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NEWSLETTER



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INTRODUCTION

With this Newsletter the ISS/IRC wanted to present several tools, whether legislative, practical, or therapeutic, made for adopted persons, but also for their families and for the professionals working daily in this field.

Indeed, as shown by the figures of international adoptions in 2021, analyzed in this Newsletter, even if it has been decreasing steadily for some time, international adoption remains a protection measure that is used for many children throughout the world. Each of these children deserves that mechanisms to strengthen adoption programs continue to be developed, both at the time of adoption and years later.

It is through this Newsletter that the ISS/IRC team keeps at its heart the goal of disseminating practices, testimonies but also overviews of legislative and policy changes through, in order to inspire policy makers, child protection professionals, but also to support all persons affected by adoption measures, whether directly or indirectly.

Last but not least, at the end of this year, we would like to thank our funders for their continuous support as well as all our readers who regularly share their thoughts with us, and who make this publication a living tool read in the four corners of the world.

ISS/IRC Team
December 2022

ACTORS IN INTERCOUNTRY ADOPTION AND CROSS-BORDER CHILD PROTECTION

- **Australia, Botswana, Canada, Honduras, Ireland and USA** these countries have updated the contact details of their Central Authorities, competent authorities and/or accredited adoption bodies designated under the 1993 Hague Convention.
- **Denmark, Honduras:** this country has updated the contact details of their Central Authority designated under the 1996 Hague Convention.
- **Botswana** acceded to the 1993 Hague Convention on November 14, 2022. This Convention will enter into force in the country on March 1, 2023.

Source: Hague Conference on Private International Law, [Latest updates](#).

ISS/IRC NEWS

News from the ISS/IRC Team

Following the happy event in the life of Jeannette Wöllenstein-Tripathi in December 2022, we inform you that she will be on maternity leave for the next few months. The ISS/IRC team wishes her all the best for this new adventure! During her absence, the position of interim director will be held by Jean Ayoub, Secretary General of ISS.

In addition, we are pleased to welcome Mrs. Beatriz Santaemilia del Hoyo, Spanish lawyer, within the team as a child's rights specialist. She has both international experience, notably with the Committee on the Rights of the Child and Child Rights Connect, and national experience, with the Plataforma de Infancia, the coordinating body for NGOs working in the field of children in Spain.

ISS/IRC participation in an event organised by the Italian Central Authority on adoption breakdowns

On 13 December 2022, ISS participated in the event organised by the Italian Central Authority - Commission for Intercountry Adoption (CAI) - and the *Istituto degli Innocenti* - the Italian National Centre of Documentation and Analysis for Children and Adolescents - on the newly published study on adoption breakdowns in Italy, based on a survey in the Italian Juvenile Courts. The event was attended by over 100 participants, including presidents of juvenile courts, professionals from accredited adoption bodies, international experts such as those from the Hague Conference on Private International Law, and several foreign central authorities. Although research shows that on average only 1% of IFAs result in an adoption crisis, the event was an opportunity to analyse the weaknesses of the Italian system, to discuss the need to reshape the existing services in favour of the adoption triad. Furthermore, the results of this study form the basis for future work in this field.

Another Future Is Possible – Ivory Coast

As part of its international program [Un Autre Futur Est Possible](#) (Another Future is Possible), ISS organized the launch of the project in Ivory Coast* from November 28 to December 2, 2022 in collaboration with the national child protection authorities, the *Direction de la Protection de l'Enfance/MFFE*, the Ivorian NGO *Vie saine* (coordinator of the West Africa Child Protection Network) and the support of the ISS network (ISS West Africa and [Droit d'Enfance - Fondation Méquignon](#), a French member of the ISS).

That week on site was very useful with several key highlights:

- Meeting with the Director of Child Protection and participation in the validation workshop of the national strategy for the protection of children and adolescents in situations of social disruption on Monday, November 28;
- Meeting with our donor, the SCAC of the French Embassy in Côte d'Ivoire (Ministry of Europe and Foreign Affairs);
- Training of trainers for 30 social workers (Abidjan and Bouaké region) on disability, its early detection, working with families and the right to live in a family for children with disabilities from November 29 to December 1. Social workers are now equipped to disseminate the training to child protection committees, community structures that act as watchdogs and intermediaries between families and social services;
- A workshop to validate the tools for action-based research on the root causes of institutionalization of children with disabilities with 6 social workers in charge of conducting these surveys;

- A round table on the drafting of a strategic and multi-sectoral document on community strengthening of families of children with disabilities. ISS salutes the commitment of the ECD and field professionals in social centers, complexes, special education centers, early childhood protection centers... and warmly thanks our national partner, the NGO *Vie Saine*, for its dedication and organization of this mission.

As a bonus, we were fortunate to receive a delegation from Burkina Faso, where the project has also been implemented for several years with the support of ISS. This delegation was able to testify about their experience with foster families and the level of specialized foster families developed with ISS, proving that another future is possible for disabled children who are too often forgotten in institutions.

*The project in Ivory Coast is the concrete implementation of our evaluation report on the alternative care system for children with disabilities carried out in July 2021 resulting in 30 recommendations and an action plan agreed with the authorities.

Evolution of Project Racine ISS France

On Friday, September 24, 2022, International Social Service France organized a second webinar on the theme of the search for origins and its project [RACINE](#). 86 professionals from the French central adoption authority (MAI), adoption services of the departments, associations of adopted persons, AAB and civil society, including other ISS members, were present.

On this occasion, Jimmy MESSINEO (ISS France coordinator) gave an assessment of phase 1, Dr. Fanny Cohen-Herlem (ISS/IRC consulting psychiatrist) spoke about the contribution of the discussion groups and Sandrine PEPIT (ISS France Director) presented the future prospects of phase 2.

In the first phase, ISS France accompanied 28 adoptees individually, including 12 from Haiti, 11 from Sri Lanka and 5 from Ethiopia. This accompaniment made it possible to exchange around the research and to support adopted persons in their steps. For 4 people (3 from Haiti and 1 from Sri Lanka), members of the biological family were found. Preparation for the contact and support after making contact were offered. 14 adoptees participated in the discussion groups, 8 of whom were adopted from Haiti, 4 from Sri Lanka and 2 from Ethiopia. Among these, 3 were already individually accompanied by ISS and one wished to be accompanied afterwards. In addition, 3 analysis sheets on legislation and practices were produced. In terms of partnerships, 1 formal partnership was signed with an association that accompanies adoptees in Haiti, the partnership with the acting ISS member in Sri Lanka was strengthened and 1 informal partnership exists with an Ethiopian adoptee association. Numerous exchanges have also taken place with associations of adoptees in France or abroad (*La Voix des Adoptés*, *Des Racines Naissent des Ailes*, *Back to the Roots*, *Collectif Adoptés du Sri Lanka-Recherche d'Origine* - Info Fraud, *Intercountry Adoptee Voices*, *Reconnaissance des Adoptions Illicites France*) as well as with several other ISS members (Germany, Australia, Netherlands, Switzerland) and the ICR around the theme. ISS France also presented the project to the AABs during the MAI conference and the FFOAA day. Some AIOs have asked ISS France for more information. An exchange took place between ISS France, the MAI and the French Consulate in Ethiopia and another between ISS France, the Ethiopian authorities, and the French Consulate in that country. Several exchanges with the Haitian central authority also took place. Exchanges with the Sri Lankan central authority took place through the intermediary of the ISS partner in that country.

