

Guidelines on Post-adoption Services



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European Network of National Observatories on Childhood

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Introduction

The document “Guidelines on post-adoption services” was drafted by a group of experts nominated by the partners of the European Network of National Observatories on Childhood (ChildONEurope).

ChildONEurope was set up in 2003 after two years of preparatory work in the context of the Permanent Intergovernmental Group “L’Europe de l’Enfance”, whose aim is, among others, to promote the mainstreaming of children’s policies and of the rights of the child in all EU policies. The main objectives of ChildONEurope are the following: the exchange of knowledge and information on national legislations, policies, programmes, statistics, studies and best practices concerning childhood and adolescence, the realization of comparative surveys, the organization of seminars and conferences at a European level with a multidisciplinary and comparative approach.

ChildONEurope is an institutional Network of the National Observatories or institutions on childhood appointed by the national Ministries which form the Intergovernmental Group “L’Europe de l’Enfance”. In 2007, ChildONEurope is made up of 9 Members and 15 Associated Members.

Among its topics of research, the issue of national and intercountry adoption was the first one to be addressed by the ChildONEurope Assembly, in consideration of its recent development and considerable relevance.

The choice to address the specific issue of post-adoption services was made after the drafting of a first survey, “Report on National and Intercountry Adoption”, in which this issue emerged as one of the key determinants of a successful adoption, which, however, is often not sufficiently or adequately addressed by the States involved in the adoption process.

The Guidelines, which are addressed both to professionals of the field and to policy-makers, are intended to represent a practical tool aimed at giving post-adoption services the relevance they deserve in the adoption process.

The drafting of the Guidelines greatly benefited of the fact that the ChildONEurope group of experts was composed of professionals and researchers coming both from Countries of Origin and from Receiving Countries who worked in a highly cooperative environment.

Furthermore, the drafting of the Guidelines comes also as a result of the input provided by the Hague Conference on Private International Law: in fact, the Special Commission on the practical operation of the Hague Convention on Protection of Children and Co-operation in Respect of Intercountry Adoption, held in September 2005, underlined the importance of post-adoption services and called for the drafting of guidelines on this issue.

“The Special Commission recommends that the Permanent Bureau, in consultation with Contracting States and non-governmental organisations, collect information on issues including, inter alia, the financial aspects of intercountry adoption, reports on prospective adoptive parents, preparation of prospective adoptive parents, and post-adoption reports, with the view to the possible development of future Parts of the Guide to Good Practice.”

In particular, special thanks are owed to Jennifer Degeling, Principal Legal Officer of the Permanent Bureau of the Hague Conference on Private International Law, for her support and advice in the elaboration of the Guidelines.

As regards its contents, the document is divided in two main chapters: context, rationale and goals of post-adoption services and practical issues. In the first part, the ChildONEurope group of experts decided to focus on the legal and theoretical context in which post-adoption services are most needed and the principles and goals that should lead post adoption interventions.

The second section analyzes the different types and levels of post-adoption services, starting from the important issue of follow-up reports. The main forms and goals of these instruments are defined, in

particular from the point of view of the Sending Countries and with respect to the recent recommendations of the Hague Conference on this matter. Then, the different areas and models of intervention are analyzed: in particular, the working group distinguished between the support given immediately after the adoption and the support provided in the following years. Indeed, these kinds of services have different and specific goals and thus focus on different aspects. This section also examines the issue of the intervention by services in particularly difficult situations.

Then the document tries to identify the characteristics of the services which should or can provide professional and efficient post-adoption support. In fact, different options for the organization of such services have been chosen in the various European Union Countries. This section also includes some paragraphs dedicated to the specific role of the accredited bodies and to the importance of training. Finally, the last part of the document focuses on monitoring and research, which represent important elements for the creation and implementation of post-adoption services, given that it is necessary to evaluate the effectiveness and quality of these services.

Finally, it must be underlined that the most significant experiences and practices collected on this issue have been given adequate visibility in all the sections of the text.

1. Context, Rationale and Goals of Post-adoption Services

1.1 Context

1.1.1 Legal Framework

The main international legal instruments governing national and international adoption are, first of all, the Convention on the Rights of the Child, particularly with regard to the general principles, and the 1993 Hague Convention on the Protection of Children and Co-operation in Respect of Intercountry Adoption, which is the principal international treaty regulating this issue and which has been specifically drafted to define detailed and legally binding international standards. With regard to the issue of post-adoption services, the Hague Convention requires States to undertake a range of general functions, such as the provision of counselling or the submission of post-adoption reports. Some of these functions address the long-term needs of adopted people and their families, and cross-border co-operation between the States of Origin and the Receiving State involved in the adoption process.

The Hague Convention on International Adoptions

The Hague Convention on Intercountry Adoption has been ratified by the following EU Member States and accession Countries: Austria, Belgium, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Germany, Hungary, Italy, Latvia, Lithuania, Luxembourg, Malta, the Netherlands, Poland, Portugal, Slovakia, Slovenia, Spain, Sweden, United Kingdom, Bulgaria, Romania and Turkey.

The Hague Convention on the Protection of Children and Co-operation in Respect of Intercountry Adoption of 1993, which is the principal international treaty regulating intercountry adoption, was specifically drafted to set detailed and legally binding international standards defining an agreed system of supervision and channels of communication and effective relationships between the authorities in the Country of Origin and the State receiving the adopted child. The first object of the Convention, as set out in Article 1, is “to establish safeguards to ensure that intercountry adoptions take place in the best interests of the child and with respect for his or her fundamental rights as recognized by international law”.

This regulatory instrument can be particularly effective, as it is shared both by the child’s Country of Origin and of Destination, with all the unquestionable advantages deriving from the recognition of a set of shared principles and of common, transparent procedures.

Regarding the issue of **post-adoption services**, it should be stressed that the obligations imposed by the Convention on Contracting States do not cease with the transfer of a child to his/her adoptive parents. The Convention requires States to undertake a range of other general functions that may be relevant to particular adoptions, such as the provision of counselling or the submission of post-adoption reports, or that may be relevant to a general review of the operation and implementation of the Convention, such as the collection of statistics. Some of these functions address the long-term needs of adopted people and their families, and cross-border co-operation between the State of Origin and the Receiving State will be necessary when adult adoptees begin searching for their origins.

In particular, as provided in Article 9, letter c of the Hague Convention, Central Authorities shall take, directly or through public authorities 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 demonstrates the acknowledgement and awareness reached, especially at international level, concerning the importance of taking into consideration the long term needs of adopted children and their adoptive families and of enlisting the help of qualified professional in solving conflicts or preventing uncomfortable situations. Furthermore, from the moment such recognition takes place at a supranational level, it should be assumed that commitment exists to promote cooperation initiatives between the Countries of Origin and the Countries of Destination with the aim of meeting the families’ need for support.

It should be borne in mind that the wording on post-adoption services was added based on the suggestion of some Countries of Origin “because of the importance of post-adoption services to ensure the child’s adjustment into his or her new home or environment, and the successful outcome of the adoption [...] the Convention should promote the social and cultural protection of adopted children, and make, through the Central Authorities, a conscious effort to see that they were not only protected, but also integrated into their new environment.”¹

The Explanatory Report also states that the aim of adequate post-adoption support is to provide the social and cultural protection of adopted children. This provision is also included in the Guide to Good Practice regarding the implementation of the Hague Convention drawn up by the Permanent Bureau, in the section dedicated to post-adoption services (para. 8.2.2), that sets out how adoptive parents should find qualified assistance in their own Countries to recognise the value and importance of cultural links for the child’s future development. Services should also be provided to assist the older child in searching for and gaining access to information in the Sending or Receiving Countries and to give advice on tracing family members in the Countries of Origin. These are typically post-adoption activities. As mentioned before, a first point to be raised is the fact that in the Hague Convention provisions there is no mentioning of any clinical and/or medical intervention in connection with typical post-adoption services.

With regard to the first topic, i.e. post-adoption services, it should be noted that the Convention neither specifies which body should provide these services, nor what these services should be. Nonetheless, the research on post-adoption services previously coordinated by the ChildONEurope Secretariat (“Report on National and Intercountry Adoption”, January 2006)² has shown that these services are generally provided by public bodies even though, in most Countries, these activities are also generally delegated to private entities providing services in the social sector.

Some States include this provision of services by private entities as a requirement for accreditation.³ In such cases, the common element is the existence of a regulatory body responsible for monitoring this activity and the actual provision of post-adoption services, testifying to the awareness of the need for these services to be provided in a highly professional manner and with due care. This awareness is also reflected in the general tendency to place these services within the central structures of government dealing with the protection of children.

But also in connection with intercountry adoption, post-adoption services are not necessarily provided exclusively by the Receiving Countries. In fact, in search and reunion cases, the States of Origin may also wish to establish services for adult adoptees.⁴ From a legal point of view, the types of services in question generally include counselling and support provided immediately after adoption, supplying information about the reception of minors and their needs and requirements as well as giving information to those people who after adoption wish to find out about their origins.

Concerning the ways in which these services are provided, the procedure commonly adopted both by public and private bodies in all the Countries examined is to make family support services normally available on request by the parties concerned.

The second area of intervention in the post-adoption period as per the Hague Convention, is the preparation of reports on the post-adoption period.

Two are the types of reports normally required: reports about the trial period necessary to complete the adoption procedure – the so-called progress report or probationary report mentioned in Art. 20 – and the reports drawn up after adoption has been completed.

With regard to the former, the Convention establishes that during the adoption process and prior to its completion, there is an obligation on the Central Authorities of both Countries to keep each other informed on the progress of the adoption; besides, for a probationary placement, when the child has been

¹ The Explanatory Report to the Hague Convention of 23 May 1993, paragraph 2.3.5.

² The research is available on: www.childoneurope.org/activities/pdf/draft%20report%20on%20adoption.pdf

³ See Guide to Good Practices para. 8.2.3.

⁴ See Guide to good practices para. 8.2.3.

transferred to the receiving State, the Central Authority of the receiving State must report on the progress of the placement.

Regarding the latter, there is an obligation on the Central Authorities to provide each other with general evaluation reports about experiences with intercountry adoption. Central Authorities are also required – even if an obligation is not established – to take all appropriate measures in so far as is permitted by the law of their State, to reply “to justified requests from other Central Authorities or public authorities for information about a particular adoption situation.”

During the Special Session of the Hague Conference (September 2005), with regard to the second type of report, in the document **Report and Conclusions of the Second Special Commission on the Practical Operation of the Hague Convention (17-23 September 2005)** drawn up by the Permanent Bureau it is stated as follows:

The Special Commission recommends to Receiving States to encourage compliance with post-adoption reporting requirements of States of Origin; a model form might be developed for this purpose. Similarly, the Special Commission recommends to States of Origin to limit the period in which they require post-adoption reporting in recognition of the mutual confidence which provides the framework for co-operation under the Convention.

This recommendation may probably be implemented – as it has already happened in recent times – through bilateral agreements between the States of Origin and of Destination of the minors.

Regarding the relationship with post-adoption services, it should be borne in mind that Art. 5 of the Hague Convention provides that adoption can only take place if the competent authorities of the Receiving Country have ensured that the prospective adoptive parents have been counselled as may be necessary (Art. 5 letter b). It should therefore be clear that the task of preparing and supporting the prospective adoptive parents cannot and should not end once the adoption process has been completed. If a good relationship has been built with the adoptive family and if this has established a relation with the relevant services based on trust, once the adoption has been finalised, the adoptive parents will see the professionals, who have followed their case before the adoption, as the people they could consult in case of worries or issues linked with the arrival of the child in the family. Such a provision, which originally referred to the stage preceding adoption could be interpreted, in a broader sense, as a presupposition for the creation of post-adoption services.

Concerning the **preparation of the child** for adoption, Art. 4 letter d of the Hague Convention sets out that the competent authorities have to ensure, having regard to the age and degree of maturity of the child, that the child has been counselled and duly informed of the effects of the adoption, and of his or her consent to the adoption, where such consent is required. This paragraph recognises the necessity and importance of an appropriate preparation of the child who will face the experience of adoption, as well as the necessity of appropriate follow-up to guarantee a positive experience when meeting the parents and in the time following adoption, thus limiting the negative effects that insufficient knowledge and information on the implications of adoption might have on a child. Furthermore, it is foreseen that the wishes and opinions of the child are taken into consideration in an appropriate manner, as also set out in Art. 12 of the UN Convention on the Rights of the Child, which recognises the right of the child to be heard in all matters that concern him/her.

At European level, the European Parliament resolution on the improvement of the law and cooperation among the Member States in child adoption procedures (record of 12/12/96 – A4-0392, published in the Official Journal of the European Communities C20 of the 20th of January 1997) invites – at point 7 – the Member States to put into practice instruments to prepare, help and follow the couples who are candidate for national and international adoption. Furthermore, point 17 demands the re-establishment of the European dimension in the field of international adoption to formalise the meeting of the central authorities indicated by the Member States and to provide for adequate instruments of

decision and management, in particular to create an international centre of reference as a computerized database as well as a research and evaluation unity in the field of adoption.

The Convention on the Rights of the Child (CRC)

Regarding adoption procedures, the need of all children for a family and for a sense of security and permanency in their relationship is recognized in the CRC Preamble that states that “the child, for the full and harmonious development of his or her personality, should grow up in a family environment, in an atmosphere of happiness, love and understanding.”

Article 21 addresses the rights of children who are adopted – in those Countries which permit adoption – establishing that **the best interests** of the child shall be the paramount consideration in all adoption arrangements and detailing minimum requirements for adoption procedures. Moreover, it states that intercountry adoption is only to be considered if the child cannot be suitably placed in his or her own Country.

Besides, the CRC Committee has further recommended that States ensure that **sufficient human and other resources** are made available for the effective implementation and monitoring of legislation.

There are also other provisions that can be relevant in respect of parental, and in particular, of post-adoption support. The articles indicated below – aimed at establishing some key principles in connection with parental responsibilities and the relevant support provided by the competent public agencies, are obviously applicable to adoptive parents as well.

Article 18 regulates the balance of **responsibilities between the child’s parents and the State**, and especially addresses support for parents in fulfilling their responsibilities. This article must be read in conjunction with Article 5 as well as Articles 3(2) and 27 (the State’s responsibility to assist parents in securing that children have adequate protection and care and an adequate standard of living).

These four articles of the CRC, taken together, make clear that parents have primary responsibility for securing the best interests of the child as their “basic concern”, but that this responsibility is circumscribed by the child’s rights under the Convention and may be shared with others, such as members of the wider family. The State must take appropriate steps to assist parents in fulfilling their responsibilities. If parents are unable to comply with this requirement, the State must intervene to ensure that the child’s rights and needs are met.

Before the approval of the CRC, protection of the family by the State was already provided under the **International Covenant on Economic, Social and Cultural Rights**, which in Article 10 states: “The widest possible protection and assistance should be accorded to the family, which is the natural and fundamental group unit of society, particularly for its establishment and while it is responsible for the care and education of dependent children.”

The CRC Committee has devoted much attention to the subject of family environment, both as regards the principle of parental guidance and the protection owed to families by the State (Articles 5 and 18).

In its Concluding Observations to the last report presented by the EU Countries⁵, the Committee has commented positively on a number of **initiatives** undertaken by the States in this field, first of all at **legislative** level, such as laws and action plans on family policy and against poverty and social exclusion aiming at setting up a global policy on the family and/or at tackling the issue of child poverty or specific laws or legislative amendments on child benefits, parental leave and shared parental custody. The Committee has further appreciated the creation of specific centres to support families by providing counselling and parental education.

