

Lancashire Family Justice Board Conference

31st March 2025

Panel Debate on Open Adoption

Professor Laura Machin

Opening Address

I am the Principal Investigator of Adopters Advocacy. AA is a small research group that conducts research with adopters to raise awareness of adopters' mental health and their support needs, without diminishing the needs of adopted children and their birth families. Through our research, we aim to bring the voices of adopters that are seldom and rarely heard into the fore, in order to bring about evidence-based changes in policy and practice.

Adopters Advocacy was established in July 2023, and in Autumn 2023, we conducted our first project that explored the state of adopters' mental health and aimed to better understand adopters' support needs. We ran 10 online community workshops with just under 50 adopters participating from across the four nations. During the workshops, we explored adopters' experiences of compassion fatigue and post traumatic stress, amongst other mental health conditions. I asked adopters what support would help them, irrespective of funds available, one solo adopter who is also a clinical psychologist and was home schooling a teenage neurodivergent son at the time and experiencing CPA, said that there was simply no point asking her what support she needed as there was nothing that could help her. Another adopter who had experienced false allegations from her adopted child, and had contact with social services due to her son experiencing EBSA, explained that a simple acknowledgement that she existed – that she was *human* – would have felt supportive and she gave the example of being asked by the social worker *and how are you?* during visits and interactions would have felt supportive.

As a result of this workshop, we discovered the unique support needs of adoptive dads and the need for targeted and dedicated support that is designed specifically with adoptive dads in mind. Importantly, and most crucially, the need for support to be truly independent, non-judgemental, and compassionate. For three months, we ran an adoptive dads' group, for those living within the local area. There was no cost associated with the programme, and all activities including

breakfasts after the school run, dinner and download after work, and float parties for the family were free. We worked with the adoptive dads to learn what 'support' looks like to them, and importantly that adoptive dads *do* appreciate the opportunity to meet with other adoptive dads, in safe spaces where they know others like them will be there. The dads' group ran irrespective of numbers of adopters attending. Our research with adoptive dads has highlighted to us how post adoption support within LA and adoption agencies sends an implicit message that they do not matter when support is not designed with them in mind, or when it is cancelled on the day "due to low sign up". From our research, is it apparent that RAAs and VAAs would do well to critically review their post adoption support offering to ensure it is serving all their adopters, as well as reflect upon why there may be low numbers participating in their support offering, to avoid adopters internalising messages that they do not matter or count when cancelling post adoption support sessions.

In Autumn 2024, we conducted a second project at adopters' requests to explore the topic of adoption breakdown. We ran 9 online workshops with adopters from across the four nations again. We heard from approx 40 adopters who had experienced an adoption ending prior to an AO granted, or after an AO had been granted, and also from those adopters who parent their child from a distance. This project was the hardest project I have ever been involved in. The adopters' stories were harrowing and linger with me still. It was clear that we create space in our research for the things that are hard to say and hard to hear. During the workshops, it was apparent that for some children, living in a family environment was not appropriate and instead a different setting was needed, whilst still very much being part of a family and holding a family identity. Yet, for the majority of adopters, including those where an AO hadn't been granted, it was felt that the placement did not need to end, and ended due to lack of support, or inadequate support such as formal respite, or ultimately not being listened to by those in a position of power and influence. Without national figures collected on adoption breakdown when an AO has been granted, it is challenging to set the issue on policy makers' and politicians' agenda and to make any links between the support available and provided and potential AB.

Recent research by Duncan, a clinical psychologist based down South, shows us that adopters can and do experience secondary trauma and primary trauma following their child being placed with them. We know from research with FCs that approx 75% experience compassion fatigue. At AA, we're running a national support survey that is examining the state of adopters' mental health

in order to complement this existing research. So far, 514 adopters have completed the survey, with approx 20% experiencing suicidal ideation, over 75% reporting CPA and approx 40% considering disrupting the adoptive placement. It is very clear that there is a national conversation needed regarding adopters' mental health, and the support offered to adopters, either in terms of formal respite care, and/or independent, non-judgemental therapeutic support for their own mental health.

In preparation for today's debate, I approached the 300 adopters on the AA network for their views, perspectives and experiences of open adoption and direct contact with birth families. Their responses were mixed, with few rarely adopting a hard line on the topic. Instead, it was clear that their responses were grounded in their wider experiences of social work practice to date, rather than necessarily opposing open adoption, although there were some adopters who did disagree with it as the direction of future adoption. It is important to note that all adopters started from the perspective of the children and outlined the benefits that might arise from OA in their family such as removing any myths around BF, promoting child's identity, and providing a sense of history for the child.

Nearly all adopters were positive about children having direct contact with siblings, although their responses became more complicated when siblings were living with BF. The overwhelming concern was around the issue of safety, and who decides what and "when it is safe to do so". Adopters report power dynamics between adopters and social workers, matching panels, and judges, and whether adopters would truly be able to share their safety concerns about open adoption without consequence. Linked to this, adopters expressed concern over information being withheld or undocumented in CPRs that would mean that OA might not be considered as safe by adopters.

Adopters are concerned at the possibility of OA creating tension and conflict between professionals and adopters, as well as between adopters and children, especially if contact with birth families has to pause. Adopters expressed fear that they are expected to be family therapists in the model of OA, whereby it would be adopters that 'pick up the pieces' if contact pauses or ends, and in speaking with those who do have contact with BF, I wondered who was there to support adopters with their emotions and feelings, as they appear to have to deny or suppress

having any difficult emotions in the face of direct contact. Adopters wanted clarification as to whether all future adoptions would be open adoption, unless decided otherwise, or whether it was an option to be considered, as they felt that it could reduce the number of people considering adopting a child, including those who may wish to adopt a second child. For many, the move to OA radically altered the premise of adoption, and moved adopters into the position of long-term, unpaid, FC. Moreover, there are concerns that OA would influence SW practice when deciding who are the right adopters for children, perhaps driven by adopters who are 'local' to BF in order to maintain direct contact, and prospective adopters were described as naïve, ill-informed and lacking insight and therefore are likely to agree to OA without truly understanding the impact of adopting a child who is most likely to have experienced trauma and experience attachment issues.

As a researcher, I remain open minded to the move to open adoption. What I present here are not my personal views, nor any personal biases. AA is not linked or associated with any activist organisation or movement. It is clear from our research with adopters that when adopters describe current post adoption support either for themselves or their children specifically, they report in their own words feeling lied to, duped, tricked and deceived. Currently, adopters feel lined up to fail, and it is ultimately the children that suffer. As a researcher, I cannot ignore that AA might have attracted a biased sample, although I would argue that this shouldn't excuse how these adopters have been treated. I would hope that those in power and influence to make a difference would agree with that one adopter feeling this way is one too many.

What is of considerable concern is the lack of support available to adopters currently is insufficient and inadequate. By introducing open adoption as the starting point for adoption, alongside the strategic move to increase adoptions of children who wait the longest according to CVAA such as siblings and older children, we are layering the complexity of adoption for adopters, without establishing the support structures necessary in order to make open adoption feasible. If we are increasing the 'ask' of adopters, it needs to be feasible, realistic and sustainable, otherwise it is simply morally irresponsible.