The webinar on September 24 was also an opportunity to launch phase 2 of the project. In this phase, ISS intends to deploy the project in Madagascar, update its analysis sheets, strengthen its partnerships, and accompany more adoptees individually and collectively. In addition, in partnership with *Voix des Adoptés*, ISS France will map post-adoption resources in relation to the search for origins in France and in the countries of origin to better accompany adoptees. Regarding the deployment of the project in Madagascar, a first meeting with the French Consulate in Madagascar has been organized as well as an exchange with the new acting ISS member in this country

[Registrations](#) for the next sessions of the discussion groups for adoptees from the 4 project countries (Ethiopia, Haiti, Madagascar, Sri Lanka) are now open:

- Tuesday, January 17 from 7:30 pm to 9:30 pm: "Origins and parenthood among adoptees".
- Tuesday, February 7 from 7:30 to 9:30 pm: "My research, my story"
- Tuesday, March 14 from 7:30 to 9:30 p.m.: "If I had known! If I had known!"
- Tuesday, April 11 from 7:30 to 9:30 pm: "Between hopes, false hopes and despairs"
- Tuesday, May 09 from 7:30 to 9:30 pm: "From research to meeting".

Recent case law from the European Court of Human rights

- [Loste c. France](#), November 3, 2022: Failure of national authorities to protect against abuse in foster care and to respect the religious views of the foster child.
- [D.B. et autres c. Suisse](#), November 22, 2022: Prolonged non-recognition of parentage between a child born through international surrogacy arrangement and the genetic father's registered intentional partner

Source: Council of Europe – [Database HUDOC](#)

Call for inputs: Draft General Comment on children's rights and the environment with a special focus on climate change

The Committee on the Rights of the Child organizes a [last round of consultation](#) and invites all interested stakeholders to comment on its draft general comment on the [current draft General Comment on children's rights and the environment with a special focus on climate change](#). The deadline for comments is 15 February 2023.

Source: [The Committee on the Rights of the Child](#)

Around the world: Investigations related to intercountry adoptions

France: Illegal practices - Creation of an interministerial inspection mission

In November 2022, an interministerial inspection mission on intercountry adoption practices was set up. This mission will carry out an inspection whose aim is "on the one hand, to identify illicit practices that have taken place in the past in order to avoid their recurrence and, on the other hand, to provide a response to the demands of adoptees and civil society". This work will lead to recommendations in the next six months.

Source: MAI Bulletin of December 2022; [French Ministry of Foreign Affairs](#).

South Korea: South Korea's Truth and Reconciliation Commission

In December 2022, the Commission decided to investigate 34 intercountry adoptions that took place between the 1960s and 1990s, to Europe and the United States. These investigations are linked to allegations by these adoptees that they were "unjustly removed from their families through falsified documents and corrupt practices".

Sources: ABC (December 8, 2022). [South Korea's truth commission to probe foreign adoptions](#); The Guardian (December 8, 2022). [South Korea's truth commission to investigate dozens of foreign adoptions](#).

HCCCH: Practitioners' Tool: Cross-border recognition and enforcement of family agreements reached in the course of family matters involving children

The Permanent Bureau has recently published a [new tool](#), the purpose of which is to explain how family agreements involving children can be made enforceable in one State and then recognised and enforced in other States through the mechanisms provided for in the HCCCH Conventions, in particular the 1980 Child Abduction Convention, the 1996 Child Protection Convention and the 2007 Child Support Convention.

Source: [Permanent Bureau's website](#)

Towards a stabilization of ICA figures despite an ongoing Covid-19 pandemic in 2021?

As customary, ISS/IRC is pleased to present the intercountry adoption (ICA) statistics for 2021 as well as a brief analysis of these figures.

Last ISS/IRC concluded with an analysis of the unusual 2020 annual ICA statistics, given the unprecedented impact of the Covid-19 pandemic globally, not just on (intercountry) adoption procedures but also on child protection systems more broadly.

What can we gather this year from ICAs carried out in 2021? Despite global efforts focused on vaccination, 2021 remained a year during which the virus kept on spreading, mutating and further compounding challenges for children and their families. During 2021, the consequences of the pandemic became increasingly visible: surges in poverty, impact on livelihoods and resourcesⁱ, increasing violence (digitally and offline), worsening mental health, school closures and unemployment leading to increased inequalities, etc. In many contexts, these consequences have increased children's vulnerabilities to family separation. Over 1.5 million children are estimated to have lost a parent or other caregiver as a result of COVID-19 associated deaths, and projections are that another 4 million could do so before this protracted pandemic endsⁱⁱ (see 2021 [DGD Outcome report](#)).

So, how is this situation reflected in the 2021 figures?

Slight increase since 2020

Overall, there is no decrease in the ICA figures compared to 2020. A slight general increase of 6% can be noted (3,683 in 2020 vs. 3,884 in 2021 – see frame n°1).

For Scandinavian receiving States, the increase is more significant, reaching 39% (Denmark), 51% (Norway) or even 148% (Finland). For others, such as Germany and Ireland, there has been a decrease in ICA figures from previous years which persisted in 2021; a 21% and 62% decrease compared to their respective 2020 figures.

Receiving State ⁱⁱⁱ	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
United States of America ^{iv}	8'668	7'094	6'441	5'648	5'372	4'714	4'059	2'971	1'622	1'785
Italy ^v	3'106	2'825	2'206	2'216	1'872	1'439	1'394	1'213	669	680
Canada ^{vi}	1'367	1'242	905	895	790	621	658	576	416	384
France ^{vii}	1'569	1'343	1'069	815	953	685	614	421	244	252
Spain ^{viii}	1'669	1'188	824	799	567	531	445	370	195	171
Sweden ^{ix}	466	341	345	336	257	240	185	170	92	118
Belgium ^x	265	219	144	136	121	133	134	99	80	84
The Netherlands ^{xi}	488	401	354	304	214	210	156	145	70	75
Finland ^{xii}	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	27	67
Germany ^{xiii}	801 (420)	661 (272)	209	308	213	81	91	85	81	64
Norway ^{xiv}	231	154	142	132	126	127	87	91	41	62
Australia ^{xv}	149	129	114	83	82	69	65	57	37	42
Switzerland ^{xvi}	212 (314)	169 (280)	105 (226)	104 (197)	91 (101)	82 (69)	58 (79)	72	38	41
Denmark ^{xvii}	219	176	124	97	84	79	64	46	23	32
New Zealand ^{xviii}	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	19	16
Ireland ^{xix}	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	29	11
TOTAL	19'312	16'053	13'103	11'966	10'752	8'998	8'031	6'316	3'683	3'884

For States of origin, frame n°2 indicates that the first 30 states of origin in 2021 undertook at minimum 20 intercountry adoptions during the course of the year, representing 88% of intercountry adoptions registered globally.