Notwithstanding these positive achievements, the Committee has expressed its concern about the following issues: insufficient support by the State to families in terms of **parental education and counselling**, insufficient support by the State to families as regards **economic support and provision of child-care services**, inadequate respect for the principle that the child should maintain **contact with both parents** even in case of separation or divorce.

⁵ For this part see the ChildONEurope survey on the CRC Committee’s Concluding Observations to the last EU countries report available on: <http://www.childoneurope.org/activities/pdf/su00-Survey.pdf>

The Committee has underlined the need to prepare parents for their responsibilities, and in its Guidelines for Periodic Reports has asked for information on **parental education** programmes and on counselling for parents, and how knowledge about child development and the evolving abilities of the child are conveyed to parents and others responsible for children. The Guidelines also request information on any evaluation of the effectiveness of such educational measures.

The States have been invited to provide effective counselling and community based programmes for families to support **parental education** interventions, in particular for parents of disadvantaged children, and also with a view to prevent abandonment and institutionalisation as well as to help families to provide appropriate direction and guidance in the exercise by the child of the rights recognized in the CRC, in a manner consistent with his/her evolving abilities and by encouraging the perception of the child as a rights holder. The Committee has also focused on the importance of **improving the quality of professional support and counselling** for families by making available qualified staff and resources. However, the Committee has made clear that the protection referred to in Article 18 should not be interpreted in a narrow sense, but rather be understood as to include the State responsibility to assist **all parents** by “ensuring the development of institutions, facilities and services for the care of children.”

Parental Leave

There has recently been a general tendency for family policies to meet the specific requirements linked with the changing of familial structures, as well as with the presence of specific problems or situations, as for example adoption, which deserve special attention.

In particular, the States that ratified the Hague Convention have generally recognised the right to parental leave for adoptive families, thus providing them with the same instruments and opportunities in support of adoptive parents that are already available to biological parents.

This is the outcome of the European Council Directive No. 34/96. This directive equalises biological birth and adoption in order to apply parental leave, specifying that the concept of adoption must be understood as including all the institutions that foresee the integration of the child in the new family, that is also foster care, in addition to the various forms of adoption (national and international).

In this way, adoptive parents too have the possibility to benefit from parental leave, as well as of leave in case of illness of the child, and from the optional abstention from work, which is extremely important in the case of international adoption because the families are often required to remain in the Country of Origin of the child for a longer period of time in order to complete the period of living together with the child in line with the adoption procedure framework.

It is important to highlight that all types of parental leave – and particularly if enjoyed by adoptive parents – are measures recognised not in the interest of the adults, but represent forms of protection of the specific needs of the child.

It has to be pointed out that, with regard to the above mentioned EU Directive, the European Union has always respected parental role, also that of the father, while the North-American model only safeguards maternity in the strict sense of the word, allowing female employees to be absent from work for only 12 weeks and without payment.

1.1.2 Review of Scientific Literature

What does research tell us about normal development, recovery and risk in internationally adopted children?

Adopted children have been exposed to a number of adversities before their adoption. As a consequence, delays in their growth and psychological development are very frequent at arrival. Many did not have the opportunity to develop secure patterns of attachment and some had traumatic experiences. Adoption involves loss and grief, as the experience of separation is inherent in adoption.

All adopted children experience a significant amount of recovery after their adoption. This recovery seems to be more rapid and complete in the area of physical growth. As for psychological development, the amount of recovery seems to be related to the amount of deterioration, as well as to the age at arrival. The same is true, in particular, for attachment formation. Feelings of belonging and identity issues are other areas in which adoptees may encounter more difficulties, as well as with regard to some behavioural problems.

Although figures on international adoption are not clear, breakdown affects a small but relevant number of adoptive families. Adoption breakdown risk factors relate to characteristics pertaining to children, parents, parent-child relationships and professional intervention.

The rise in international adoption experienced in recent years has also been accompanied by an increasing interest in adoption on the part of researchers. Adoption offers a good opportunity to test certain hypotheses related to recovery after initial adversity, as well as to the emotional consequences of early experiences of neglect, abuse and separation. And even if many things still remain to be learnt and conclusions reached by different research studies are not always in agreement, it is true that researchers have been gathering important, and frequently coinciding, evidence.

Typically, research work deals with two types of data: children's conditions upon their arrival in their new Country and their development after a certain period of time, a period which ranges from a few months in some research studies to a few years in others. Researchers have usually documented both children's physical and psychological development.

Children's Conditions upon Arrival

Physical Growth

Even if percentages vary from one research study to another, research studies agree that many of the children arriving in their new Countries have significant growth and health problems. The combination of prenatal unfavourable conditions (such as maternal alcoholism, malnutrition, no pregnancy or childbirth care), inadequate postnatal care (such as neglect, bad nutrition, no immunization, poor stimulation) and exposure to adverse conditions (such as institutionalization, lead poisoning) give rise to delays and illnesses in many adoptees.

Although researchers do not always use the same criteria to determine growth delay severity, there seems to be a certain consensus on the magnitude of growth delay at arrival. On average, research results indicate that about one third of the children adopted internationally show severe physical delays at the time they arrive in the Receiving Country; one third shows moderate delays and another third shows no delays (see research studies conducted in Canada by Ames, 1997, and Pomerleau et al., 2005; in Great Britain by Beckett et al., 2003; in Spain by Palacios et al., 2005; in Sweden by Proos et al., 1997; in the United States by Johnson, 2000; Judge, 2003; Miller, 2000).

As for illnesses suffered upon arrival, infectious diseases represent the most frequent problem (hepatitis B, intestinal parasites, skin problems). Anaemia is also frequent, as well as sight problems (strabismus, for example) and vaccination irregularities. The incidence of these problems varies noticeably depending on the Country of Origin. In a recent research performed in Canada with children from China, East Asia and Russia, respiratory infections affected on average 55% of the children upon arrival, skin problems 50%, gastrointestinal problems 20% and anaemia 10% (Pomerleau, Malcuit, Chicoine, Seguin et al., 2005). Several studies have also shown that early birth and/or low birth weight are also frequent.

Psychological Development

Research has also documented that there are important psychological delays upon arriving from the Country of Origin. The precise percentage of children severely affected varies from one study to another, with the most pessimistic results being those related to children from Romania (up to 60% of these children showed very severe delays upon arrival with scores below 50 on a scale of a 100) (Rutter, 2005). In the Spanish research by Palacios et al., 2005, 40% of children had severe delays when they arrived, and these delays were similar in the different areas of psychological functioning explored, which indicates a generalised delay.

Attachment is an area of very special interest in adopted children. Given the circumstances experienced by many of them before adoption (such as neglect, abuse, institutional life), it is difficult, if not impossible, for them to develop the basis or building stones, for attachment (a trusting and secure model of relationships in which the experience of stress is coupled with a feeling of confidence in the availability and competence of the attachment figure or figures). This is the reason why at the time of arrival most adopted children show an insecure pattern of attachment (insecure or disorganized).

Some adoptive children had *traumatic experiences* before adoption (typically, severe neglect, active maltreatment, sexual abuse). These experiences have a lasting effect on children's psychological traits, on their capacity to adapt to normal circumstances of life, to trust others and to seek help in an efficient way. Feelings of helplessness are frequent in those affected by these very negative experiences. Frequently, these children are chronically overstressed, which affect their capacity for normal stress regulation.

Loss and grief are feelings affecting all adoptees, either at the time of separation or (if they are separated as very young babies) later on in life. Adoption, abandonment and separation are almost synonyms. Indeed, all adopted children have been separated from the people who were their caregivers up to the time of their adoption, whether they were their mothers, grandmothers, institution caregivers, mates or friends. The vast majority of these children were adopted after the age in which attachment takes place, and are therefore aware that these previous ties have been broken. In cases of profound early deprivation, there was no attachment. The separation experience has an effect on all of these cases, and is considered to be one of the distinctive traits of adoption.

Development After Adoption

Adoption represents a radical change in the life circumstances and in the stimulation of adoptees, and it is therefore not surprising that research has reported important improvements in these children after their arrival in their new families.

Physical Growth

All data available confirm that readjustment of physical parameters (weight, height, head circumference) to normality, and recovery from illnesses suffered when arriving in the new Countries both take place in the majority of adopted children. In fact, a few years after arrival, most of the children already fall into ranges considered to be normal, that is almost at or above the 50th percentile. In addition, children normally recover from the different illnesses they suffered from at the time of arrival in the Receiving Country. Of course, the amount of recovery is partly related to the amount of deterioration at arrival, so that those with more damage at arrival, especially if they were not adopted at a very young age, may not recover fully from their initial problems.

Psychological Development

The picture tends to be more complex for psychological than for physical development. Psychological adjustment takes place in all cases, but its magnitude depends on the condition at arrival. It is true that children who show more severe delays at arrival usually experience greater progress, but it is also true, however, that differences between those arriving with very significant delays and those arriving with no delays often continue to be apparent several years later. Not all children arriving with severe psychological delays will continue to have them after spending a few years in their new family environment, but those children who continue to be severely affected after many years usually arrived with more severe problems.

It is obvious that age at the time of adoption plays an important role in this context, with better perspectives for those adopted at a younger age.

Regarding *attachment*, all children show an improvement compared to the initial stage, although to a different degree. The level of previous damage is obviously related to later recovery. So, for children who experienced very damaging emotional circumstances (like disorganized attachment, no attachment and profound insecure attachment), building a strong and secure attachment will not be an easy task, and some of them will actually find it quite difficult to fully normalize their emotional lives. And, at a more general level, it seems that, as a consequence of their experiences of loss and separation, adopted children may show emotional needs that are not common in children who have not been affected by such experiences. Data from Hodges et al. (2005) show that scores for attachment security continue to increase as the years after adoption go by, but that there still is a level of insecurity which remains quite stable throughout. In all likelihood, this sense of insecurity results from the separation experience and loss which are so common among adoptees.

Adoptive children need to build a *feeling of belonging* to their new family, especially if they did not arrive in the new family as young infants. At a certain stage in their development, they will discover their connection with two different families, the one in which they were born and the one in which they are now growing up. Adopted children frequently develop a conflict of loyalties between these two families and this can cause inner conflicts in some developmental stages.

The development of the *feeling of identity* can also be more complex in adopted children and adolescents. Their self-image can be damaged by their early experiences. Fear of failure and new abandonment is not unusual. Differences in physical appearance and knowing that they were born in another family and, at times, in a different Country and a different culture, add to the difficulties to form a clear identity.

Finally, different *behavioural problems* are present in adoptees more frequently than in non-adopted children. Problems in the area of hyperactivity and inattention are fairly frequent. Quite often, these are linked to difficulties in school achievement. Developmental regression is not unusual, with children making at a later stage of development experiences normally made earlier in life.

Adopted Children's Types According to Their Level of Recovery

In order to acquire a comprehensive understanding of the psychological development of internationally adopted children after their arrival in their new Countries and families, it might be helpful to make use of the typology proposed by Groza and Demchuk (2006). The typology proposed by these authors offers at least two advantages. Firstly, it has been formulated using information from several research works on international adoption. Secondly, it offers a more intuitive perspective compared to the analyses made using purely statistical parameters.

According to Groza and Demchuk (2006), children who had been previously institutionalized can be classified into three groups according to their condition upon arrival and their later development: resilient children, children who recover and children with challenges. The first group, resilient children, refers to children who thrive despite early severe adversity, and do not present important impairments at arrival. According to Groza and Demchuk (2006), between one fifth and one third of internationally adopted children fall within this category.

The second group (called "wounded wonders" by Groza and Demchuk) demonstrate at arrival significant negative effects resulting from early adversity, and have initial challenges or difficulties in development, but over time they respond favourably to their family environment. Their percentage varies from one research to another, ranging from 33% in the least optimistic study, to 60-70% in the most optimistic ones.

Finally, the group called "children with challenges" refers to those who, despite making progress in many areas, continue to have significant difficulties after some years spent in their adoptive families. They represent 10% in some studies and up to 33% in others. A minority of these children (no more than 5%) show profound disabilities; the rest will need a great deal of care services and help.

Adoption Disruption

There are extremely difficult cases where adoption breaks down after some months or years following the child's arrival. These are cases of great suffering for all those involved, children and adoptive parents alike. Adoption disruption (or adoption dissolution, as it is also called) has been studied mainly in domestic special needs adoption. Rates of disruption range from 10% to 40% depending on the studies, with an average of around 15%. In domestic special needs adoption cases, risk factors for disruption include child characteristics (older age at adoption, more adversity prior to adoption, more troubled post-placement behaviour, sibling adoption), family characteristics (lack of prior adoption or foster care experience, higher educational level of the adoptive parents) and pre-adoption service characteristics (preparation for adoption absent or very limited, scant information provided to the family about the child, fragmented or disjointed services).

Very little is known about intercountry adoption disruptions. As for the rate, Hoksbergen (1991) found that in Holland around 2.8% of all intercountry adoptions ended in dissolution. For Spain, Berástegui (2003) reported a rate of 0.8% of disruptions. If there are 40,000 international adoptions per year, 2% corresponds to 800 families affected by adoption breakdown per year.

Risk factors in international adoption seem to be similar to risk factors in domestic adoptions: children's characteristics (older age at adoption, children's severe behavioural problems), parental characteristics (problems with motivation and agreement about the adoption project, other children in the family, rigid and inflexible rearing styles), parent-child relationships (initial difficulties in attachment between adopters and adoptee) and professional practice (poor home assessment, lack of adoption preparation, poor follow-up and post-adoption support) (Palacios et al. 2006).

1.1.3 Intervention Framework

One could say that post-adoption begins the very first day birthparents decide to give up their child, the day an adoption project is initiated, or the day when prospective adoptive parents apply to an adoption service. Support services should focus on these three groups which will be for ever connected (the adoption triangle, post-adoption services being the last of these players).

This support has to be conceived step by step in a complete bilateral and continuous process aimed at birthparents, children, prospective adoptive parents and adoptive families and implemented as early as possible.

With regard to the child, the process includes the following steps:

- Study of the child's personal and family situation in order to define a project for life; in case of need, and in respect of the subsidiarity principle, definition of an adoption project.
- Working towards the setting for the legal adoptability of the child, but also his/her affective or emotional adoptability. This requires time and professional support in order to help the child understand the administrative and judicial measures taken for him, cope with the loss of his/her biological family and other caregivers, and feel willing to accept the adoption project.
- Matching of the child with an appropriate adoptive family, likely to cope with the specific needs and peculiarities of each individual child.
- Preparation of the child for the meeting with the prospective parents chosen for him.

From the adoptive parents point of view, the process includes the following steps:

- Information and "awareness" of the prospective adoptive parents, with regard to the main issues of adoption.
- Study of the personal, family and social situation of the prospective adoptive parents from a multidisciplinary point of view in order to make an evaluation of their aptitudes and skills.
- Matching with a child whose profile seems to be compatible with their aptitudes and skills.
- Preparation for the meeting with that particular child.

