic evidence for massive catch-up and plasticity in physical, socio-emotional, and cognitive development. *Journal of Child Psychology and Psychiatry: 47(12)*, 1228-1245.
- Zeanah CH, Gunnar MR, McCall, RB, Kreppner JM, & Fox NA (2011). VI. SENSITIVE PERIODS. *Monographs of the Society for Research in Child Development, 76(4)*, 147-162.