Country of origin ^{xx}	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Colombia ^{xxi}	901	562	355	359	314	542	559	597	387	492
India ^{xxii}	362	298	242	233	323	518	456	503	263	432
Ukraine	713	674	560	339	339	270	280	366	277	310
Thailand	251	272	207	172	250	218	215	208	117	267
South Korea	797	206	494	406	362	396	303	254	266	227
Bulgaria ^{xxiii}	350	421	323	262	324	289	201	270	169	205
Philippines ^{xxiv}	374	525	405	354	313	304	206	214	112	156
Hungary	145	104	77	84	88	233	235	238	158	145
Nigeria	238	225	175	163	139	206	185	140	96	132
South Africa ^{xxv}	81	147	176	172	103	130	112	113	53	127
Vietnam ^{xxvi}	216	293	285	287	248	356	215	220	108	106
Haiti	262	460	551	236	324	398	325	257	209	103
Taiwan	291	188	147	172	150	157	109	149	124	97
United States of America ^{xxvii}	178	167	155	160	147	89	140	76	89	94
Republic of Congo (Brazzaville) ^{xxviii}	ND	ND	ND	ND	ND	28	ND	41	36	57
Russia	2,442	1,703	381	210	151	319	260	221	44	49
Bolivia ^{xxix}	N/A	N/A	N/A	N/A	N/A	N/A	N/A	9	6	40
Burkina Faso ^{xxx}	87	74	99	56	61	59	37	59	45	37
Jamaica ^{xxxi}	ND	ND	ND	ND	ND	ND	ND	52	37	36
Brazil	337	246	31	32	29	127	38	66	55	35
Dominican Republic ^{xxxii}	21	21	21	20	32	20	24	33	15	33
Burundi ^{xxxiii}	ND	ND	ND	ND	ND	40	59	53	36	33
Morocco ^{xxxiv}	102	32	ND	ND	ND	ND	ND	35	27	32
Peru ^{xxxv}	122	92	97	79	91	71	56	67	32	31
Madagascar ^{xxxvi}	46	40	57	77	62	54	40	40	31	30
Romania ^{xxxvii}	0	7	14	23	19	29	41	24	33	29
Letonia ^{xxxviii}	59	131	96	189	89	84	79	38	20	28
Liberia ^{xxxix}	ND	ND	ND	ND	ND	22	30	51	29	27
Mexico ^{xl}	10	10	19	10	19	6	20	40	23	27
Sierra Leone ^{xli}	ND	ND	ND	ND	ND	ND	ND	34	13	22

While some States of origin have maintained stable figures (Hungary, Vietnam, USA, Jamaica, Peru, Madagascar, Liberia), others have experienced a slight decrease (South Korea and Taiwan), or a more significant decrease (Haiti and Brazil). The first 30 countries of origin have gone through an average increase of 39% of their intercountry adoptions. In fact, significant increases between 2020 and 2021 figures can be observed in certain States such as in Bolivia (from 6 ICAs in 2020 to 40 in 2021), Dominican Republic (15 ICAs in 2020 to 33 in 2021), India (263 in 2020, 432 in 2021), Sierra Leone (13 in 2020, 22 in 2021) and South Africa (53 ICAs in 2020 to 127 in 2021).

Are these improvements linked to more responsive systems and adapted adoption procedures that address the new normal since early 2020? Or to the regularization of some “blocked” adoptions due to the pandemic?

Furthermore, an increase of 11% in the number of states of origin is noted, growing from 126 referenced countries to 122. New countries such as: Djibouti (4) Armenia (3) Gabon (3) Eritrea (2) Papua New Guinea (2) Somalia (2) Jordan (1) Myanmar (1) Sao Tome and Principe (1) Sweden (1) Switzerland (1) Tchad (1) Trinidad and Tobago (1) Turks and Caicos Island (1) can be mentioned.

...but overall remaining trends

In comparison to pre-Covid times (2019 figures), however, overall ICA numbers in 2021 decreased (39%). This trend is observed among all receiving States, reaching up to a decrease of 54% (Spain) and of 48% (The Netherlands – having in mind that the country suspended all intercountry adoptions in February 2021). With few exceptions, this is equally true for the great majority of States of origin, reaching up to 78% (Russia), 60% (Haiti) or 52% (Vietnam).

Where does the explanation for the general continued decrease lie? The overall decrease in the need for ICA is certainly significant as a trend since years. However, a more nuanced country-by-country analysis is necessary. In some States such as Burkina Faso or Haiti for example, a deterioration in the security situation of the country for the past years has surely also played an important role, such as suspensions following investigations such as in the Netherlands.

As per the general geographical distribution, no changes are to be stressed: in 2021, most ICAs took place from Asian countries followed by the continents of the Americas, Europe, and Africa (659). The least ICAs took place from Oceania.

Concerning mayor *receiving States*, the USA remains by far the receiving State that adopts the most internationally, followed by Italy in Europe and Canada in the Americas. France, Spain, and Sweden are respectively at positions 4, 5 and 6. As per the ranking of receiving States, there are only slight fluctuations to observe.

As far as *States of origin* are concerned, on the other hand, bigger fluctuations can be observed: Colombia remains at first position, followed by India, Ukraine, and Thailand. South Korea went from 3rd position to 5th. States with an important decrease in their ICA figures, which consequently do not figure among the top 30 countries anymore, are the following: China (14 in 2021, 250 in 2020), Belarus (1 in 2021, 42 in 2020), Lithuania (8 in 2021, 32 in 2020), Pakistan (8 in 2021, 28 in 2020), Uganda (12 in 2021, 26 in 2020) and Ivory Coast (17 in 2021, 22 in 2020). The ICA evolution from China is significant: it went from being first State of origin for many decades, still among the top 5 States of origin in 2019 and 2020, to being among the first 50 States of origin with only 14 ICA in 2021. This can especially be explained through the actions taken by the country during the Covid-19 pandemic where the Chinese Central Adoption Authority stopped processing intercountry adoptions of children from social welfare institutions.

As mentioned above, there is an increase in collaboration with States of origin. Those that newly feature on the list of the top 30 countries in 2021 are Bolivia, Dominican Republic, and Sierra Leone. It is to be noted that these last two countries were part of the list of the top 30 countries in 2019 already. Further, on the 126 identified States of origin, 62% have undertaken maximum 10 intercountry adoptions, confirming a trend identified since 2019 that collaborations with States are diversifying, with consequently more States of origin but fewer adoptions in each of these States

Continued standard setting

It is worth noting the ratification of the 1993 Hague Convention by Niger in 2021, which has entered into force in the country on February 1, 2021. The Convention now has [105 contracting States](#), counting also the recent ratification of Botswana which will enter into force on February 1, 2023.

It is noteworthy that over 81% of states of origin with over 20 ICAs (“top 30”) were carried out in virtue of the 1993 Hague Convention, which is consistent with previous figures from 2019 (80% in 2020, 87% in 2019). Among the States of origin which constitute the top 30, seven States (Ukraine, Morocco, Nigeria, Taiwan, Jamaica, Liberia, and Sierra Leone) have not ratified or adhered to the 1993 Hague Convention. The total number of ICAs conducted in these countries amounts to 656 ICAs which represents 19% of the total ICAs for all top 30 states of origins (total: 3,439).

Similar trends for domestic adoptions?

Despite slightly lower figures in some contexts (3,351 in 2019 compared to 2991 in 2021 in India; 718 in 2019 compared to 569 in 2021 in Colombia), domestic adoptions in States of origin have seemingly been less affected by the Covid-19 pandemic. In Burkina Faso and in Romania, a slight increase in the domestic adoption numbers can even be observed: 43 in 2019 to 70 in 2021 in Burkina Faso and from 1264 in 2019 to 1653 in 2021 in Romania.

Profile of children

With ICA statistics becoming more precise, States of origin increasingly provide more details on the adopted children's age, gender and situation prior to the adoption, as per the type of adoption in question.

With regards to age, data available from States of origin confirm that children adopted domestically were generally younger than in ICA.^{xlii} In the majority of States, children adopted internationally are between one year old and four years old (Australia, France, Ireland, Norway, Sweden, Switzerland) with countries such as Italy, having the majority of children ageing between 5 to 9 years old, and Canada having the majority of children aged at least 10 years old.

Further, in Colombia, Peru, Latvia and Bulgaria^{xliii} for instance, it can be noticed that the percentage of children with disabilities being adopted internationally is prioritized over domestic adoptions. In addition to age and gender details, it is also noteworthy that more and more States provide details on the children's backgrounds (adopted from institutions, family of origin, foster care or guardianship). In certain contexts, such as Bulgaria or Latvia, it is encouraging to see that the large majority of children are being adopted from foster care or guardianship.^{xliv}

Leaving aside the specific figures for 2020, the figures for 2021 follow the trends observed in recent years: decline in intercountry adoption, diversification of cooperation between States, etc.