The intervention of “third parties” along the entire process that leads to an adoption, both in the State of Origin and in the Receiving State, is extremely important for the future and the success of an adoption. The importance of professional interventions at crucial stages of the process tends to be underestimated, such as:

- Abusive practices (such as lies, pressures on biological families or on institutional care providers, trafficking) not only are not acceptable from an ethical point of view, but they also are causes for major risks for adoption failures. They fall under the co-responsibility of both Sending and Receiving States.
- The preparation of the child for his/her adoption is another point that is also frequently misunderstood, disregarded or omitted. The most common situation in international adoption is that the children who arrive are legally adoptable, but not emotionally or affectively adoptable.
- The matching stage, which also falls under joint responsibility of both Sending and Receiving States, is often handled on the basis of administrative rather than professional multidisciplinary criteria (search for parents who are most likely to cope with a particular child profile).
- Last but not least, the impact of the post-adoption stage is currently underestimated in the Receiving States, and is still often limited to insufficient specialised services and/or to a control procedure (instead of a supportive process).

1.2 Rationale and Goals

1.2.1 Justification of the Need for Post-adoption Services

Some particularities can be found in the child’s history, in the adoptive parent’s history and in the particular circumstances of their meeting and beginning of their common life that make post-adoption support necessary. Adoptive parents need professional help to understand their children’s needs and behaviour derived from the early adversity the children faced and their consequent delays and difficulties. This support also aims at helping them to respond to those needs in the most favourable way.

Another reason why post-adoption services are needed refers to the adoptive children’s specific needs resulting from their adoptive status, their feelings of loss, the formation of a dual identity and the search for their origins.

The History of the Child

Many adopted children have been subjected in their native Country to influences that will subsequently have a negative effect on their development after adoption. Both experience and research show that different factors may lead to development of problematic behaviour.

Some of these factors play a role prior to and during birth:

- Stress of the mother during pregnancy.
- Inadequate antenatal and perinatal care.
- Malnutrition and infectious diseases of the mother.

Some factors play a role after birth:

- Poor physical health due to malnutrition and diseases.
- Insufficient stimulation and neglect.
- Discontinuity in care: many different caregivers or hardly any caregivers and a frequent transfer to children homes or foster families.
- Physical abuse.
- Development of undesirable (usually anti-social) behaviour, that enabled the child to survive in the native Country but is unwanted in family life.
- Homesickness, especially with children who had to leave caregivers to whom they were attached.

Such a history has effects on the adoption process. The first year of life is thought to be very important: what the child learns about attachment in that year creates a sort of blueprint for the way it handles relationships later in life. For example: in the first few weeks, babies are fed approximately 8 times over a 24 hour period. Usually, there is a pattern to how a mother handles each feeding; baby cries, gets picked up and cuddled, is talked to, is breast or bottle fed, is encouraged to burp, gets a clean nappy if necessary, more cuddling, more talking and is put back to bed. This happens 56 times per week and provides a wealth of information about the parent-baby relationship. If the parents respond in a quick and warm way meeting the child's need and in a predictable manner, and the child feels safe, he/she will attach himself/herself to the parents (i.e. *safe attachment*). However, a child whose parents or caregivers are not predictable learns to attach himself/herself to, but at the same time distrust, adults (i.e. *ambivalent attachment*). Children who experience abandonment or abuse learn not to attach themselves to or trust adults (i.e. *avoidant attachment*). These patterns are difficult to change later on in life.

Most children who are adopted (and therefore were abandoned at least once) carry a blueprint inside them which tells them that adults cannot be trusted, and that they should be careful about developing a bond with adults. It is possible that such children even feel that they should not develop a bond with anyone at all. Most children, however, will be able to trust and bond again, provided they come across people who show them that they are worthy of their attempts. In other words, the void created in the child's pre-adoption life needs to be filled. To achieve this, the adoptive parents need to be predictable and provide a safe environment, preferably in a way that does not seem to be age appropriate, because due to the lack of his/her age appropriate behaviour, the child is making up for things that he/she may have missed out in his pre-adoption life. Actions speak louder than words; a child needs to hear that daddy will come home in an hour's time, but needs the experience even more. If parents show daily that they are predictable, a child may in the end conclude that these people can be trusted. He/she will probably start showing this trust to one parent at the time, because it is only logical to try out something scary by test and trial.

It is important to draw conclusions from these findings. Awareness of the nature and the intensity of negative influences and knowledge of the possible future consequences may enable the adoptive parents and, if necessary a professional counsellor, to respond in an adequate way.

An adoptive mother who is aware of the fact that her adopted daughter has been physically or mentally maltreated by her biological mother or father will understand that she is at first kept at a distance by this daughter. She will allow her daughter to set the pace in building up a relationship. Not knowing of the abuse, the adoptive mother is likely to experience disappointment and hurt feelings because her daughter refuses to be cuddled. Nowadays it is recognised that a complete collection and provision of information about the pre-adoptive life and experiences of the adopted child is essential to enable adoptive parents to interpret their child's behaviour. Prospective adoptive parents also need professional support to process this information according to their own personal experience and history as a couple.

The History of the Adoptive Parents

People rarely realise that the successful upbringing of one's own biological, not neglected children does not necessarily guarantee that they have the ability successfully to bring up a seriously neglected child. It has been noticed that the following pre-adoption factors in the family can create problems:

- Some traumatic and unprocessed life experiences such as grief over undesired childlessness or a deceased child.
- Conjugal problems, where the married couple expects the adopted child to save the marriage.
- Little mental flexibility.
- Unrealistic expectations for the child with regard to intelligence, temperament, care need or skills.
- Little empathy.
- Insufficient preparation.

The Particular Circumstances of the Meeting Between the Adopted Child and the New Parents

It is now well known that the first encounter between a mother and her newborn child in the procreation situation is a delicate event. The feeling of strangeness experienced in these circumstances is decupled in the adoption situation, for several reasons. The child is no longer a newborn, there were no affectionate early contacts between him/her and the mother, he/she is sometimes looking ethnically different. And this feeling of strangeness is mutual; both the child and his/her new parents experience it. This is even made worse when the circumstances of the first meeting do not allow sufficient comfort and privacy, which is very often the case with regard to international adoption. Prospective adoptive parents are sometimes exhausted after a long journey to the Country of Origin, the meeting is held in an environment lacking intimacy, amongst a lot of people, the child has not been sufficiently prepared, sometimes not at all, no professional emotional support is available, etc.

The process that leads to adoption is very often rather drawn-out and difficult for the prospective adoptive parents, and experience shows that the longer it takes and the harder it is to adopt a child, the higher will be the expectations towards the child of their dreams and the more limited will be the opportunities given to the real child to develop upon arrival in this family. And at a more general level, the adoption situation brings together children and adults usually left more fragile by particular experiences in life. The details and the impact of these walks of life are often underestimated. In addition, there are still a lot of prejudices in this area, for example the belief that “these children suffered from a lack of love, and that by just giving them a lot, it will be possible to offset this deficiency and solve every problem.”

The Beginning of Family Life after Adoption

Despite the extensive preparation of parents and children before adoption actually takes place, there is no foolproof process that may guarantee its success.

Family factors that can cause problematic child behaviour:

- The great transition: the new geographic, cultural surroundings and social expectations are great transitions for the adopted child.
- Contact deficiencies: most parents expect a child in – extreme – need of care and attention. In the initial stage of adoption, the children can feel scared or threatened by this and try to keep a distance from care and attention. After this initial stage, it very often happens that the child focuses his/her attention on one of the parents. This can create feelings of insecurity in both parents.
- Lack of adequate behaviour for the child's age: adopted children can be very independent and survival-oriented. When the child becomes accustomed to his/her new environment, he or she can relapse into behavioural patterns normally associated with younger children. This need to experience stages that they may have skipped in their pre-adoption life may be very confusing for parents.
- “Too much raising, too little enjoying”: the parents can focus too much on the raising – teaching the child conduct rules instead of enjoying the child's presence and building an emotionally safe and affectionate bond.
- Last but not least, a period of parental leave which is too short, whether because such brief period is set out by law or because the adoptive parents are not sufficiently aware of the necessity to spend a lot of time with their adoptive child and build a secure attachment bond with him or her before placing the child in any kind of group day care system (crèche, nursery or school).

All of these particularities may lead to difficulties that might arise right after arrival or possibly later. It happens, for example, that some problems will only show when the child attends school and has to face learning and social demands which are part of a school setting. Post-adoption services are needed to help parents understand their children's behaviour, to help them give their children the best possible stimulation, to monitor progress achieved and how relationships have evolved; in certain cases, post-adoption services are also needed to decide whether more intensive intervention or specialised help is considered necessary.

Particularities Linked to the Adoptive Status and Identity and the Search for Origins

Regardless of their development after adoption, however, all children here considered have one thing in common: their adoptive identity. Whatever their origin (institution, foster family) or their age upon arrival might be, all adoptees need to build their own adoptive identity, understand what it means to be adopted and the circumstances which caused their adoption to happen. Sooner or later, when they discover that their lives are connected to two different families, they will all need to face feelings of loss of different intensity levels. They will also discover that their life story was shaped between two worlds, two cultures, and will also have to solve the doubts and ambivalence this might cause them. It is frequently the case that adoptees have to cope with unpleasant remarks from their peers concerning their physical traits or their adoption history. On reaching adolescence, there will be an increase in doubts and deep reflections concerning their identity; many will want to learn more about their past and their origins; and there will be some who will want to reconnect with their Country and culture of origin or even with members of their birth families.

All of these needs encountered by adoptees in relation to their adoption status will require answers from their adoptive parents. Research data show that even when parents are absolutely convinced that their children should know the truth about their origins, it is usually difficult for them to address adoption related issues with their children. In addition, as they are aware of the important benefits that adoption has represented for their children, they are not always able to understand the feelings of loss their children are expressing. And sometimes, they interpret their sadness or curiosity about the past as a sign of dissatisfaction with their new situation or as a threat to their family stability. It very frequently happens that adoptive parents need help in order to understand their children's behaviour concerning adoption, as well as certain guidelines as to what would be the best way to address it. They need help, for example, to understand that, in most cases, searching for their origins has to do with their children's need to understand and complete their own identity and not with making up for unfulfilled emotional needs in their relationships with their adoptive parents.

In many cases, the need parents have for post-adoption services is met in the form of a professional monitoring the progress achieved by the child and in the parents-child relationship, as well as by providing counselling to help parents understand and better respond to what is happening. Naturally, when the problems children experience are more severe, complicated and enduring, then children and parents will inevitably require more specialised services and more intensive and lasting interventions. These interventions are essential to prevent adoption breakdown.

1.2.2 Areas to be Covered by Post-adoption Services

Areas in which adopted children may need special help vary from one child to another. Their difficulties may appear in any (and frequently in several) of the following areas: physical growth and health, emotional development, language acquisition, cognitive development, school learning, social integration, behavioural problems, identity issues and search for origins.

Parents' need for professional support and services mirror children's needs. There are a number of areas in which adoptive parents may benefit from professional adoption related services: feelings of belonging, attachment difficulties, behaviour management strategies, expectations and identity related issues.

There are a number of needs experienced by the adoptive family, besides those of its members. Some of these needs have to do with feeling the same as or different from other families, with how to organize sibling relationships when biological and adopted children coexist in the same family and how to handle the relationship with the extended family. The needs of the adoptive family are not static, but evolve with time, posing different challenges at different stages of the family life cycle.

Post-adoption services are required in several areas and by different kinds of people. Regarding these areas, and as mentioned before, the problems and delays that international adoptees experience include different aspects of child's health, growth, development, emotional world, education or social integration. Post-adoption services should therefore be wide ranging and adequate to address these multiple and

intertwined needs. Three groups can be clearly distinguished among the different kinds of people these services are intended to help: firstly, the adoptees themselves, who must always be the final recipients of all professional interventions; secondly, the adoptive parents who are, and will continue to be, the most permanent and immediate source of stimulation; and thirdly, the adoptive family as a whole, which includes previous children, where these exist, and the extended family. An analysis of the main areas to be covered by post-adoption services for each of these three target groups is reported below.

Children

As mentioned before, there is a large percentage of internationally adopted children who show different kinds of *illnesses and growth delays* at arrival. Most illnesses have a positive outcome in the first months after staying with their adoptive families and through the intervention of general paediatric services. Regarding growth delays, already in the first months spent with the adoptive families it is possible to observe a substantial recovery. Accelerated growth processes begin to work as soon as there are improvements in diet, hygiene and life habits, medical treatment of possible illnesses and in the psychological well-being of the adoptees. Total recovery may take longer, but it is already noticeable from the first year of life with the adoptive family.

Emotional needs represent one of the most vulnerable areas for adoptees. Firstly, because it is often the case that they had traumatic and emotionally disturbing experiences of abuse or neglect before their adoption. Secondly, because, as mentioned before, adoption always implies loss: losing their family of origin, other adults who had taken care of them before adoption, friends and peers, their Country, culture, sometimes their names, etc. Adverse initial experiences and a build up of losses frequently have a high emotional impact. If the development of secure attachment requires contact with caregivers who are stable, sensitive, capable of addressing children's needs and of diminishing their tensions, and with people who enjoy being with the child, and who openly and repeatedly display signs of affection, then it can easily be understood that children who are adoptable do not show secure attachment upon arrival. What they do display more frequently is insecure or disorganized attachment. One of the consequences derived from this is that we are dealing with children who experience difficulties in establishing bonding based on trust, sensitivity and mutual affection. Their range of reactions include coldness and mistrust in their relationships, excessive dependency or erratic behaviour and differences in the way they respond to the same situation. With a view to normalize the emotional development of the child, it is vital for adoptive parents to adopt an understanding, sensitive, loving and stimulating approach. They frequently need help in understanding child behaviour and in learning how to adjust to their reactions, since their children's behaviour is sometimes very different from that of children living in conventional family settings.

Language related needs are obvious when we are dealing with a child whose language of origin is very different from that which is spoken in their new Country and family. It is nevertheless the case that even children arriving in preverbal stages at times show communication disorders, since dialogue is learnt first in non-verbal communication. As for older children, even when the language of their Country of Origin is the same of that of their Country of arrival (as in the case, for example, of Spain in relation to Latin America), there are still significant differences not related to regional varieties, but to the fact that adoptees usually come from settings in which language is hardly stimulated. In fact, research on international adoption has shown that there are two language dimensions which evolve differently once the child joins his/her new family and new Country. On the one hand, there is the every day language, that is the language which makes communication in different life and relationship settings possible. In this dimension, the language of internationally adopted children usually ends up being normalized. But there is also the school language, which is strongly decontextualised and full of abstract terms. Even if there seems to be a high number of adoptees who do not present problems in this area, research data have shown that, on average, adopted children have more problems than their non-adopted peers in this respect.

A similar situation can be found with regard to *cognitive development*: in spite of arriving with different degrees of delay, there are many internationally adopted children who are able to reach average scores – and, in some cases, even above average scores – in intelligence. Average intelligence scores however can be lower for adoptees than for non-adoptees. As mentioned before, this seems to occur more within the

first years after adoption. Improvements continue to be made afterwards, but they are clearly of a less extraordinary nature. On the other hand, we must take into account that it is not only general intelligence which has been hindered, but also basic intellectual processes, such as that of selective attention. As is the case with preverbal communication, children learn to pay attention through, and because of, stable, positive and stimulating dyadic situations which adopted children usually lack, thus explaining the difficulties they encounter when they have to concentrate. Both these basic processes, as well as intelligence as a whole, will benefit from a stimulation which in some cases only specialised professionals can provide.