Yet, these figures will need to be analysed - even more so in the years to come - in the light of the numerous investigations carried out within several national entities, which began in 2020 and 2021, and will certainly have consequences for the intercountry adoption landscape moving forwards.

LEGISLATION

In this article, Patricia Carey, CEO of the Central Adoption Authority of Ireland, provides a brief overview on the legislative history behind the enactment of the Birth Information and Tracing Act 2022, and introduces some of the main features introduced by the new Bill for adoptees and birth families.

New legal right to birth information for adoptees finally rights a historic injustice in Ireland

Much like the history of adoption in Ireland itself, the process of providing the legal right to birth information for those who are adopted has something of a chequered past.

Indeed, the Birth Information and Tracing Act 2022 that was finally signed into law on 1 July 2022 came almost 40 years after the first attempts to produce such a piece of legislation.

A long way to its adoption: balancing the rights of adoptees and birth families

As far back as 1984, when a review committee on adoption services established by the then Minister for Health and Social Welfare recommended a right of access for adopted persons to their birth certificate – a recommendation that was never implemented –

there has been a recognition that we should all be able to access our birth information.

The stumbling block for legislation was always around attempts to balance that recognition with the rights of birth parents, some of whom might not want their names and information shared. Draft legislation in 2001 tried to achieve that balance with mandatory counselling for applicants and a signed undertaking, on pain of criminal penalties, that he or she would not seek contact with their birth parents. The draft legislation from the Minister of State at the Department of Health and Children however never reached publication stage.

The Minister of State at the Department of Health and Children also made an attempt to legislate, to no effect. In 2014, three Senators initiated a Private

Members' Bill. That Bill allowed for the release of birth certificates with a mandatory information session to be held with a social worker before release, in all cases. The Bill fell with the dissolution of the government of the day.

In 2015, the then Minister for Children and Youth Affairs brought the Adoption (Information and Tracing) Bill to the government, work that his successor Dr Katherine Zappone continued. The balancing provisions in that Bill, published in 2016, were known as 'compelling reasons and the undertaking'. The compelling reasons test, to be applied in circumstances where a parent objected to the release of information, involved an application to the Circuit Court to determine if a threat to life of the parent was present and, therefore, justified the refusal of information. These provisions were rejected, and an alternative approach was developed and proposed by Minister Zappone in May 2019. This provided for situations where a parent objected to the parent's information being released, and both the parent and the adopted person were given an opportunity to state their case to the Central Adoption Authority, which would adjudicate. This Bill reached Committee Stage in the Seanad in June 2019 and lapsed with the dissolution of the Seanad in February 2020.

The Birth Information and Tracing Act 2022 finally, and clearly, prioritises the rights of the adopted. It enshrines in law, for the first time, the right for every Irish person who was adopted, boarded out¹, or had their birth information illegally registered to have full and unrestricted access to any information the State holds relating to their birth and early life.

Unrestricted access rights of all adoptees

Access rights enshrined in the new Bill include their rights to their original birth certificate, all care information, all early life information, and medical information. It means that since this free information service began operation this October, people can apply to find out their name, birth date, and birthplace, as well as their parents' names, dates of birth, and other details. In certain circumstances, these rights extend to the children and other next of kin if the adopted person has died.

The new law also establishes a statutory tracing service to facilitate contact between adoptees and birth parents and other birth relatives according to

¹ 'Boarded out' refers to the situation where the local authority placed a child in the care of a foster family or person and paid the carer to maintain the child; no adoption took place.

the preferences they register on the new Contact Preference Register. The law specifically clarifies the persons who can register and request contact.²

The Register, operated by the Central Adoption Authority of Ireland, opened for applications on 1 July 2022. It allows for different levels of contact. It might be that someone is willing to share background information, they might be willing to communicate by email or letter, they might be open to a telephone call, or they might be willing to meet in person. Others may wish no contact at all. It is up to each individual to make that choice.

To date over 16,000 people are registered on the Contact Preference Register.

In cases where a mother chooses to have no contact, this will not prevent her identity from being shared, but her desire not to be contacted will be communicated to the adoptee. In cases where a mother chooses to have no contact, this will not stop adopted persons meeting or engaging with other family members, such as siblings or half siblings.

Raising awareness on newly available services

The Register formed a key part of the public information and awareness campaign that ran until the end of September 2022 to inform people in Ireland and around the world of the important services to be provided under the Birth Information and Tracing Act 2022.

Adoption was only formalised in Ireland in 1953 with the Adoption Act of 1953. Up to that point, an estimated 20,000+ children had been 'boarded out' since the formation of the State – sent to live with foster families in 'informal' arrangements at a time before there was legal adoption.

Since the introduction of legal adoption in 1953, more than 48,000 children have been adopted, with an additional 2,000 or more children sent from Ireland to

² Adopted persons; those whose birth was illegally registered; those who were resident in an institution; those who were placed in a care arrangement; a parent of one of the above persons (or a person who believes themselves to be a parent); a relative of one of the above persons (or a person who believes themselves to be a relative); where the parent of one of the above persons is deceased, a friend of that parent who has information to share; next of kin of one of the above persons where that person is now deceased; a person who provided care to a child in a care arrangement; a person who was a relevant guardian of an adopted person.

other countries – mainly the United States – and adopted in these countries in the earlier days of adoption.

The Central Adoption Authority believes that around 100,000 people are affected by the new legislation. These are adopted persons and birth parents, but also siblings and other relatives who might be unaware of each other. Thousands of them are estimated to be living in countries such as the UK, US, New Zealand, Canada, and Australia.

In Ireland, there will be a great many households touched by adoption at some level, in some instances because of the manner in which State agencies and other institutions failed the mothers and children they were charged with protecting.

The information campaign and Contact Preference Register have been vitally important for letting concerned people know that they have the right to find out about who they are and where they came from and, possibly, to meet their birth parents and extended families.

Almost 70 years since the Adoption Act was passed in 1953, the [Birth Information and Tracing Act 2022](#) finally ends a historic injustice and succeeds in balancing parents' right to privacy and enshrining in law the importance of knowing one's identity.

Register contact preferences, make an application under the Act, or seek further information at birthinfo.ie

[Download the Public Information Booklet](#)

PRACTICE

Steunpunt Adoptie – Supporting Relatives impacted by Adoption

Interview conducted with Nele Vanmassenhove (Educational and Aftercare Worker) and Katherine D'Hoore (Educational and Aftercare worker) – more information about Steunpunt Adoptie can be found at: <https://www.steunpuntadoptie.be/nl>

Steunpunt Adoptie, based in Belgium, offers tailor-made information and aftercare to all adoptive parties, including relatives and extended family. Relatives play an essential role in ensuring adoptions are successful. However, they often have questions, reservations and preconceptions about how the adoption process works and their role within this. Steunpunt Adoptie have identified this as an area that lacks explicit support, and essential to ensuring the success of adoption placements. They run a training and information session for grandparents called 'My Grandchild Has Been Adopted'. They have shared an overview of their sessions, what inspired them to introduce such programmes and what they have been able to learn about providing services to relatives impacted by adoption and the significance of support networks in successful adoptions.

Identifying Grandparents as in need of Support

Through their work which provides support to all parties involved in adoption, the *Steunpunt Adoptie* team identified that there was a lack of support and understanding specifically for the relatives of adoptive parents, who are affected by adoption. For example,

they found that attachment theories for adopted children routinely came up as an area that is unclear for family members beyond the adoptive parents. It is essential to understand how children who are adopted can have attachment problems and trauma and how this can manifest, so that families can act in response to this to support the child.

It is important to ensure that relatives are properly informed about adoption and have a forum to ask questions for a range of reasons. Firstly, it is essential that adoptive families have a strong and informed support network. However, the *Steunpunt Adoptie* team found that often relatives were uninformed about the reality of adoption. There was often apprehension about asking the 'real questions' they have about the adoption process, for fear of upsetting adoptive parents or causing conflict within their families where relationships between relatives are not so open. Indeed, some questions might be extremely difficult for the adoptive parents to receive. Similarly, they reported that it is often difficult emotionally for adoptive parents to inform their relatives of the adoption procedure and answer their questions, and *Steunpunt Adoptie* reported that it can be more

successful when family members receive information from a professional, patient and neutral source, sharing the burden of informing and supporting other relatives in the adoption process. Finally, they highlighted that the 'grieving' process for grandparents is often overlooked, and that part of their process is coming to terms with the fact that this is not a biological grandchild.

As such, *Steunpunt Adoptie* developed their training programme to create an open and conversational space for relatives to ask questions, gain a better understanding of the adoption process and provide a realistic expectation of what adoption experiences are, in light of ensuring that there is a strong network in place to support the child and the adoptive parents. Finally, the training also aims at ensuring that the child feels welcomed and accepted by their grandparents. The main focus of the work of *Steunpunt Adoptie* is always to the child.

Themes and Structure of Training

The sessions for grandparents and relatives are based on the training that *Steunpunt Adoptie* offers potential adoptive parents, but is tailored to suit the experiences of relatives and grandparents. It includes information that provides detail about the theoretical frameworks, and videos that depicted the experiences of adoptive families.

The primary focus is providing an insight for grandparents on how they will be perceived as an 'adopted grandparent', how this experience will differ from having biological grandparents, and how to deal with positive and negative interactions with other people, regarding the adoption. They keep sessions

positive and provide practical information about how to improve the lives of adopted children.

Sessions are run both in person. They encourage as many people to physically attend as possible, as they value the social aspect and community feeling that training sessions can offer. They ask for a €15-30 contribution to the training.

Outcomes

They see their training sessions as an entry point, and always encourage it to be viewed as the inception point for open channels of communication should grandparents have any further questions or need for support in the future. They aim to ensure that grandparents feel properly supported by their team. Courses for different parties involved in adoption are run concurrently, and, in some cases, relatives are invited to the other courses to provide them with further information and perspectives. They also have an extensive catalogue of information and stories that they encourage the families to use.

Concluding Remarks

The work of *Steunpunt Adoptie* confirms just how important a network of support is for families involved with adoption. Successful adoptions require support for, and from, all those involved – the *Steunpunt* team refer to the saying 'it takes a village to raise a child'. They view their training programmes as a necessary part of their duties towards the adoptive parents. It is essential that all relatives come together to support the needs of the adoptive child, and training programmes such as that of *Steunpunt Adoptie* are evidence of the importance of channelling resources beyond just adoptive parents and children.

The tool of music therapy

Mj Nguyen, LCSW, MT-BC is a licensed clinical social worker and board-certified music therapist. She began her professional career in music therapy in 2019, working with neurodiverse children. She later worked with adult patients with serious mental illnesses at Arizona State Hospital in Phoenix, AZ, as well as with adolescents and adults at Aurora Behavioral Health in Tempe, AZ. She is currently in private practice in Los Angeles, CA, and is the founder of Beyond two worlds where she provides individual therapy services for adoptees.

What is Music Therapy?

Music has been a part of every age and culture. Its early uses trace back to shamans' rituals as a remedy for the unwell. It has been used to commemorate

special events, celebrations, to accompany dances, and to score thousands of movies and television shows. Music has a way of opening our hearts. It helps us feel more connected to ourselves, to others, and to

the world at large. There is research that suggests our brains are prewired for music and that the brain itself has evolved to make sense of music.

So, what is music therapy and how can it help people? How can it help adoptees? First, let's define music therapy. According to the [American Music Therapy Association](#) (AMTA), "*Music therapy is the clinical and evidence-based use of music interventions to accomplish individualized goals within a therapeutic relationship by a credentialed professional who has completed an approved music therapy program.*"

Music therapists address physical, emotional, cognitive, and social needs of individuals. They assess the strengths and needs of the client then provide the indicated treatment, which may include creating, singing, moving to, and/or listening to music. The musical involvement in this therapeutic context strengthens clients' abilities and is transferred to other areas of their lives. Music therapy also provides increased avenues for communication that are helpful to those who are nonverbal or

find it difficult to express themselves in words.

Who benefits from music therapy?

Music therapists serve many different populations. They work with children, adolescents, and adults with developmental and learning disabilities, healthy adults, the elderly with mental health needs, Alzheimer's disease and other aging related conditions, individuals with substance abuse problems, brain injuries, physical disabilities, and acute and chronic pain, including mothers in labor. Music therapy can also benefit children and teens in foster care and adoptees to promote healing from trauma, insecure attachment, and to address emotional/behavioral disturbances.

Where do music therapists work?

Music therapists work in multiple settings. You will find music therapists in psychiatric hospitals, rehabilitative facilities, medical hospitals, outpatient clinics, day care treatment centers, agencies serving persons with developmental disabilities, community mental health centers, drug and alcohol programs, senior centers, nursing homes, hospice programs, correctional facilities, halfway houses, schools, and in private practice. Music therapists in private practice often work with neurodiverse children, teens, and adults including individuals with autism spectrum disorder, ADHD, cerebral palsy, and the medically fragile.

What are the required qualifications of music therapists?

In addition to the approved music therapy curricula, music therapists must also be trained, accomplished musicians. Common instruments used are guitar, piano, percussion, voice, etc.; however, a music therapist must be versatile and able to adjust to changing circumstances. Many different instruments may be used within a therapeutic context. There is not one single instrument the music therapist needs to play in every session. Rather, during their course of study, music therapy students choose one instrument to be their major instrument of focus and are given basic training on a variety of instruments. The choice of instrument or musical intervention used in a music therapy session is dependent upon the client's and/or patient's goals and objectives, their preferences, and the music therapist's professional judgement.

How does music therapy work?

Generally, there are two different forms of music therapy. Active music therapy involves the therapist and client(s) creating music together with instruments, their voices, or other objects. Receptive music therapy involves the therapist playing or making music as the client listens. For example, a music therapist may play guitar and sing a patient's preferred music, bedside in a hospital setting to decrease pain, anxiety, and or stress.

What are the benefits of music therapy for adoptees?

Music is both interesting and motivating. Research shows that, music itself may provide needed neurological stimulation, acting as a catalyst for change and growth. Music requires the simultaneous processing of visual, auditory, sensory, and motoric information typically using skills of imitation and synchronicity. Researchers³ suggested that the areas of the brain used in music making overlap with those that contain mirror neurons, ones that react and respond to the actions of self and others.⁴

Music therapy can effect change to a child's brain and nervous system over time. It provides opportunities for young adoptees to make choices and to increase a sense of control when so many factors have been outside of their control. Additionally, music therapy provides opportunities for adoptees to:

³ Wan, C., Demaine, K., Zipse, L., Norton, A., & Schlaug, G. (2010). From music making to speaking: Engaging the mirror neuron system in autism. *Brain Research Bulletin*, (82)3-4, 161-168.

⁴ Preis, J., Amon, R., Robinette, D.S., & Rozegar, A. (2016). Does music matter? The effects of background music on verbal expression and engagement in children with autism spectrum disorders, *Music Therapy Perspectives*, 34, 106-115.