Bearing in mind all the previous remarks on language and intelligence, it is easy to understand the reason why adoptees are more likely to have *learning problems at school*. For children arriving at an older age, adapting to school is connected with the inevitable difficulties encountered by someone who does not know the language, lacks some of the basic attention skills, has to face knowledge contents which are very far from his/her experience, and who, at the same time, has to adapt to new social rules, new peers and friends, etc. As is the case with all the issues highlighted so far, age upon arrival also plays a significant role, since it is obviously easier to join primary school after having spent a few years with the adoptive family, rather than having to do so at the time when the level of abstract thinking, the knowledge allegedly acquired and the language used to refer to such knowledge are of a greater complexity. These children will usually be in need of additional assistance, which, in many cases, can be offered by their families, but in some others, can only be provided by qualified professionals. In any of these circumstances, the adoptive family will need help in understanding the child's situation, what problems he/she has to face in school, their extent, and what is the family's role if they want to participate directly in helping their child overcome these difficulties.

Social integration - As for all the aspects mentioned above, social integration will be easier the sooner it happens. The two elements which can most of all hinder this integration – especially after the age in which children begin nursery – are the physical traits that the adoptee might have and which may differ from those around him/her, and the fact that other people know that he/she is adopted. There is always the risk that some peer might use the child's physical differences or the fact that the child is adopted to make fun, provoke, make annoying or offensive remarks, etc. It will only be a few years later that the children will acquire the necessary skills to defend themselves from these attacks or inappropriate remarks, and until then they will require their parents' help not only to prevent these situations from happening, but also to minimize, as much as possible, their negative impact on the child.

Some of the problems that children may encounter in terms of social integration have to do with *behavioural problems* adoptees may sometimes have. If there is anything on which researchers unanimously agree with regard to adoption, it is the greater incidence of certain behavioural problems among adoptees as compared to non-adoptees. Among all the behavioural problems analysed, those related to hyperactivity-impulsivity and attention deficits are the ones that emerge again and again. As in all previous cases, this does not of course mean that all adopted children are hyperactive children, but hyperactivity incidence among adopted children is greater than among non-adopted children. And it is precisely because of this higher incidence that children's school performance is affected. This problem is also sometimes related to greater difficulties experienced in social integration, given that hyperactivity is sometimes associated with certain behaviours that bother other people and which results in social rejection.

At a more intimate level we can find *identity problems* which become more relevant for adoptees around the time when they recognise that they are different from other children (because of their physical appearance, but also because they have been adopted). In all adoption cases these conflicts are aggravated when the child discovers that he/she is connected to two different families (the one of origin and the adoptive one). In the case of international adoption, other cultural and identity conflicts are added to the equation, since the child is also aware that in his/her life two different cultures coexist: the one of his/her Country of Origin and that which belongs to his/her Country of Adoption. Adopted children not only must face all these developmental issues common to all children in order to build their own identities, but also deal with other aspects related to their adoptive status; and children adopted internationally also face

problems regarding ethnic and cultural differences. These conflicts show up during childhood (for example the awareness of being connected to two families usually appears around the age of 7 or 8), but acquire special relevance during adolescence when new cognitive capacities allow them to ask hypothetical questions reaching beyond the present (“what would have been of my life if...?”, “what would happen if one day...?”).

It is precisely during adolescence that some adopted children consider the possibility of *searching for their origins*, that is, their need to trace the beginning of their lives. This search has two different sides to it, one which is common to all adoptees, and another which is shared by some adoptees but not by others. As to the former, called “inner search” by researchers (Irhammar, 2000), it relates to those questions adoptees ask themselves regarding their beginnings, their families of origin, their pre-adoption experiences, the reasons why their current family decided to adopt them, etc. The latter, called by some as “outer search”, has to do with the desire some adoptees have to learn about their past, whether it be about situations and experiences (“Where am I from?”, “What happened to me?”, “Why didn’t they keep me?”) or about people (“Who is my mother?”, “Is she alive?”, “Has she tried to find me?”, “Do I have brothers or sisters?”); in some instances, their desire is not only to acquire information but also to get to meet people (mother, siblings, a significant teacher in a former institution). It frequently happens that adoptive parents ignore what is going on with regard to their child’s inner search, and feel frightened by his/her external search, which they sometimes interpret as having to do with their child not being happy with them, even if this is not really the case. It is however a dimension for which parents – and sometimes also their children – often need support and guidance, as happens in other instances commented upon before.

Parents

An analysis of the different needs children have in different areas is not complete without an analysis of the needs of the adoptive parents. Some of these mirror those of their children (if the child wants to know about and meet his/her biological parents, the adoptive parents need to be prepared to talk and help). Other needs have to do with how the adults involved experience the different intricacies of adoption.

The *feeling of belonging* must be mentioned as one of the first specific aspects of adoptive parenthood which might require support. In the case of biological parenthood, the feeling of belonging develops gradually and spontaneously during pregnancy and during the child’s first days of life. For the mother who breastfeeds the baby born from her womb just a few days earlier, there is no doubt that this is her child. In addition, everyone soon does his or her best to find similarities between the baby and other family members, which helps to build the feeling that the child does not only belong to the parents but to the rest of the family as well. In the case of adoption, when a child has very different physical traits, speaks a different language and joins the family a few years after birth, belonging can take more or less time, but will certainly not be as immediate or obvious as in the case of biological parenthood.

Attachment problems which adoptive parents might experience in relation to their adopted children are partly the consequence of the adoptees’ difficulty in building the safe attachment bonds already mentioned before. It is frequently the case that the child’s reactions (coldness, for example) shock those who are offering him/her the best they have, possibly unable to grasp that their child is letting them know that he/she does not rely on adults or that he/she is trying to control his/her emotions because expressing emotions in the past was followed by physical abuse. Adoptive parents build up their hopes in their relationship with their adoptive children, and they try very hard to please them, which makes the behaviour of certain children even more shocking to their parents who interpret it as a sign of ungratefulness, lack of emotions, etc. Parents frequently need professional guidance and support in order to understand their children’s emotional behaviour, as well as on how to respond in a more positive way with a view of establishing attachment bonds with their child.

A similar scenario exists with regard to *behaviour management strategies* which adoptive parents will have to put into practice in order to face those problems that will emerge in their children. As mentioned before, a child’s disruptive behaviour (such as aggression, impulsive behaviours) causes great uneasiness and frustration to the adult, which could even lead to rejection. These problems cannot be resolved in any

other way but by providing a combination of affection and control (and, possibly, by looking for professional help as well). Establishing limits is one of the key aspects of coping with problems, especially in the case of externalised problems. Parents might frequently need guidance on how to establish limits and how to make their child accept them and behave accordingly.

The *expectations* parents might have on different aspects of their children (their physical appearance, their development level according to age, their emotional behaviour, intelligence, school achievement, social integration) frequently cause them problems, especially when they are highly educated people, they have very high expectations about the child and his/her achievement. Children raised in very adverse initial conditions cannot always entirely meet these expectations, and this will lead their parents to either readjust their expectations, thus making them more realistic, or be frustrated because their dreams cannot be fulfilled.

Lastly, adoptive parents have a crucial role to play in many *adoptive identity related aspects*, since after all, they are the keepers of all the information available on the child, and it is they who must decide what information should be given at any time, how it should be given, when is the most appropriate moment to give it, how to react to the child's requests for more information or even for meeting specific people from their past. Adoptive parents are frequently doubtful as to what information to give, when and how to give it, always finding good reasons to postpone this task. Professional help assists parents in finding the best way to respond to their children's needs in this area as well.

Adoptive Family

There are some areas which not only influence adopted children or adoptive parents, but the family as a whole. This is especially the case when there are other children in the family and when relationships with the extended family are an important part of family life.

The question of whether an adoptive family is *the same as or different* from all other families is part of the array of questions adoptive families usually consider. Some tend to deny the differences arguing that their families are different from others only in the way in which the child joined them, but once he/she has joined the family then nothing in that home should be done differently from any other. Other families tend to highlight the differences, using adoption arguments repeatedly, especially when problems or difficulties arise. Neither of these types of families gives an adequate answer to an adopted child's needs. Most of the time, he/she will need his/her parents to act like any other parents do with their children, but may occasionally also need them to treat him/her as adoptive parents would. It is not unusual for parents to need guidance and support regarding this important dimension of an adoptive family's life.

When there are *previous children in an adoptive family*, the adoptee's arrival requires a readjustment similar, up to a point, to that which must take place when new members are born into a family where there already are other children. In the case of adding a new child to the family through adoption, the most frequent case is that in which previous children are biological and the newly arrived child has been adopted. Those inevitable conflicts that arise among siblings will thus be on two clear fronts: firstly between one sibling and another, secondly between a biological child and an adopted one. Letting previous children participate in making the decision of adopting, if their age allows it, and have their saying with regard to later guidance for their new sibling's arrival, could of course contribute to solving part of these problems. There is another part however which is possibly as inevitable as the fact that siblings argue and fight now and then. Relationships among siblings should be especially nurtured in adoptive families because if deep conflicts arise between them, and if family life is excessively disrupted, parents might choose to give preference to their relationship with their biological child with the obvious consequent risk for the adopted one.

On the other hand, relationships with the *extended family* are especially important when they keep frequent contact with the adoptive family. It is undoubtedly true that, as is the case for non-adoptive families, also in adoptive families grandparents and other relatives can be an important source of support in caring for and supervising the children. Although the extended family are mostly a source of support, there are also cases in which conflicts arise, particularly when grandparents have not participated in the adoption project of their children. In case of conflicts, adoptive parents might need guidance and support

as to how to set limits and control relationships. Most extended families, however, are far from being an obstacle for the adoptive family, on the contrary they are one of its main source of support.

Lastly, we must not forget the *adoptive family's life cycle* which implies that relationships within the family define and redefine themselves depending on the adoptee's and the adoptive family members' moment in their lives which is taken into consideration. So, the adoptee's arrival poses the need for an important reorganization of family life; middle childhood brings with it the emergence of feelings of loss and grief; years later, adolescence brings new challenges to the adoptive family which they had not faced before; the moment in which adoptees reach independence from their families and even more so the moment in which they become parents themselves, will give rise to situations which are common to all families and others which have to do specifically with adoption (it is for example when they are about to become parents that some adoptees consider the need of gaining access to all information about their past in order, for example, to ensure that there is no negative genetic background that could be transmitted to their future child). All of this means that the support an adoptive family requires after adoption is not static, but develops and changes with time, posing at each moment challenges which are different from previous ones and also different from those faced by non-adoptive families.

1.2.3 Main Goals and Principles of Intervention

Post-adoption services should be aimed at bringing support to the adoptive family, especially to the adoptive parents who are the children's resilience enhancers. Professionals intervening in the previous stages of support in the adoption process (preparation) must build a relationship with them based on trust, in order to make them feel at ease and look for help as soon as they experience some difficulties. Post-adoption services should be set up within the context of professional network coordination, trust and co-responsibility between Countries of Origin and Receiving Countries.

- Post-adoption services are part of the **prevention effort**. There should always be much more than a simple assessment and/or passive and administrative check-ups. Measure should aim at bringing real support to all people involved in the adoption process: the birth mother/parents, and the adoptive family, adoptees and adopters. Post-adoption support to birth mothers aims at promoting an empowerment process and, in the longer term, at preventing further relinquishment of other children. Support to the adoptive family is intended to prevent major difficulties in the building of an attachment bond, problems in the family and with regard to the social integration of the adoptee.
- It is necessary to provide post-adoption services for **adopted children** as their early life experiences are generally marked by physical and emotional deficiencies, disruptions, and suffering. The first area of support should focus on the child's health and development of physical, neurological, kinestetical and emotional aspects. Every child carries a "blueprint" in his/her body, a kind of "memory without remembrance", that will influence his/her future development and life. Post-adoption support should be focused on the setting of a network that allows as much as possible a process of **recovery with regard to** these different developmental areas.
- **Adoptive parents** are the **children's resilience enhancers**, and they need to be supported in this delicate task. Some of the aspects of the adoption procedure, for example the necessary evaluation of the prospective adoptive parents' aptitudes to adopt and the relevant certification issued by an official, sometimes judicial, body, may have some negative effects. Contrary to other "biological" parents, adoptive parents have to go through an examination process and are recognized to be "suitable" and "able" to adopt, which is often understood as being recognized as "good parents". In these circumstances, some of them are not inclined to resort to help in case they may have some difficulties after adoption has occurred. This is the reason why some of the post-adoption services need to be planned in a pro-active way, as, for example, going to the family home in the first weeks after the arrival of the adopted child. Professional support aims at developing a feeling of parental competence when the adoptee shows some initial resistance to the building of attachment.

- Post-adoption services will even be better and more useful for both adoptees and adopters if they are based on **joint professional work at every stage of the adoption process**, as mentioned above. From the prospective adoptive parents' point of view, one of the main goals to be pursued before adoption takes place is the building of a relationship based on trust between them and the professionals involved, in order to allow prospective adoptive parents to feel free to ask for help as early as possible in the post-adoption phase. Nevertheless, optimal professional intervention in the pre-adoption phase does not mean that good post-adoption support should not be ensured. The importance of post-adoption services becomes even more crucial and incontrovertible when some of the previous steps have only in part, or not at all, been ensured; this is unfortunately often the case in an international context, where the child has not been (adequately) prepared for his/her adoption. With regard to international adoption, in some Countries of Origin, due to lack of financial and/or human resources, it is fairly common that some of the requirements of the pre-adoption process concerning the children are dealt with in a rather superficial way, mainly following administrative criteria rather than medical and psycho-social ones.
- Post-adoption services should be implemented in a coherent way with the preparation of prospective adoptive parents and children, as a **second phase of the preparation**. Preparation is being made with both future adoptees and adopters taking into account a "blank" or imaginary partner (respectively parents or son/daughter). Post-adoption support should be the second phase of the process taking into account the real partner, after the shock of their physical and actual meeting. The gap between the imaginary child and the real one, which exists with any child at the moment of birth, is frequently more important in the adoption context. Adoptive parents should be supported and helped, as early as possible after the meeting with their prospective adoptive child, to express and process their slight or great disappointment (grieving process), in order to make them as willing as possible to help their child cope with his/her limitations and develop his/her skills.
- The choice of adoption as a child protection measure is based on the assumption that a family represents the ideal permanent and familial surroundings where child protection is ensured by the **adoptive parents**. They must then be considered by the professionals as **partners in the area of child protection**. Post-adoption services must therefore be considered as a way of empowering adoptive parents, and never as an opportunity to "judge" them or to replace them. Adoption is not a miracle: problems, difficulties, ups and downs are frequent just as in any other type of family. Post-adoption services are necessary to help go through and overcome these difficult moments, finding adequate solutions to help every one to rise to the challenge as much as possible.
- Since adoption is aimed at helping the child develop and 'blossom' and is a **joint responsibility of both the State of Origin and the Receiving State**, post-adoption services should be handled in a context of professional network coordination, trust and co-responsibility. This requires professional training of all third parties involved in the adoption process on both sides, so as to guarantee realistic expectations about the effects of adoption, an understanding of the particularities of adoption and any inevitable obstacles, joint efforts towards the implementation of appropriate mutual support programmes, transparency at all stages of the process, permanent communication and a reflective and problem-solving approach.