- Explore feelings and emotions around their adoption experience
- Increase secure attachment within the context of a therapeutic relationship
- Explore issues such as self-esteem or personal insight around adoption
- Explore feelings around grief and loss caused by adoption
- Make positive changes in mood and emotional states
- Enhance a sense of control by having successful experiences
- Increase awareness of self and environment
- Express self both verbally and non-verbally
- Develop coping and relaxation skills
- Support healthy feelings and thoughts
- Interact socially with others
- Resolve conflicts, leading to stronger family and peer relationships

Therefore, the outcomes of music therapy include:

- Successful and safe emotional release
- Improved self-image
- Better self-esteem
- Decreased anxiety/agitation/sadness
- More skillful verbalization
- Enhanced interpersonal relationships
- Increased connection to self and others
- Increased sense of control

- Improved concentration and attention span

A substantial body of research on music as therapy exists that supports its efficacy and is published through the Journal of Music Therapy and Music Therapy Perspectives. There is still much to learn about music and the brain, and yet it appears that whether we are young or old, the benefits of music affect us all.

Additional References and resources:

- Levitin, D. (2012, January 4). *Daniel Levitin on our musical brain*. EarthSky. [Extract](#)
- Trehub, S.E. The developmental origins of musicality. *Nat Neurosci*. 2003 Jul6(7), 669- 673. Doi: 10.1038/nn1084. PMID: 12830157.
- [American Music Therapy Association](#)
- [World Federation of Music](#)
- [The Academy of Neurologic Music Therapy](#)
- [Nordoff Robbins Music Therapy](#)
- [The Bonny Method of Guided Music and Imagery](#)

FLOOR IS YOURS

In this article, Carolyn Housman, CEO of Children and Families Across Borders, a UK-based charity and ISS member, reflects on some of the findings provided in the Racial and Ethnic Disparities in Children's Social Care report published this year in the UK.

Who is responsible for this child? A reflection on the Racial and Ethnic Disparities in Children's Social Care Report

As a mother of a young child, I often find myself in playgrounds. When a child falls off the slide and starts crying, there is a collective clamour of parents nearby who rush in to check the child is okay. Quickly thereafter, the adults look around wondering who is responsible for the child? After all, whoever is caring for the child should be looking out for them,

protecting them from dangers large and small. This is what we expect for any child.

Yet there is a group of children who do not seem to get that attention when something goes wrong. Or, if they do, it comes quite late in their lives. At least this is what the *Racial and Ethnic Disparities in Children's*

Social Care report⁵ suggests. Children from minoritised communities seem to have less contact with social services when they are young. When they do have contact with a social worker, in their teenage years, there is often less time between the local authority completing an initial children's social care referral and these children entering care⁶. The data does not yield much insight as to why this might be.

We shouldn't be categorising people, but we don't have a better option - yet

Before reflecting on the *Racial and Ethnic Disparities in Children's Social Care* report data, or the heavily cited *Ethnicity and Children's Social Care* report, it is important to acknowledge that it artificially places children into categories which are, at best, reductionist and aren't always entirely helpful. For example, to understand the experience of a Jamaican child, we need to look through data which includes 'White and Black Caribbean', 'Caribbean', 'Black', 'Any other Black, African or Caribbean background'. The Caribbean has thirteen countries, so imagine the difficulties when trying to understand the experience of a Nigerian child who is classed as 'African' (covering 54 countries) or 'Black' or 'White and Black African' or 'Any other Mixed or multiple ethnic background'. Language is important, and the experience of someone from Nigeria will not be the same as someone from Sudan or Jamaica; nor will the experience of a Canadian be the same as a Ukrainian, but both are classed as 'White'.

Nationality (and, separately, ethnicity) is a field that every social worker *should* fill in when working with a child or family. Unfortunately, this field is skipped – often for good intentions like building trust – but it can have dire consequences for a child if further support is needed. For example, if children's nationality has not been recorded they may (and frequently do) leave care without settled immigration status. In other instances, social workers may find that when they make contact with families of children in need of support, the family may flee overseas due to a lack of understanding about how our social services work. Because nationality has never been captured, social workers have no idea where a vulnerable child has been taken.

While categorising ethnicities is reductionist, it does help us identify when things are going wrong.

And some things do seem to be going wrong.

Ethnic groups are treated differently in a way that creates disadvantage

⁵ *The Independent Review of Children's Social Care*. May 2022. "[Racial and Ethnic Disparities in Children's Social Care](#)"

⁶ Ahmed, Noor and Darece James, Adnan Tayabali and Matthew Watson. May 2022 "Ethnicity and children's social care". Department for Education.

If we can sidestep the challenge of language for a moment, there are two important trends that can be observed in the UK:

- Children from 'Black' ethnic groups are overrepresented in care⁷
- Nearly a third of social workers reported witnessing racism directed towards families or service users by colleagues or managers in a recent survey⁸

There is a problem in the system if those who are meant to bring social justice to the disadvantaged and vulnerable of society are discriminating (consciously or unconsciously) against them. More research is needed into who these 'Black' children are and why they are overrepresented in care, as well as how to prevent further harm and promote better practice by the majority of social workers who want to help.

Unfortunately, when 'Black' children experience social care they seem to face even greater disadvantage as a result. For example, the *Racial and Ethnic Disparities in Children's Social Care* report notes that "Black Caribbean and Any other Black ethnic groups experienced high rates of residential placements, close to 1 in 3"⁹. Children in residential placements are known to have worse life outcomes than those in non-residential placements, including being more likely to offend.¹⁰

Moreover, "children whose ethnic group was Black Caribbean have notably higher proportions (15 – 21%) of experiencing 3 or more placements during the year"¹¹. This is highly disruptive and destabilising for a young person. It is unsurprising then that the psychological, social and academic outcomes are worse for people who have many changes of placement than for those who do not.¹²

Ethnic minorities are 'disappearing' overseas, and we don't know why

Finally, there are two interesting statistics related to children and their families¹³.

- Children from Asian, Black and Any other ethnic groups had high proportions of children returning home or going on to independent living. Children from these groups also had higher proportions of children leaving care for other reasons such as

⁷ Idem 6.

⁸ *What Works for Children's Social Care*. 2022a "Understanding formal kinship care arrangements in England – analyses of administrative data".

⁹ Idem 6.

¹⁰ *What Works for Children's Social Care*. 2022b "[Residential Care: Comparing the outcomes of residential care with other types of placement, such as foster care](#)".

¹¹ Idem 6.

¹² *National Institute for Health and Care Excellence*. [Looked after children and young people: statement 3: Stability and Quality of Placements](#)". Last accessed 28 September 2022.

¹³ Idem 6.

moving abroad (36 – 40% compared to 26% for all children).

- Children from Asian, Black or Other ethnic groups had comparatively low rates of leaving care to adoption or special guardianship (5 – 7%). The rate was up to six times higher for White, Mixed and Refused/Missing ethnic groups (30%, 28% and 36% respectively)

In the 67 years that Children and Families Across Borders (CFAB) has been operating, we have overseen approximately 20,000 international cases – so we know there is no typical experience for a child and no end to the horrible situations children find themselves in. Yet, it is surprising to see the assertion that a notable number of children from ‘Black’ or ‘Any other ethnic group’ leave care for other reasons, such as moving abroad. How significant are these numbers and why do these care leavers move overseas? Are these the 5% of Looked After Children who are Unaccompanied Asylum Seeking Children (UASCs)¹⁴? Or the 10% of Looked After Children with unresolved immigration or citizenship issues¹⁵? Did they fail to receive settled status whilst being looked after by their local authority and are now forced to leave? If so, this is worrying given the traumatic experience they have had which “significantly impacts their mental, emotional and physical health”¹⁶. It is also a major financial drain, as the Racial and Ethnic Disparities in Children’s Social Care Report cites: “One study has shown local authorities can potentially save more than £130,000 per child (in some scenarios) by submitting a citizenship application at age 13 instead of waiting until the young person reaches the age of 18”.¹⁷

In a similar vein, it might be that these are children with heritage from another country, so perhaps are they now returning to that country to reconnect with family there? If so, why weren’t these family members explored as carers for them, as seems to be the case for ‘White’ children (for whom 30% leave care through adoption or Special Guardianship)? Even though the report cites official reports from local authorities, CFAB’s own Freedom of Information request to local authorities showed that effectively 0% of children in care are reunited with family overseas.¹⁸ So, who are these Black children leaving care to move abroad? The lack of understanding of these children’s’ experiences tarnishes what should be an exemplar social service system but also is a real loss

¹⁴ Idem 5.

¹⁵ South London Refugee Association. 2021. [“Taking Care: How local authorities can best address immigration issues for children in care”](#)

¹⁶ Idem 5.

¹⁷ Idem 15.

¹⁸ Children and Families Across Borders. 2022. [“Freedom of Information Request Findings on Looked After Children and International Placements”](#).

for the country as, when they leave care, Black children have the highest percentage of being in education, training or employment (73%) versus other ethnicities.¹⁹

When a child is removed from their parents’ care, who is responsible for the child?

The Racial and Ethnic Disparities in Children’s Social Care report raises so many more questions than it answers. When a child become Looked After, they join some of the most vulnerable in society. A collective responsibility ensues where the council, elected members, partner agencies and employees must promote the welfare of the child and, in some cases, retain parental responsibility for them. Reading through the reports on ethnic disparities in children’s social care raises the question: who really is responsible for these children?

We live in a country with deep traditions and a wide variety of cultures. A country which hosts nearly two hundred different nationalities and where one in three children born in England and Wales have at least one foreign-born parent. So, we need to be more sophisticated in how we deliver and evaluate care for children.

Although [Children and Families Across Borders \(CFAB\)](#) is a small charity, we are committed to using our knowledge of working across hundreds of countries every year to support social workers to better deliver social justice to families. Please [subscribe to our newsletter](#) to receive updates about our forthcoming cultural capability training and resources.

¹⁹ Idem 6.

FURTHER READINGS AND MATERIAL

Recent resources on specific topics related to child protection, alternative care, and adoption

Resources related to the Ukraine-Russia conflict:

- UNICEF (octobre 2022). [The Impact of the War in Ukraine and Subsequent Economic Downturn on Child Poverty in Eastern Europe and Central Asia](#).
- Ukraine Children's Care Group (novembre 2022). [Brief: Addressing the need for foster care in the context of the Ukraine crisis](#).

Breyse Céline (2022). *Good morning Nilanthi - Diary of an adoptee in Sri Lanka*.

In search of her origins, Céline Breyse, adopted from Sri Lanka, investigates against a background of child trafficking.

Clifford, J., (e.a.) (2022). [A home for me? A comparative review of the value of different forms of permanence for children – Adoption, SGOs and Fostering](#).

This report explored the value brought by therapeutic adoption and therapeutically informed fostering from the perspectives of a range of stakeholders.

Council of Europe – [Guide for Children and Young People to the Council of Europe Strategy for the Rights of the Child \(2022-2027\)](#)

This guide is intended for children and young people to help them understand the main objectives of the Council of Europe Strategy for the Rights of the Child (2022-2027). A French version of this tool will be available soon.

European Court of Human Rights - [New ECHR knowledge sharing platform](#)

This resource aims to share knowledge on the case law arising from the European Convention on Human Rights and complements existing information tools such as the HUDOC database.

Doncel, Red Latinoamerica de Egresados de Protección, Better Care Network and Changing the Way We Care (October 2022). [Regional Mapping of Activists with Lived Experience of Alternative Care in Latin America and the Caribbean](#).

Given the importance of knowing and supporting committed people with experience of care in order to ensure that the voices of people at the end of life are heard, the objective of this research is to identify "activists" with experience of alternative care in Latin America and the Caribbean.

Webinar: ICAV (2022). [Navigating Disability and Rare Medical Conditions as an Intercountry Adoptee](#)

On 23 November, ICAV ran a webinar with panelists sharing lived experience as intercountry adoptees with disability and rare medical conditions who are often invisible amongst the intercountry adoptee community. ICAV's goal was especially to help to raise awareness of the extra complexities they experience.

Webinar: ESARO Regional Learning Platform on Care Reform (2022). [Supporting Kinship care in Eastern and Southern Africa](#).

This webinar discussed the importance of investing in kinship care, particularly as the most common form of alternative care in the region, and presents several promising practices.

FORTHCOMING CONFERENCES AND TRAINING

- **France** : *Home placement: a paradoxical educational innovation*, Droit d'enfance, March 30, 2023. More information at the [following link](#).
- **Around the world:**
 - [EDI Exploring Expertise: Enhancing Anti-Racist Practice in services supporting permanence for children and young people](#), CoramBAAF, February 14, 2023.
 - [Making Good Adoption Assessments – two-day open course](#), CoramBAAF, February 22, 2023.
 - [Unconscious Bias – Understanding Diversity and Discrimination](#), CoramBAAF, February 28, 2023.
 - [Sibling Assessments: Beyond, together or apart](#), CoramBAAF, April 25, 2023.

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ⁱ December 2021: [UNICEF](#) estimates that the percentage of children living in multidimensional poverty has increased to 52 per cent, an increase of 100 million additional children. Reverting a lost decade: Urgent action to reverse the devastating impact of COVID-19 on children and young people.

ⁱⁱ Hillis S, Unwin HJT, Chen Y, et al. [Global minimum estimates of children affected by COVID-19-associated orphanhood and deaths of caregivers: a modeling study. Lancet 2021.](#)

ⁱⁱⁱ Where a source is not specifically indicated, statistics reported to the [Hague Conference on Private International Law \(HCCH\)](#) have been used.

^{iv} These [statistics](#) are based on the fiscal year as applied in the US.

^v Intercountry adoption statistics for the years 2016 to 2021 were provided to ISS/IRC by the Italian Central Authority. Link to the [report](#)

^{vi} For 2012 and 2015 to 2018, statistics were provided to the ISS/IRC by the Canadian Federal Central Authority. Data for 2013, 2014 and 2019 are based on statistics provided by the country to the HCCH. The statistics for 2020-2021 were provided to the ISS/IRC by the Canadian Central Authority.

^{vii} The data for 2021 are those available on the [MAI](#) (Ministry for Europe and Foreign Affairs) website as well as on the [French official statistics website](#).

^{viii} As in previous years, data for 2021 includes statistics from all Autonomous Communities and has been provided to the ISS/IRC by the Spanish Central Authority.

^{ix} For 2017-2019, statistics have been provided by the Swedish Central Authority. Data for the years 2016 and 2020-2021 are based on statistics provided by the country to the [HCCH](#).

^x The ISS/IRC has included Belgium in its collection of statistics since 2014. The data for the years 2014, 2017 and 2019 are based on statistics provided by the country to the HCCH. In 2015, the statistics were provided by the Belgian Federal Central Authority. For 2018, the statistics were provided by the [Federal Public](#)

[Service Justice](#). For 2016, the data was provided by the French and Flemish Community Central Authorities. They related to children who were physically received by their adoptive families, although the adoption was sometimes formally pronounced months or years later. For 2020-2021, the data is based on statistics provided by the Belgian Federal Central Authority.

^{xi} Data for 2021 have been provided to the ISS/IRC by the Dutch Central Authority.