1.2.4 Other Factors Influencing the Implementation of Post-adoption Services

Some political, sociological, cultural and financial issues about adoption conception have to be taken into account to better understand how post-adoption services are or are not implemented in each Country, and how they are organized. The world context of international adoption, the role of the mass media, some wide-spread irrational prejudices about adoption influence national policies on adoption and the dialogue between adoptive families and professionals and among professionals themselves. The issue of post-adoption reports required by States of Origin is a very sensitive one.

It is necessary to go back to the basis of the conception of the adoption process: while for childcare professionals adoption is one of various child protection measures available, i.e. a possible way to find

parents for a child deprived of parental care, general public opinion, on the other hand, considers adoption as a way for adults to get a child and make him/her their son/daughter. This dual position is usually translated in a short expression based on playing on words: on the one hand it would be the right of the child and, on the other, a so called and claimed “right to” a child.

This normally leads to misunderstandings, and sometimes to real antagonism, reflected in the media, and in the actions of policy-makers. When and where adoption is mainly conceived as a way to provide children to prospective adoptive parents, there is a tendency to consider the interventions of third parties in connection with the adoption process, mainly from a judicial and administrative standpoint. In this context, these interventions end when the process has been “successfully” completed, that is when the parents receive the desired child, and the implementation of post-adoption services is not viewed as a priority or even a necessity. When and where adoption has been considered as part of a wider child protection programme, management of the adoption process tends to occur following a multidisciplinary approach, and the importance of post-adoption services is recognized.

Mass media generally reflect and influence public opinion regarding this issue. They tend to reflect common prejudices and portray irrelevant aspects of adoption, most of the time exaggerating its positive side and emphasising a fairy-tale model. At times, however, they also present the downside of adoption in the same paradoxical way. Sometimes negative press appears in some Receiving States after some severe incidents, failures or disruptions have occurred in the field of adoption, especially international adoption, (bad treatment of an adopted child in the adoptive family, rejection of adopted children by the adoptive families and re-placement in institutions in the Receiving State, death of adoptees due to bad treatment or suicide...). These campaigns in the mass media are based upon deep emotional and irrational feelings, fantasies and fears around the question “what is happening with *our* children?”.

The whole phenomenon has to be seen and analysed in the context of the sociological and economic divide existing between North and South, East and West, and between the huge adoption demand from Receiving Countries and the international adoption needs or possibilities in the Countries of Origin. The necessity of post-adoption services and the submission of post-adoption reports to the Countries of Origin must be precisely seen in this context. There is a passionate tension between prospective adoptive parents and third parties and this irrational tension even surrounds the debate on adoption and, more specifically, on post-adoption, in official assemblies, like the EU or even in some Commissions of The Hague Conference itself.

The Central Authorities of Receiving States must sometimes face the reluctance of some adoptive parents to fulfil the requirements of the States of Origin in terms of post-adoption reports. This reluctance can be interpreted in different ways, but it is mainly based on the following reason: they tend to consider themselves as parents like any others and perceive the follow-up imposed on adoptive families as a control of their parental “performances” rather than support, and thus a sign of mistrust and discrimination. In many Receiving States, post-adoption reports are still established on the basis of private agreements signed by the adoptive parents with the authorities of the State of Origin. And the matter of supplying post-adoption reports on individual children *after adoption has been finalised* is not regulated by the 1993 Hague Convention. Some authorities of Receiving States argue on that basis that they have no legal base to oblige reluctant adoptive parents to meet their follow-up obligations, especially when these reports are required over long periods of time (in some States of Origin, outside Europe, reports are required up to the age of majority of the adoptee).

It appears to be extremely important to orientate post-adoption services towards building a partnership between adoptive families and professionals based on trust and real support measures. At the same time, however, ongoing training of the professionals involved in this process is absolutely necessary, including knowledge of recent developments in international paediatrics, neurological developments and attachment to ensure that the support provided to the adoptive families is really efficient.

2. Practical Issues

2.1 Types and Levels of Post-adoption Services

2.1.1 Follow-up Reports

In the context of co-responsibility shared by both the Receiving Country and the Country of Origin concerning the protection of internationally adopted children, the latter needs to receive from the former feed-back on the development and integration of the children. Post-adoption reports have different goals for different parties involved, that is for central authorities, policy makers, scientific researchers as well as adoptive families. To reach these goals, some recommendations are made on the methodology to be used to achieve them as well as on their contents.

As to the question of what are the terms for providing feedback if necessary in the State of Origin, it should be pointed out that the laws of many Sending Countries impose the obligation on the foreign adoptive family to provide reports on the adopted child's living conditions in the family (once a year during the first 2 years after adoption). If the child is adopted in compliance with the 1993 Hague Convention, the report is provided by the State Central Authority or another officially approved institution. If the child is adopted by a Country which is not a party to the Convention, it is the responsibility of the foreign adoptive family to submit the report, although it must be prepared by the competent authority of the Receiving State.

The national laws of Sending and Receiving Countries do not generally set out any specific forms for feedback reports. Notwithstanding this, some Countries of Origin prepare forms (sheets) for post-placement reports (e.g. Czech Republic, Lithuania). They reflect the child's living conditions, emotional and social development, state of health, etc.

In many cases, post-adoption reports have not been prepared by the competent authorities but by the adoptive parents themselves. Furthermore, even the reports drawn up by the competent authorities do not always reflect the realities surrounding the child.

In conclusion, feedback on internationally adopted children is important and necessary for the following reasons:

- The State of Origin has a right to know about the adopted child's adaptation in his/her new environment, his/her physical and emotional development and living conditions. This information may serve as evidence that the child has been entrusted to a safe and suitable environment and that the child is well integrated. The need for feedback shows that every child is important and that adequate care has been taken of him.
- It helps to build positive public opinion about international adoption.
- It helps to ensure a transparent process with regard to international adoption.
- Feedback mentioning specific successful cases of international adoption and made available to the public promotes national adoption in States of Origin as families gain more confidence and courage and view adoption with a higher degree of openness and freedom.
- The mandatory submission of feedback obliges the adoptive family to accept the child's origin and ensure his/her connection with the homeland. This is especially important when the adoptee is a baby, because adoptive parents have a tendency to "forget" about adoption.
- It allows to verify the preparation of adoptive families and, in the case of negative tendencies, the State of Origin may question the continuity of international adoption in a specific Receiving State.
- It makes it possible to ascertain which problems foreign adoptive parents and children may encounter, which solutions both parents and social services have been looking for and implementing, on the basis that it is possible to provide them with some form of help after adoption.
- Feedback highlights which problems adopted children encounter in the new Country and new environment, considering that it is possible better to prepare other children for international adoption.

- Information gathered from the feedback could be used in scientific research for example with regard to the child's attachment to his/her parents, etc. It could facilitate the organisation of the adoption process with the view to minimise, as much as possible, the child's negative experiences when he/she is integrating into the new environment. Adoptive parents and children could be better prepared for adoption, so as to possibly reduce the number of unsuccessful adoptions.
- Follow-up reports are helpful not only for central or competent authorities but also for the adoptive families themselves. They underline the role of third parties in the relationship between adoptive parents and adopted child, they are there to remind that adoptive parents are bound by laws and rules and that they are doing their best for their child. This can be of major importance when the adoptee reaches adolescence, the time when he/she usually questions these issues.

It should be noted that some Countries of Origin (e.g. Czech Republic, India, the Philippines, Thailand etc.) entrust the children to prospective adoptive parents for pre-adoption care, and adoption is then finalized in the Receiving State. The child must be in pre-adoption care for at least 6 months before the Country of Origin's Central Authority gives its final adoption approval. During this period, the Receiving State is requested to send some reports on the child's social and family integration progress, on the basis of which the Country of Origin can finalise adoption.

Procedure for Post-adoption Visits and Reports

Basic principle: the preparation of post-adoption reports offers professionals the opportunity to

- Meet the adoptive family.
- Obtain information on how things are proceeding with regard to the main aspects of the child's health, on reactions and behaviour, on how parents and child are adapting to their new lives together and getting attached to one another, on how each individual is living through these extraordinary moments of his/her life.
- Give the parent's concrete and efficient counselling on how to cope with small or greater challenges that usually emerge in these circumstances.
- Refer adoptive parents to more specialised help if necessary.

The numerous questions asked are only aimed at understanding the situation and supporting the parents and the child in their integration and attachment process.

A summary of this wider scenario regarding a particular adoption case is shown below as an example of the information that should be sent to the Country of Origin pointing out, for each of the sections mentioned below, the level of interaction achieved by the child and the parents and its evolution in time. Whenever difficulties have been highlighted, the report should indicate any possible solutions considered and implemented by the parents.

General Information

- Date of visit to the family home
- Date of arrival of the child in the family
- Age of the child – date of birth
- Country and region of origin
- Body in charge of supervising the adoption
- Parents' availability to take care of the child: type of leave, working hours, etc. of father and mother
- Who looks after the child every day after his/her arrival?
- Is the child cared for by people other than the parents? By whom (grandparents, enlarged family, baby-sitter, nursery, school, etc.) and since when?
- What are the health conditions of the parents at present: tiredness, illnesses, level of stress, etc.?
- What kind of external support do they get in quantitative and qualitative terms (enlarged family, acquaintances, etc.)?
- People present during the visit (father, mother, others) and their attitude towards the visitor.

Reconstruction of the Child's Life before Adoption

What do the parents know about?

- The child's family of origin (parents, siblings)
- The circumstances of his/her birth
- The circumstances of his/her abandonment
- The number and the type of settings where the child lived, the length of his/her stay in such settings and the quality of care he/she received
- His/her health and development

Reconstruction of the Evolution since Adoption

First Contact

Circumstances :

- Where did the meeting take place:
 - In the Receiving Country or in the Country of Origin?
 - Orphanage, hotel, office, airport, etc.?
- How many people were present? Who were they?
- Description of the external circumstances, especially in the case of a meeting in a foreign Country of Origin (time, temperature, tiredness of parents, etc.)
- How did the child behave?
Distinguish reaction towards:
 - the adoptive father
 - the adoptive mother
 - the nanny (or the person known to the child)
 - the other children (if there were any)
- What was the emotional reaction:
 - of the adoptive father?
 - of the adoptive mother?
- How did everyone interpret the child's behaviour and reactions?
- How did each of the parents behave on the day of the meeting?

Life in the New Home

- How were the first days of life together; child's behaviour and physical and emotional reactions, sleep, eating, cleanliness, etc.?
- Was the child silent, cheerful, anxious, sullen, etc.?
- What were the parents' behaviours and emotional reactions?
- How do they interpret their child's reactions?
- How did the grandparents and the enlarged family react?

Adaptation

Medical check-up

- Where did it take place? What were its results?
- Which prescriptions / treatments / advice were given following this visit?
- How did the parents react to these tests and to their results (reassured, worried, anxious, disappointed, etc.)?

Sleep

- Does the child have difficulties in falling asleep?
- Does he/she wake up during the night?

- Is it because of nightmares or of night terrors?
- Do the parents feel that the child wakes up rested in the morning?
- How do the parents (father / mother) deal with the child's difficulties related to sleep?

Eating

- Who feeds the child?
- What does he/she eat and what is his/her attitude towards food?
- How do the parents (father / mother) react? Do they have to encourage, restrain... the child?
- How does each parent interpret the child's behaviour in this regard?

Communication and language

- How does the child relate to others?
- How does the child make himself/herself understood? In a non verbal / verbal way?
- Does he/she speak in his/her language of origin? Does he/she try to speak the language of his/her adoptive parents?
- Visual/physical contacts between child and parents: how do they go? Does the child enjoy it? Do the parents enjoy it?
- Does the child look at the parents (father / mother)? How long (stealthily or calmly)?
- Does the child accept the physical contact, does he/she like to be taken in someone's arms?
- How does each of the parents react?

Behaviour

- Does the child show any signs of anxiety, anger, sadness, shame, self-destruction?
- Does he/she monopolize his/her parents' attention? If so, how?
- How does he/she behave with the father? With the mother?
- Does he/she make any difference between his/her parents and the other adults?
- How does he/she behave with his/her brothers and sisters? With the other children?
- What is his/her attitude towards the visitor?
- What is the level of stress of each parent?

Cleanliness

- How much has the child learnt about cleanliness?
- How did the situation evolve after the adoption?
- How do the parents react?

Attachment

- Does the child make any difference between his/her parents and the other adults?
- Does each of the parents feel that the child is attached to him/her?
- Has each of the parents already "felt" to be the parent of this child?
- Does each of the parents feel to have the necessary parental skills with the child?
- Do the two parents form a team, do they help each other?

Finally, we would like to consider the specific situation encountered in some European Countries (e.g. Luxembourg) which results from migratory movements of people. Considering the high number of foreigners living in these Countries and the high number of foreigners leaving after a few years, the accredited bodies are not always able to send the required post-adoption reports to the States of Origin. In

these cases, when the accredited body is informed about the departure of a family who has adopted a child, the accredited body informs the Receiving Country's Central Authority that in turn informs the Central Authority of the Country where the family has moved to in order to guarantee that the correct procedure is followed concerning post-adoption reports.

2.1.2 Post-adoption Support

Adoptee, birth parents and adoptive parents are connected for life. They form the so called Adoption Triangle. Post-adoption services should focus on these three groups. Professional support must be provided for birthparents, as well as adopted children and adoptive parents as early on in the process of relinquishment and adoption as possible. The need for post-adoption services starts on the day birthparents decide to give up their child(ren), the day the decision is made that a child is adoptable, the day prospective adoptive parents apply for adoption.

Guidance for Birthparents Before, During and After Abandonment of Their Child

Birthparents need professional psychological support before, during and after adoption in order to help them in their grieving process and make it possible for them to recover their vision of the future.

Who are they, how do birthparents take the decision to give up their child(ren) for adoption and what happens to them afterwards? The birthparents' circumstances and reasons may vary. In the majority of cases, the situation of birthparents is complicated. Economic, social, cultural and political motives can be at the centre of their decision to give up a child for adoption. Sometimes a child welfare organisation forces parents to give up their child(ren) because of abuse or neglect (e.g. alcohol or drug addiction of the parents).

Professional support must be offered to women or couples considering giving up their child in a moment of crisis, according to principles introduced by the Convention on the Rights of the Child and the Hague Convention on Protection of Children and Co-operation in Respect of Intercountry Adoption. This support should avoid that any pressure be put on the birthparents, on the contrary, it should contribute to finding together with them possible alternative solutions, in conformity with the subsidiarity principle. When this procedure is properly followed, experience shows that a large proportion of birthparents actually decide to bring up their own child.

Generally speaking, the decision to abandon a child is a very difficult and emotional process. Research and practice have shown that birthparents experience feelings of grief, shame, sadness and guilt after they have given up their child for adoption, from which sometimes they never recover. They can never forget the moment when they gave up their child(ren). Most birthparents have a history of losses; loss of parents, family, partner etc. Abandoning their child means a new loss. It is important that during this process they can grieve and receive guidance and support by family or professionals, thus offering them a chance of a life without such overwhelming feelings of guilt. When the decision to relinquish their child is taken secretly, there is no opportunity to offer support to birthparents. They hide their feelings of grief and sadness, and this can prevent them from enjoying a better life in the future. Where it is not possible to provide counselling, birthmothers are likely to become pregnant again in a very near future as an attempt to recover from the previous loss.

Guidance For the Adopted Child Before Adoption

Once all possible alternatives for caring for a child in his/her Country of birth have been thoroughly considered, the adoption procedure may start.

For the child and his/her adoptive parents it is important that they obtain comprehensive information about the child's personal and family situation, his/her life history and emotional and physical development.

Independently of the age of the child, young as he might be, time and professional support are required to help the child cope with the loss of his/her biological family and other caregivers, to accept the adoption project and to be informed about the administrative and judicial measures taken in this respect.

For the child's feeling of security it is important to reduce the number of his or her transfers from one place to another. It is equally important to provide necessary professional support by a psychologist, social worker or trusted caregiver to prepare the child for (intercountry) adoption, to inform him/her about the effects of adoption and getting parents to respect the opinion and wishes of the child and his/her consent (when the child is old enough, e.g. 10 years or older).

The child can be prepared by showing him/her pictures of his/her new adoptive parents, pictures of the new Country, of home situations and other future family members. One can make a book with or for the child about his/her history with pictures of his/her life at that moment (children's home, other children, caregivers e.g.). Older children can also be prepared by exchanging e-mails or phone calls with the prospective parents and brothers and sisters.

A good farewell for the child at the time of departure is very important. He/she must be able to say good-bye to his/her friends at the children's home, caregivers or foster parents and foster family members. It helps the child, when he realises what is happening, to release the old and to accept the new situation. Children can go through feelings of happiness and feelings of sadness, grief, anger or anxiety. They have to be prepared for the possibility of experiencing these different feelings.

Guidance of Prospective Adoptive Parents Before the Adoption

Adoptive parents need to receive information about the consequences of adopting a child, both from a judicial and medical, emotional and educational point of view. They have to know what it means to adopt a neglected, abused or deprived or understimulated child and to know the feelings of a child who is abandoned. They have to know how attachment will grow and how to react to feelings of grief, how to react to and inform the child about his/her life story before he was adopted, how to guide the child in his/her possible search for his/her roots and birthparents.

Many Countries have developed a preparation course to give prospective adoptive parents all the information they need about these topics. The goal of the programme is to enable future adoptive parents to make a well-informed decision whether they want to adopt a child or not, and to prepare them for adoptive parenthood. The priority is to give applicants information about what children (may) have been through before they arrive in their adoptive family and the effects this may have on their development and sense of self. But attention is also given to their own life story, their relationships and history of attachment and possible losses and grief, e.g. because of unwanted childlessness.

Prospective parents should be well informed about these issues and helped to process them. Not to frighten them, but to make them think about their own ability and help a child overcome his/her fundamental distrust in adults.

After this preparation course, prospective adoptive parents often have to wait a long time before they can actually adopt a child. Meanwhile, it would be advisable to continue their preparation on becoming adoptive parents. For example, they can go to meetings with other (pre) adoptive parents to discuss adoption related issues. They can also take a course in Shantala massage, a type of massage especially developed for adopted children. Shantala massage, in its original form, is a body massage for babies. This massage finds its origin in India. F. Leboyer, a French doctor, introduced it in the West. In the Netherlands a special Shantala massage programme is available for adopted children (of any age). There are courses for adoptive parents as well as for prospective adoptive parents. They learn how they can make contact with their child in a sensitive and considerate way which stimulates the attachment process and rehabilitation of the child (research by Samuels and Scgolz (1992); Harper (1980)).

When parents have accepted the proposal of a child, the adoption agency arranges a meeting for them and other parents to inform them about the journey, the children, their background, the cultural aspects of the Country of Origin, etc.

Guidance for Prospective Adoptive Parents During the First Meeting with the Child

In the majority of cases, adoptive parents meet their child in the Country of Origin. Guidance on this first meeting with the child is important. Experience has shown that this meeting can be traumatic for the child as well as for the parents thus affecting the attachment process in a negative way. Whoever might be the person that entrusts the child to the adoptive parents, children's home director, foster parents or sometimes the birthparents in an open adoption, it is (also) very important that this person really gives this child to the new (adoptive) parents, that he (she) tells the child that these people will be his/her new parents. (etc.) Otherwise adoptive parents may feel guilty and very insecure and this may hinder the process of becoming the parents of this child. They need permission from the person in charge of the child to become his or her parents, and the child needs the permission from this person to get attached to the adoptive parents.

Circumstances may vary in different Countries of Origin. The first meeting with the child may take place in an orphanage, at the foster family's home or in the hotel where the adoptive parents are staying.

For the first meeting between the child and the prospective adoptive parents, it is necessary to create the most suitable and the safest situation, and, if possible, a situation familiar to the child (the children's home with trusted caregivers, foster home with foster family).

In some Countries several meetings between adoptive parents and the child take place in the children's home. When after some days or weeks the adoptive parents are trusted by the child, the child can go with the adoptive parents to an apartment or hotel.

In other Countries, the first meeting is held at a hotel. The child is handed over directly to the adoptive parents. Sometimes the first meeting takes place at an airport of the Country of the adoptive parents. Sometimes this may create a lot of stress for the child and the parents.

In all circumstances, adoptive parents need, if possible, guidance from a professional and have the opportunity to receive all information available about the history and care of the child. Information about food, sleeping patterns and special care needs, the temperament of the child, what he/she likes, what he/she is used to, etc.

It is not only the technical side of the first meeting that requires attention (accommodation, distance between the accommodation of the adoptive parents and the child), but also the emotional side. It is important to respect the child's emotional needs and to promote a sensitive way to interact during the first meetings between child and parents.

The reaction of the child depends on his/her age, his/her life-experiences and the preparation for adoption; what it means to get (new) parents and to live in another Country. For a child it is difficult to really understand what it means to be adopted.

Adoptive parents should be aware of how the child can react during the first meeting.

Where a child had a safe bond with its biological parents, with foster parents or caregivers, the child will miss them. The child can be happy to get parents, but he/she may, at the same time, also feel sad, angry or home sick. During the first meeting, the child can deny these feelings. He may seem to be happy, but parents have to know that the child may be possibly denying feelings of grief and sadness. The child can show these feelings only when he feels safer, sometimes weeks, months or years after the adoption.

Occasionally the child rejects one of the parents, e.g. the child only wants contact with and be carried by the adoptive father and rejects the adoptive mother. Sometimes this is because he distrusts women as they have abandoned him, but it is also a natural process that a child starts to attach himself to one person at a time. It requires understanding, patience and time for the rejected parent to make contact with the child. It can be very difficult for the rejected parent to understand this behaviour and not to doubt his/her own attractiveness and ability as a parent.

Guidance for the Adoptive Family During the First Years After the Arrival of the Adopted Child

The adoptive parents meeting their adopted children and taking care of them for a while only represents the beginning of a long process. Hopefully they had the opportunity to attend a good preparation course as a starting point, but translating all 'theory' (e.g. about possible developmental delays, or how to encourage a safe attachment) into daily life is not an easy task for most of them.

Adoptive parenthood is not as natural or self-evident as biological parenthood. Moreover, the adoptive child already has a certain, often unknown, history which he does not immediately share with his/her adoptive parents. This history influences the attachment process between parents and child and the child's development. Therefore, it is very important that adoptive parents can call on professional guidance, both immediately after the arrival of their child, and later on during phases when other questions may arise.

First Weeks

Phone Consultation or Home Visits Where Required

On the one hand adoptive parents and their child need rest and time to get to know each other, on the other hand they have to know where they can get support and advice if necessary. It takes time for parents to become sensitive to the needs of a child, their child. How does he/she sleep, how does he/she eat, how will he/she play? Why does he/she cry, why doesn't he/she listen, why is he or she angry? How to make contact with the child, how to give the child the feeling that he/she is welcome in his/her new home, with his/her new parents.

In the first few weeks, parents may need telephonic support from a social worker or a worker from the adoption agency. When parents have questions or problems, when they do not understand the behaviour of their child, they must have the possibility to contact someone by phone or mail or to have personal contact to receive adoption-specific advice. A visit from a worker of the adoption agency or a social worker, specialised in adoption, may provide support to the parents.

Pediatric Check-up

For the benefit of the child's health, a medical exam is required to exclude serious illnesses and to offer the child the best medical care available. There are doctors specialised in tropical diseases, with experience of adoptive children. In several Countries, especially in France, there are medical checklists for adoptive children, derived from American practice.

Infant welfare centres and family doctors have to be sensitive to adoption specific issues and aware of the specific needs of an adopted child and his/her parents. Sometimes adoptive children have needs different from those of other children of their age, because of their history of neglect and abuse. Professionals have to pay attention to the process of attachment, which differs from the normal phases of attachment of a biological child. They have to know where they can get advice about adoption specific issues or when to refer parents to counsellors specialised in adoption.

First (Three) Years

Psychological or Educational Advice and Guidance by Professionals Specialised in Adoption

Sometimes adoptive parents need support to handle and understand the behaviour of their adopted child or in becoming (adoptive) parents. It should be possible for them to get guidance from a professional specialised in adoption or to attend a course for adoptive parents.

Post-adoption services are provided in different ways and at different times. In many Countries, there are self-help groups for adoptive parents, telephone consultation services, brochures (for parents, teachers and care workers), parental courses for adoptive parents held by professionals within one year of the arrival of their child, courses for adoptive children of primary school age and for adolescents and self-help groups for adopted children.

Advice or guidance should be aimed at the following adoption specific issues, such as: attachment (of both children and parents), loss and grief, stress regulation, developmental delays, possible traumas, communication about adoption, feelings of belonging, identity, sibling relationships, mixed family, reactions from the environment and school-related matters. These topics will be discussed one by one in the following sections.

Attachment

Adoptive parents are usually, especially following a good preparation course, strongly aware of the importance of working on safe attachment between themselves and their child. The question is how this can be done.

Before the adopted child arrives in the family, he or she already has a mental picture (a representation or 'picture of being-with') of what a caregiver or parent may mean to him (Daniël N. Stern, 'The motherhood constellation'). This inner representation influences his or her observation of his or her new parents and determines his or her reactions. For the parents this can be very confusing, e.g.. the parents want to comfort their child because he or she has hurt himself/herself or is afraid, but the child rejects them, because he or she has learned that adults cannot be trusted and that the only person who can provide comfort is himself/herself.

Likewise, adoptive parents have their own inner representation of how a child of a certain age should react, stemming from former experiences with children.

If this expected reaction does not coincide with the reaction of their adopted child, parents can become confused and (more) insecure. They can quickly develop a feeling of inefficiency or incompetence that might affect their self-esteem.

Safe attachment is built up in different phases, which can be called the 'building stones of attachment'(cf. Building stones of attachment, by C.G.M. Bakker-van Zeil, based on the theory of development by Erickson).

The first stone is called 'Feeling accepted and secure'. This is the 'feeling' phase, when the child is 0-3 months old. What is important in this stage is the fact that the child can feel safe, that it is good to be there, that he/she has a place for himself, etc. The parents' task in this stage is to 'mother', to comfort the child, to protect it, to regulate his/her emotions and be responsive to the child's signals and needs and to be 'in charge'.

The second stone is called 'Entrusting'. In this phase, when the child is 3-9 months old, he/she starts to surrender himself/herself to its caregiver, he/she opens up and accepts care, and makes eye-contact. The parents offer pleasant physical contact, take care of the child, satisfy his/her needs, are reliable and name everything the child does, wants, or feels.

The third stone is called 'Self-confidence'. The child (9 months-2 years) discovers the world, can share his/her experiences with his/her parents, is actively looking for attention and understands that separation is a non-permanent state. The parents support and stimulate their child's exploration, they show compassion and understanding, they are actively listening and providing words for everything that involves their child.

The fourth stone is called 'Being independent'. The child (age 2-5 years) discovers his/her own identity and abilities, is aware of being an individual and his/her imagination begins to develop. The parents are assertive, give space and draw boundaries without rejection.

The fifth stone is called 'Being creative'. The child is able to feel his/her own needs and to look for his/her own solutions; he/she is able to take other people in consideration and asks for help and can role-play. The parents can let their child go with confidence.

Most adopted children neither had a safe home nor received enough attention in their first years of life. Therefore their 'building stones' are not well developed, and for adoptive parents it is very important to find out what their child has missed out on and how he can catch up.

With most of these children, parents have to start with the first or second building stone of attachment. These children feel insecure, they lack basic trust and are not able to entrust themselves to others. Often these children went straight through to the third stone and show a 'would-be-confidence'. Adoptive parents need to see through this and they have to treat their child as if he/she were much younger.

Adoptive parents should be guided by a professional who has knowledge of attachment processes and of how the child's history affects this process.

Upon arrival, most adopted children show insecure attachment (ambivalent, avoidant or disorganised), but they may grow to safe attachment with their new parents. To obtain this safe bond it is necessary that adoptive parents are sufficiently sensitive and responsive. Of course, the same applies to biological parents. However, for adoptive parents it will be more challenging because the behaviour of their child is more difficult to understand as a result of his/her history. How sensitivity and responsiveness can be improved will be discussed later on in this paper.

Another aspect of the attachment process, which may be difficult to understand for adoptive parents, is the fact that in most cases a child will start to attach to one person at a time. First there is a dyad between the child and one of the parents (usually the mother). When this bond is strong and safe enough, the child can start to attach himself/herself to the other parent (triad). So an adopted child (although he/she is not a baby anymore), may at first reject one of the adoptive parents. Sometimes he or she rejects the mother because he or she has had bad experiences with women and therefore distrusts them. This can be very painful for the adoptive parent(s) and make them feel insecure about their parenthood. Because they are not the natural parents, they can doubt their position and their 'right' and ability to be the parents of this child. It is important that they can talk about their feelings and receive an explanation about this process and advice in coping with this behaviour.

Building a safe bond between parents and child is a mutual process. Adoptive parents have their own history with its possibilities and limitations. Their attachment representations and the way they are attached to their parents, play an important role in working on a safe bond with their children. Moreover, most adoptive parents live under stress during the adoption process and certainly in the first period after they have received their child, and stress makes people revert to their first attachment building stones. It is worthwhile for parents to examine and talk about their own attachment process, guided by a professional. In such sessions it is important to address the expectations of the parents about themselves, their adoptive parenthood and their child.

Talking with the parents about the adoption process and their first encounter with their adoptive child is also important. In many cases this process does not run smoothly (sometimes it is even traumatic) and it may prevent the positive development of a mutual bond.

Loss and grief

All adopted children have been abandoned at least once, and on average 3 or 4 times before their arrival in the adoptive family. Depending on the intensity of their previous attachment they will mourn the loss of familiar caregivers. For adoptive parents this grieving process is not always easy to recognise, for example, after a certain period when the child starts to feel safer, he/she may have sudden and inexplicable temper tantrums. Adopted children may remain extra sensitive and vulnerable to loss. The fear of loss of their new parents may increase as the child becomes more attached. This can lead to clinging, sleeping disorders, etc.

For children who were attached to a parent (-al figure) in their Country of birth, unresolved grief about the loss of this relationship may interfere with the attachment process to his/her new parents. On the other hand, adoptive parents have their own history of losses and grief (e.g. about unwanted childlessness or a deceased child). The way they went through their grieving process partly determines how they can cope with the grief of their child and whether they are able to guide him/her in this process.