^{xii} The ISS/IRC has chosen to add Finland from the year 2020 onwards in the compilation of its statistics. The data for 2021 was provided by the Finnish Adoption Board. In order not to distort the statistics published in recent years by the ISS/IRC, the statistics for previous years (2012-2019) are not included in the total but are available at the [following link](#).

^{xiii} For the period 2014-2019, the ISS/IRC used various sources (*Statistisches Bundesamt*, statistics provided by the country to the HCCH). For 2020-2021, the German Federal Central Authority, *Bundesamt für Justiz*, provided the statistics presented in the table to the ISS/IRC and the HCCH. However, the Federal Central Authority made it clear that these figures only include adoptions that took place in a country that is a Contracting Party to the 1993 Hague Convention and that were mediated by a German accredited adoption body or by a regional Central Authority. Furthermore, these statistics do not include private and independent adoptions.

^{xiv} Data for 2019 are based on statistics provided by the country to HCCH. Data for 2020-2021 have been provided to ISS/IRC by the Norwegian Central Authority, *Barne-, ungdoms- og familiedirektoratet*.

^{xv} The 2020 statistics are based on the fiscal year as applied in Australia which runs from 1 July 2019 to 30 June 2020. The 2021 statistics are based on the fiscal year from 1 July 2020 to 30 June 2021 (see [link](#)).

^{xvi} Several sources were used for the period 2014-2020 (Federal Statistical Office, Swiss Central Adoption Authority, statistics provided by the country to the HCCH). In 2019, the Swiss Federal Central Authority has decided to revise its data compilation and analysis system, so that an intercountry adoption is recorded based on the time of arrival of the child in Switzerland over a certain year. Previously, the data analysis was based on the year in which the adoption decision was issued. Swiss intercountry adoption figures have been adjusted up to 2008 using this new method, which is why the ISS/IRC decided to highlight the differences in the table above. Data based on the old system is provided in brackets. Data for 2021 are those provided by Switzerland to the [HCCH](#).

^{xvii} The data for 2019-2021 has been provided to the ISS/IRC by the Danish Central Authority and is available at the [following link](#).

^{xviii} The ISS/IRC has chosen to add New Zealand from the year 2020 in the compilation of its statistics. The 2020 statistics are based on the fiscal year as applied in New Zealand which runs from 1 July 2019 to 30 June 2020. The 2021 statistics are for the fiscal year 1 July 2020 to 30 June 2021. In order not to distort the statistics published in recent years by the ISS/IRC, statistics for previous years (2012-2019) are not included in the total but are available at the [following link](#).

^{xix} Data for 2021 has been obtained from the HCCH website. The ISS/IRC has chosen to add Ireland from the year 2020 onwards in the compilation of its statistics. In order not to distort the statistics published in recent years by the ISS/IRC, the statistics for previous years (2012-2019) are not included in the total but are available at the [following link](#).

^{xx} Where a source is not specifically indicated, statistics are based on those of the main receiving States. ISS/IRC has chosen here to propose an overview of States of origin having made at least 20 intercountry adoptions during the year 2021. Variations with the statistics provided by States of origin to HCCH may exist and may be related to the different methods of accounting for an intercountry adoption between States of origin and receiving States.

In addition, in recent years, several countries, such as Germany, Australia, Italy, Norway and Switzerland, list certain countries of origin in general categories, such as "several Asian countries" or "other countries". As a result, it was impossible to determine the precise origin of these adopted children. By using the standard HCCH model, this problem seems to have been solved.

^{xxi} It should be noted that the [statistics provided by the country to the HCCH](#) mention 435 international adoptions in 2020 and 485 in 2021.

^{xxii} It should be noted that the [statistics provided by the country to the HCCH](#) mention 417 international adoptions in 2020 and 414 in 2021.

^{xxiii} It should be noted that the [statistics provided by the country to the HCCH](#) mention 178 international adoptions in 2020 and 208 in 2021.

^{xxiv} It should be noted that the [statistics provided by the country to the HCCH](#) mention 95 international adoptions in 2020.

^{xxv} It should be noted that the [statistics provided by the country to the HCCH](#) mention 139 international adoptions in 2021.

^{xxvi} It should be noted that the [statistics provided by the country to the HCCH](#) mention 246 international adoptions in 2020 and 160 in 2021.

^{xxvii} It should be noted that the [statistics provided by the country to the HCCH](#) mention 42 international adoptions in 2020.

^{xxviii} This country was added in 2019. Data for 2019 and 2020 are based on statistics from the main receiving states. Statistics for 2017 are based on [statistics provided by the country to the HCCH](#).

^{xxix} This country was added in 2021. Data for the period 2019-2020 are based on statistics from the main receiving states.

^{xxx} This country was added in 2018. Statistics for 2012 to 2018 are based on statistics provided by the country to HCCH. Data for 2019 and 2020 are based on statistics from the main receiving States. Note that the [statistics provided by the country to the HCCH](#) indicate 27 intercountry adoptions in 2021.

^{xxxi} This country was added in 2021. Data for the period 2019-2020 are based on statistics from the main receiving states.

^{xxxii} Statistics for 2012-2018 are based on data provided by the country to the HCCH. Data for 2019-2021 are based on statistics from the main receiving states.

^{xxxiii} This country was added in 2019. For 2017 and 2018, this is the sum of data provided by the US Department of State (USA); *France Diplomatie* (France); and the *Commissione per le Adozioni Internazionali* (Italy). Data for 2019 and 2020 are based on statistics from the main host states.

^{xxxiv} This country was added in 2019. Data for 2019 and 2020 are based on statistics from the main receiving states. Data for 2012-2013 are taken from ISS/IRC kafalah statistics (see: Status report on Morocco, August 2017).

^{xxxv} This country was added in 2019. Data for the years 2012 to 2018 are based on statistics provided by the country to HCCH. Data for 2019 and 2020 are from the main host states. Please note that the [statistics provided by the country to the HCCH](#) indicate 34 intercountry adoptions in 2020 and 64 intercountry adoptions in 2019.

^{xxxvi} This country was added in 2018. Data for the years 2012-2017 are based on statistics provided by the country to HCCH. Data for 2018-2020 are based on statistics from the main receiving states.

^{xxxvii} This country was added in 2020. Data for the years 2012 to 2018 are based on statistics provided by the country to HCCH. Data for 2019 and 2020 are based on statistics from the main receiving states. Please note that the [statistics provided by the country to the HCCH](#) indicate 32 intercountry adoptions in 2021.

^{xxxviii} It should be noted that the [statistics provided by the country to the HCCH](#) mention 8 international adoptions in 2021.

^{xxxix} This country was added in 2019. Data for 2017-2020 are based on statistics from the main receiving states.

^{xl} Data for 2012-2018 are based on [statistics provided by the country to the HCCH](#). Data for 2019 and 2020 are based on statistics provided by the main receiving States; please note that the [statistics provided by Mexico to the HCCH for 2019](#) only mention nine intercountry adoptions in 2019.

^{xli} This country was added in 2019. Data for 2019-2021 are based on statistics provided by the main host states.

^{xlii} E.g. Bulgaria: 309 children out of 361 adopted via domestic adoption were below the age of 1 or between 1-4 whereas no child below the age of 1 years was adopted internationally; Romania: 529 children out of 1653 children adopted domestically were below the age of 2, whereas children adopted internationally were mainly aged between 3 and 6 years old.

^{xliii} Colombia: out of 485 ICAs 395 were special needs adoptions; Latvia: out of 8 ICAs 8 were special needs adoptions; Bulgaria: out of 208 ICAs 73 were special needs adoptions; Peru: out of 31 ICAs 23 were special needs adoptions.

^{xliv} Bulgaria: 348 children were adopted from foster care out of a total of 361 domestic adoptions; Latvia: all children adopted domestically came from foster care or guardianship arrangements