Stress Regulation

Many adopted children missed a parent in their younger years who relieved them from their stress (e.g. about hunger, pain, dirty nappy, loneliness, etc.). Because of this situation, they underdeveloped skills to cope with stress in an adequate manner. This is also confirmed by neurobiological research. As a result of this deficiency they may react in an extreme way for example to what in the eyes of an adult may be just small changes. For example, when the parent boils an egg for breakfast although it is not Sunday, or the potatoes are put in 'the wrong place' on the child's plate, the child can start crying and screaming, and it is difficult for parents to console him/her. The utmost form of stress is powerlessness which an adopted child has often experienced during the time he/she was abandoned by his/her parents, when he lived in a

children's home and during the adoption process. Because they have been so powerless, they try to reduce this stress by being in control all the time. So it can be difficult for them to obey and follow the adoptive parents and they can also be very sensitive to (little) corrections, because they cannot distinguish between a rejection of what they do and who they are. They can see a correction as a rejection of themselves (which they know all too well).

When parents efficiently guide their child in stress regulation, he/she may recover and new synapses can grow in his/her brain.

Development Delays

The development of adopted children often shows delays (in emotional, cognitive and physical areas), caused by the fact that they have been understimulated in their younger years. This makes it difficult to distinguish at an early stage whether the developmental delay is caused only by negligence or whether the child also suffers from a mental or psychological disorder, e.g. PDD-NOS (autism). It is very important that parents start working towards the establishment of basic trust and a safe attachment for the child, so that he/she may catch up on the delay. Should development in a certain area cease permanently, parents should seek specialised care.

It is very often the case that adopted children have gaps in different developmental areas, e.g. physical, social, emotional, cognitive, etc. This can generate confusion among parents, school teachers and other non-specialised professionals. A lot of suspected cognitive problems are based on emotional delays in building a secure attachment bond.

Traumas

It is possible that adopted children have been traumatised in their first years because of maltreatment, negligence and/or sexual abuse. Often these children show disorganised attachment. It is therefore vital that these children are offered a secure environment and a new and safer home before examining what kind of detraumatization work, if any, can be carried out.

Sometimes the trauma may hinder the formation of a bond with the new parents, and a quicker intervention (therapy) is required. But daily care in the adoptive family is in itself a form of therapy in which the child will have new and healing experiences. For example, a sexually abused child can learn that it is no longer necessary to satisfy his/her parents sexually, but that the parents can care for him/her and caress the child in a normal, non-erotic way which may de-eroticise physical contact. Most of the time, this is not an easy job for parents. It is therefore important that parents can share their own feelings caused by the behaviour of their child and get professional guidance on how to respond to it.

Communication about Adoption

These days, adoptive parents will soon have questions about what, when and how they will tell their child about his/her adoptive status. It is helpful if parents are able to tell this story in a relaxed way and in a matter suited to the age and developmental stage of their child. To act according to the child's developmental stage can be difficult, and sometimes parents push things too far and emphasise the adoptive status of their child too much. The main priority is enabling the child to become attached to and feel rooted in the new family. Too many or too extensive talks about the child's roots can complicate the attachment process. On the other hand, it is also unwise to wait until the time the child himself/herself starts asking about his/her roots. So the parents should strike the golden mean and let the child know that they are aware of his/her origin, and that the child has other biological parents and family, and that he/she is always welcome to ask questions about it. Many adopted children have a burdened background (abuse, incest, etc.), and it is important that the parents can talk with a professional about their own feelings with regard to these issues and can discuss how and when this roots-information can be passed on to their child.

Feelings of Belonging

For an adopted child it is vital to feel safe at home in his/her new family and surroundings and to develop a feeling of belonging to the new family (in other words, that it becomes attached). Adoptees are part of two family lines, that of their biological parents and that of their adopted parents. An adopted child must therefore deal with two kinds of loyalties. The primary loyalty towards his/her birthparents, and the acquired primary loyalty towards his/her adoptive parents.

Children can live with this dual loyalty, but only when they feel they do not have to choose one family over the other. In situations when they have to choose one line, e.g. the child feels obliged to choose between birthparents and adoptive parents, an inner loyalty conflict may arise (Ivan Boszormenyi-Nagy).

The adoptive parents should acknowledge both bonds and try to respect them both in daily life.

The Adopted Child's Identity

For an adopted child it can be more difficult to form an identity, because he/she does not descend biologically from the people with whom he/she grows up. Questions like: 'who do I look like?', 'to whom do I (want to) belong?' and also 'why was I given up?' play an important role. For the development of a positive sense of self, it is necessary that the child has undergone the first developmental stages in a positive manner, and that other people are interested in and enjoy the child and are available now and were available in the past. But for most adopted children, this was not the case in their early childhood. Feeling welcome or feeling rejected deeply influences the child's sense of self and self-esteem. Because many adopted children were not properly looked after at the beginning of their lives, they may feel very insecure and suffer from fear of failure and a negative self-image. This requires extra attention from the adoptive parents so that they can support the child to develop a positive self-image.

For adoptive parents too, the formation of their own identity as adoptive parents sometimes requires more support.

Sibling Relationships

When a baby brother or sister is born, it can be difficult for any child to share the parents' attention and move a place up. For an adopted child, however, the arrival of a new child in the family can be even more problematic because it has an earlier experience of being 'put aside'. It can bring back memories of previous hurts and feelings of abandonment which in turn cause a regression in the behaviour and development of the child, who could also be overwhelmed with jealousy.

In this stressful situation, the child reverts to its first attachment building stone ('being allowed to be', which often is not a very stable stone) and can raise questions to what his/her place in the family is now. This state can be revealed by nightmares, temper tantrums, bed-wetting, or an overall developmental regression. This requires a great deal of extra energy and empathy on the part of the parents.

Another issue is the adoption of siblings (two or more children at the same time). This situation in itself can be problematic and extra guidance is welcomed.

Becoming the adoptive parents of two, three or four children at once requires much adaptability from the parents. Much of their time and energy will be taken up by daily care and the day-to-day worries, so there will be less time available for building up an emotional relationship (attachment) with each of the children. The children can also form a sort of an alliance against their new parents. The eldest sibling may have played the role of caregiver and may not be willing to give it up. This requires a lot of tact and empathy from the parents trying to deal with the situation in the right way without taking over this role immediately.

Mixed Families

Adoptive parents who already have biological children, must realise that the successful upbringing of one's own biological, not neglected, children does not necessarily guarantee that they will be able to raise a seriously neglected child. The upbringing of an adopted child often demands extra resources from the parents. These parents have to be extremely flexible and sensitive towards the needs of this child. They cannot treat him/her in the same way they treated their own children. They must be able to adjust their

inner expectations on the upbringing of children and about themselves as parents. They can also experience differences between their feelings (of attachment) towards their biological and their adopted children. They may feel ashamed about this. It is necessary that they can talk about it, and that these feelings are accepted. The adopted child can have problems with the fact that his/her brothers or sisters have a biological bond with their parents and with each other, that they can compare themselves to them in a way which he cannot. It is important for both children and parents that all these feelings are allowed to be expressed and discussed.

Reactions from the Environment (Extended Family and Neighbours)

Even for the environment (neighbourhood and extended family) adoptive parenthood is not self-evident. Adopted children can bring about all kinds of reactions, even from strangers, like compassion, feelings of care, curiosity, rejection, etc. Adoptive parents can receive all kinds of advice, usually unsolicited, about how to handle their child. Adoptive parents are usually not happy with the continuous attention they receive from onlookers which may make them feel like they have to prove themselves as parents all the time. When people become parents, they need support, especially from family and friends. But for adoptive parents, this support is not always available. Relatives, e.g. grandparents, may need time to get used to the foreign, 'strange' child. Moreover, because they lack knowledge of adoption, their ideas of how to raise a child will possibly not correspond to the way the adoptive parents treat their child. This can lead to more stress around adoptive parenthood instead of relieving it.

Adoptive parents may fear that their child is discriminated against because of his/her different looks. At first, discrimination is often positive discrimination, but when the child gets older, this may turn into negative discrimination.

School-related Matters

When the child is adopted at an older age (4 years and older) soon the question arises when he/she should start school. Opinions are divided on this matter. Once again, it is important that the child first of all feels at home in his or her new family. This requires a lot of time and energy. And the question remains whether he or she can be accepted by his/her peers and within the school system (besides the language problems) and learn the various subjects at the same time.

But in some cases, it can be a relief both for parents and child if they are not too close together day and night, e.g. when daily care is very demanding for parents, both parents and child can have a break from each other during school time. In these circumstances, it may be better for children and parents if the children went to school sooner even if they have not completely settled down at home. This applies especially if the child already went to school before adoption. In this instance, it would be better if the child was settled in gradually into the school.

It is also possible that problems may occur at school for which parents and/or teachers may need extra support: the child may have concentration problems, difficulty in obeying, in making contact with peers, difficulty with changes, language and learning.

Experiences

Belgium (French Community)

SPECIALIZED CONSULTATION IN INTERNATIONAL PEDIATRICS

This consultation is offered in the paediatric hospital of reference in Brussels. Two paediatricians trained in international paediatrics and a social worker offer different services to adoptive families in a multidisciplinary perspective (including specialized examinations in neurology, cardiology, dermatology, ophthalmology, and psycho-social guidance) oriented towards the building of the attachment bond between parents and child:

- Counselling to the prospective adoptive parents on the basis of the medical files of the children proposed in adoption
- Preparation of the prospective adoptive parents before they fly to the Country of Origin to meet their child (if necessary counselling by phone during the stay in the Country of Origin)
- Global paediatric check-up of the child soon after his arrival in the adoptive family and possible periodical follow-up
- Referring to other medical doctors or other professionals or therapists in order to solve specific problems or, in a wider scope, to contribute to the support of the adoptive bond.

POST-ADOPTION CENTRE: L'ENVOI

A private post-adoption consultation centre (l'Envol) is aimed to adoptive parents, adoptees at any age (infants, adolescents or adults), and to professionals. A multidisciplinary team constituted by a medical doctor, a lawyer, a psychologist and a speech therapist offers counselling, parents coaching and therapeutic support for families, individuals or through support groups.

RESOURCE NETWORK OF DIFFERENT PROFESSIONALS AND THERAPISTS

A resource network of professionals and therapists active in different approaches based on body mediation, play therapy, etc. has been recently settled up, whose aim is to offer a support to the sensory-motor and psycho-motor development of the child, the construction of his body and psychic envelope and to the building of the attachment bond within the adoptive family. The professionals who are part of this network have received a short training in the specific aspects of the adopted child, adoptive parents and the specific challenges of the building of the link between them. They are in periodical contact with the accredited adoption bodies responsible for the follow-up of the adoptive families, which can refer families to them whenever an extra support or guidance might be helpful in a scope of prevention.

Experiences

Finland

THE FINNISH ADOPTION COUNSELLING WORK

The Finnish adoption counselling work started as a project in the spring of 1998. It was implemented in co-operation with the three Finnish adoption agencies: the Social Welfare Department of the city of Helsinki, Interpedia and Save the Children Finland. It is financed by the Finnish Slot Machine Association.

The basic idea of the counselling work is to combine both professional knowledge received in education and experimental knowledge based on the personal experiences of the counsellors as adoptive parents. The work has also a strong and living connection to the everyday life of adoptive families.

The purpose of the work is:

- To support and help prospective adopters, families and adoptees in problematic situations.
- To survey the need of various target groups of specialist services and to develop working methods suitable for Finnish circumstances.
- To inform various groups of professionals on the special issues and needs associated with adoptive children and families.

The target groups are:

- Parents considering adoption
- Parents already involved in the adoption process
- Parents who have adopted children from abroad
- Children, adolescents and young adults who have been adopted from abroad
- Professionals who come into contact with adoptive families in the course of their work (e.g. nurses, nursery teachers, school teachers)

What are the reasons for contacting adoption counsellors?

- First time together as a family; e.g. the attachment process and its relevant difficulties, parents' own feelings and problems in growing together as an adoptive family, the feelings of the parent when the child accepts only one parent.
- Strength and endurance in one's role as a parent, unrealistic expectations of oneself as a parent, when and how to set the limits on the child's behaviour.
- School-related problems, e.g. lack of concentration, linguistic difficulties, possible need for special education, difficulties in understanding mathematics, time and space, difficulties when starting to learn a new language (English).
- The child's thoughts about his/her biological background.
- Children who are too active, restless, oversensitive or aggressive.
- Children who have difficulties in social relationships.
- The adoptive child's need for therapy.
- The adoptive child's physical health.
- Bullying and racism.
- Problems connected to teenage years; identity, problematic behaviour.
- Professionals contact us mostly when they have difficulties in their work with adopted children and youth.
- We are mostly contacted by adoptive mothers.

What are the needs counsellors have come across?

Parents want to:

- Obtain more information on the normal development of children, and that of adoptive children in particular, and on what can be regarded as normal when dealing with adoptive children.
- Receive confirmation of their own thoughts and their own intuitions.
- Be supported and comforted in their role as parents.
- Know where the family can get more help, for example therapy, when needed
- Make various groups of professionals understand the problems of adoptive families, and in this respect, parents want to find material that they can give to the relevant professionals.
- Discuss some problems that they are not so willing to take up with their adoption agency.

Children want to:

- Have someone who listens to them – maybe dealing with issues that they cannot or do not want to discuss with their adoptive parents.

Various groups of professionals want to:

- Obtain more information and education on the special problems associated with adoptive children, and advice on where to look for more information themselves, for instance books that they could read.

How has the work developed?

- The number of contacts has grown every year (see graphic).
 - The issues handled with the clients have become more complex and multi-faceted.
 - More requests are received from people who are in the process of adopting.
 - There have been two adoption related educational seminars organized within the framework of the project and many more organized together with other Finnish adoption professionals.
 - A report on the situation of international adoptions, post-adoptive work and the need to develop it in Finland was published in 2004.
 - An education course targeted at social workers offering pre-adoption counselling and screening was organized in 2005-2006. It was the first of its kind in the Nordic Countries.
 - There has been a growing interest among Finnish adoption organisations to work together: we believe that part of this co-operation has its starting point in our work. It has begun to bring organisations together.
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Experiences

France

ADOPTION CENTRE

The “maisons de l’adoption” are structures formed by associations of adoptive parents and by accredited adoption bodies and professionals that support, listen to and accompany the adopters before the realization of their project as well as the adoptive families.

Therefore, in the Nord department, the “maison de l’adoption” is conceived as a centre where the adoptive parents, the adopted children and professionals can meet to exchange views and have access to documents. The objectives are:

- To help adoptive families identify and formulate their questions and difficulties,
- To help isolated families and people and to listen to their needs,
- To create a network of professionals expert in adoption,
- To be a centre for debate on parenthood and adoption.

This centre relies on a team of professionals and parents.

At the moment, 4 departments have created such a structure and 2 departments have planned it.

L’ARBRE VERT

This reception centre was opened in 2001 in Paris region. It is a further development of the “green houses” concept by Françoise Dolto and yet its specificity has to do with the kind of parental approach followed. Its mission is that of providing a psychological and/or psycho-social support to adoptive families (adoptive parents and adopted children).

Services available:

- A special room where parents and children can meet;
- One-to-one meetings with one of the three doctors or the socio-educational expert in line with parents’ needs and requests;
- As of the year 2004, support groups for adoptive parents.

Meetings take place within the premises. This in order to encourage families to visit the centre on a regular basis as well as give them a better chance to investigating further into any possible issue and/or doubt that may arise as a consequence of the work therein done.

There are 5 people who have a specific background on adoption, abandonment and attachment-related issues in the reception area. Their skills allow for a quality support to be provided to both the adoptive families and their children within a neutral setting such as this centre. This is a remarkable prevention tool as to adoption and attachment-related problems for both families and their children.

Experiences

Italy

THE "SCRIGNO" PROJECT

Within the tasks of supervision and support which current regulations on intercountry adoption assign to social services, the adoption team of the Municipality of Trento decided to experiment with an individual programme for adopted children, carried out under the supervision of social workers and psychologists. Services usually tend to focus mainly on support to the new, adoptive parents and to dedicate less time to the child, who, once in the Receiving Countries, experiences a phase of disorientation. The child is traumatised and looks for new points of reference, as he/she has lost the previous ones and he/she has not yet adapted to the new situation. Each individual programme is supervised by a psychologist and, as a prerequisite, the parents must express their full support for the initiative. But only the synergy between the social worker in charge and the adoptive parents can lead to concrete results in the best interest of the child.

The individual programme developed for the adopted child is not based on psychotherapy, given the specific professional competence of the social worker. During the activities carried out with the child, the role of the social worker is not to interpret, but rather to observe and act on the basis of concrete elements shared with the child: the worker has to create an affectively neutral context (not as complex and involving as the relationship with the parents) in which the child can freely play, draw and express any emotion or talk about any particularly event which is significant for him/her.

The programme has several purposes:

- First of all, to create a neutral environment for the child – free from any family, emotional involvement and suitable for tracing the past, by leaving the children free to express their memories and by helping them to work through the experiences of loss, bereavement and separation they lived through.
- To establish a connection, in order for children not to remove their past at this time of separation and transition, thus not separating their past history from the present. Indeed, such a separation could affect the emotional and cognitive development of the adopted children, who must therefore be helped to build a sense of continuity of their experiences, thoughts and identity.
- To provide support in the process of creation of a family, by helping the parents to identify the best ways to relate to their adopted child.

The experience has shown that children fully understand the meaning and usefulness of the project and that they use this opportunity and the relationship with the social worker in a constructive way.

Through this programme, the children have been able to retrieve some fragments of their past, to make them an integral part of their identities and to create a link between their past, present and future lives.

The programme also gives some useful indications to the adoptive parents concerning the creation of a bond with their child and the formation of a family.

Experiences

Luxembourg

A resource centre in adoption has been recently settled up in Luxembourg. Two psychologists and a social worker specialized in pediatrics offer preparation sessions for prospective adoptive parents and support throughout the adoption process, support groups for adoptive parents and adoptees, individual and family consultation in case of difficulties in post-adoption. Other missions of the centre are aimed towards professional training thanks to a documentation centre and organization of meetings and seminars.

Experiences

Spain

ADOPTANTIS, CENTER PROVIDING SUPPORT FOR ADOPTING FAMILIES

Adoptantis has been chosen by the Madrid Institute for Minors and the Family as the Centre to provide support for Adopting Families.

The adopting family may require professional guidance at any time:

- in the beginning, to overcome uncertainties that arise as a result of their lack of experience, of difficulties in creating an affective bond with a child they still do not know, of problems the child might have had at home or in the orphanage;
- with regard to the best way of passing on information regarding what it means to be adopted, for both the adopted child and also the other people who are involved in the child and family's life;
- when facing family crises, such as divorce, death, the birth of siblings or new adoptions;
- when dealing with situations of conflict resulting from problems of the children, the parents, or both that require guidance in order not to render the emotional bond problematical.
- when there are doubts, questions or conflicts regarding an adopted child's search for its origins

Types of the service

1) Training

- *Discussion group* headed by professionals specialised in the area of adoptions. This service is provided free of charge for families once they have registered.
- *Workshops*, six fortnightly sessions in which the participants are encouraged to think about the specific issues involved in adopting a child.

Services free for families after they have registered.

2) Counseling and advice

Counseling and advice for adoptive families or adopted people who require help in relation to needs, conflicts or difficulties regarding adoption or relationships, or with regard to the origins of the adopted person.

Services free for families and adopted people, for a maximum of five sessions, after making an appointment.

3) Therapeutic care

- Therapeutic support groups for adoptive mothers and fathers
- Therapeutic support groups for adopted children
- Individual therapeutic care
- Family therapeutic care

Services provided for families and adopted children, 50% of the fee will be paid for by the Madrid Institute for Minors and the Family and 50% by the family requiring the service.

Experiences

The Netherlands: how to stimulate secure attachment - the Video Interaction Guidance

Staff members of the Foundation Adoption Services (Stitching Adoptievoorzieningen) in the Netherlands developed a short-term individual support programme, called Video Interaction Guidance (VIG), to make parents feel better equipped for adoptive parenthood. This programme stimulates positive communication thus encouraging safe attachment between parents and adoptive child(ren). Foundation Adoption Services is subsidised by the Ministry of Justice, has its own Board, and is independent from any adoption agency. Its main task is to take care of the (obligatory) preparation course for aspiring adoptive parents.

The basis of VIG lies in scientific research. Over the last few years research and field experience have shown that adoption aftercare with video guidance is key to the successful integration of an adopted child into the adoptive family. It will also encourage its adaptation to the new social environment in the Adopting Country.

Drs. Femmie Juffer, a Dutch adoption professor, has achieved important results in the field of attachment behaviour research. It has proven that stimulating communication between parents and adopted children will increase the parents' sensitivity and responsiveness and this will increase safe attachment. Video Interaction Guidance is a very effective method to accomplish this. (Juffer, Femmie, c.s., 'The importance of parenting in the development of disorganized attachment: evidence from a preventive intervention study in adoptive families', *Journal of Child Psychology and Psychiatry* 46:3 (2005), pp. 263-274).

The VIG counsellor observes the attachment between the adopted child and his/her new parents. Here he/she focuses on their communication and whether the parents recognise the behaviour and the signs the child is displaying. He/she also analyses what stage of development the child is in, what the parents can do to connect with and respond to the child's needs as well as help the child progress in his/her developmental tasks. In addition, VIG can be used diagnostically. If necessary, the counsellor refers the parents to another form of care.

The strength of VIG is that the video recording works as a magnifying glass; one can see all the signals given by the child. Neglected children tend to give weaker and unclear signals, which become much more visible on tape.

The VIG counsellor does not only look for what is missing, but also emphasises the strengths and the healthy aspects of the parents-child relationship. He/she uses the footage to help adoptive parents to be alert to the signals the child is giving and to respond to them in a positive way. To do so, he/she looks for the positive verbal and non-verbal moments of communication between the child and its parents. The VIG counsellor starts by observing and analysing *basic communication (verbal and non-verbal) within the family*, the chain of interactions and reactions, over and over again. He/she teaches and encourages parents to use this Basic Communication approach.

With VIG, adoption counsellors pay attention to the following verbal and non-verbal aspects of basic communication.

Regarding the child:

- How does the child initiate contact?
- Non-verbal communication: the facial expression of the child and its body-language, turning towards someone, eye-contact, smiling, movement of arms and body and the emotions of the child. Can you see when the child is happy, sad, angry or in pain? Is the child relaxed or stressed? Does the child enjoy cuddling, touching or caressing or sitting on its parents' lap? How does he/she sit? Is he/she relaxed, with his/her body against the body of the parents or with a stretched back? Does the child feel relaxed to the parents?
- Verbal communication: babbling and chatting of a baby, talking and laughing.

Regarding the parents:

- How do the parents respond to the child's initiatives and how do they make contact? Do they receive and confirm the initiatives of the child?

- Non-verbal: friendly nodding at the child, smiling, mirroring the child's expression, turning towards their child when they are making contact, open posture, eye-contact.
- Verbal: do they give feedback to the child by naming what the child does, wants or feels, and what it is looking at or by repeating the words the child is saying? Do they expressively use their voice with a friendly intonation?
- Do the parents take turns: do they pay attention to each child and divide their attention between their children?
- Do the parents make a circle with all present family members: how do they help the children to be interested in each other? When they give attention to one child, they can also involve the others on what is happening with this one child, so every child has the feeling of being part of the family and to be seen (verbal and non-verbal) by the parents.
- Do they guide their child by adequately responding to its initiatives; taking the lead when necessary?

The positive effect of basic communication and naming is that the child is given the feeling, and possibly the new experience, that it is seen by somebody who is really interested in it. Verbalising creates self-awareness in the child, the feeling to be allowed to be there. It tells the child that it is okay to be there and hence attachment can grow. So naming has a positive effect upon the confidence of the child in its caregivers and in itself.

With regards to the "*building stones of attachment*" mentioned before: when parents use basic communication in daily life, they are working on the first, second and third "building stones of attachment". The use of basic communication helps the parents to be sensitive to the signals of their child and to react in a responsive way.

A Good Balance Between Education and Emotional Bonding

Before parents can start educating their child there must be an emotional bond between them. Adoptive parents who are insecure and who have not yet established a bond with the child are usually focused on education and sometimes forget to work on emotional bonding. So with VIG it can be found a balance between attention for emotional bonding and education.

A child is able to listen/obey and can be educated only if he has the experience that he is heard and when there is a safe bond, e.g. attachment and love between parents and child. This is why parents have to give attention most of all to the first 'building stones' in the first period of adoption. Parents can help the child feel safe and secure by giving attention to its needs corresponding to building stone 1, 2 and 3. When the bond, trust and self-confidence grow, parents can start to educate and give more rules (building stone 4).

The Practical Procedure of VIG

The adoption counsellors are child psychologists specialised in adoption care and trained in Video Interaction Guidance to analyse the video pictures, and to help the adoptive parents turn the observations into effective parenting. The counsellor visits the family and makes a video recording of about 20 minutes at a time when all family members are present. This can be while playing a game, at meal times or, simply, while drinking tea together.

Then the counsellor makes an extensive analysis of the video recording, especially of the verbal and non-verbal communication patterns of the family members. In the following session the counsellor discusses the footage with the parents in order to help them discover what kind of behaviour the child shows and how parents and child react to one another. The counsellor shows the parents how they can stimulate attachment and how they can notice if attachment grows.

In total, the counsellor makes four recordings per child (so when parents have adopted, for example, 3 children at the same time, they can get 12 recordings in total), each followed by a discussion with the adoptive parents. The counsellor spreads these recordings over approx. one year.

When parents and/or schoolteachers have questions about the behaviour of the child at school, counsellors can also make a video recording at school, which they discuss later on with both parents and teachers together.

Adoptive parents can apply for the preventive VIG programme within the first three years (the attachment-period) after the arrival of their child. The guidance is not obligatory, though many families ask for this kind of support, as it is well known that an optimal start facilitates a sense of well-being for child and parents.

As the Ministry of Justice subsidises the preventive VIG project, the parents only have to pay a small fee.

Developmental Movement Method of Veronica Sherborne

Over the last 3 years, in the Netherlands VIG has been combined with the developmental movement method of Veronica Sherborne with the goal to give more emphasis to non-verbal communication between parents and child, because all senses are used in the process of getting attached to someone. When a baby is born, all senses are receptive and active concerning the experience of 'being-with' and the attachment process. A neglected or maltreated (adopted) child will register feelings of fear and stress in its body. And when a child experiences a lot of stress in its body, this may hinder the attachment process. With the developmental movement games parents will give the child new positive body-experiences and the child will make up for missed early-childhood sensory experiences.

With this method, adoption counsellors stimulate the physical contact between the child and the parents. These developmental movement games also make the child aware of its body, its body in relation to its environment and in relation to others. Through these new experiences the child's trust and confidence in its parents will grow as well as the feeling of self-confidence.

The Netherlands combines this developmental movement method with video interaction guidance. When professionals discuss the footage of these developmental movement games of the parents with their child, sensitivity and responsiveness will increase by giving feedback to the parents about how the child and the parents made contact together and how the child experiences these games and what the child needs to enable him to attach himself in a safe way. The Netherlands developed this method for three years and the professionals involved are enthusiastic about the results.

The "developmental movement method of Sherborne" is based on the theories and work of Veronica Sherborne. All children have three basic needs that need to be satisfied:

- 1) **Body awareness:** learning to trust one's body; the need to feel at home in one's body and so gain body mastery. Flexibility of the centre part, awareness of the weight bearing parts of the body.
- 2) **Relationships:** being given the opportunity to engage in meaningful relationships. Specific goals aimed at supporting the relationship between parents and child are: promoting body-contact between parent and child; facilitating the bond between parent and child; emphasising parental skills; making parents aware of the importance of being able to listen to their children in order to understand their needs; suggesting they have joyful play-time together.
- 3) **Awareness of space:** Specific goals related to the children are: letting them develop a better awareness of their own bodies and their motor skills and a better awareness of the space around them.
- 4) **Environment:** getting to know and trust the surrounding world, seeking and creating a situation of well-being, offering an environment without demands, allowing parents (caregivers) and children to feel at ease.

With the developmental movement games the child will have different relational experiences:

Caring or "with" relationships: The adopted child experiences that he can relax and release his/her fear and the control in his/her body, because the parent takes care of him and is really interested. He can experience that it feels good to entrust himself.

"Shared" relationships: The adopted child experiences that he/she and his/her parents can tune in to each other, can be interdependent and play together. Sometimes the parents have the lead, sometimes the child.

"Against" relationships: This gives the adoptive child the experience that he has strength in its body and that he can use this strength, which supports its self-awareness. So he/she can practise releasing and opposing his/her parents.

Coming back to the theory of "the building stones" mentioned before it can be said that with these different developmental movement games, parents can work on the corresponding building stones of attachment (especially on the stages of feeling and entrusting).

Experiences

United Kingdom

POST-ADOPTION CENTRE

The Centre (www.postadoptioncentre.org.uk) was founded in 1986 to meet the needs of adults and children experiencing problems arising from adoption. Its origins were in a growing recognition that adoption isn't always a neat happy ending, but often brings specific problems of its own. To meet changes in adoption practice, the Centre has developed a range of services that reflect the complexities of contemporary adoption. It now offers support, counselling, advice, and therapeutic input to individuals, couples or families.

Around 1850 people use the Post-Adoption Centre's services each year, mainly covering London and the south-east of England.

The Centre's Director and counsellors are all professionally qualified and have a wide experience of adoption and post-adoption work. The multi-racial counselling workers are supported by external consultants, administrative and fundraising staff.

The Centre has particular experience of working with black and multi-racial children and families and transracially adopted adults, as well as gay and lesbian adopted people.

The Centre provides independent advice, counselling and support to anyone affected by or dealing with the challenges and opportunities of adoption.

FAMILY FUTURES CONSORTIUM

Family Futures (www.familyfutures.co.uk) was established in 1997 in order to develop a specialist service for children in adoptive families, foster families and families living with children who have experienced separation, loss or early trauma. It is now recognised as a world-class centre of excellence, specialising in therapeutic work for children who have experienced early trauma and who have attachment difficulties.

Family Futures also offers a wide range of training programmes, seminars and workshops for therapists, social workers and parents; and has produced various books and videos.

Family Futures offers an integrated multi-treatment service for families with children who have experienced early trauma and are exhibiting attachment difficulties, impaired executive functioning and challenging behaviour. Our process of engagement with children and their parents begins with a free consultation, where parents and professionals can learn more about our work in order to make an informed decision about a referral.

If agencies wish to proceed, a Phase One Child Assessment would be completed by a multi-disciplinary team. In the light of that assessment, an agency may wish to refer the child and their family to a Phase Two Integrated Family Assessment. This would be followed by a Third Phase intensive therapy programme.

2.1.3 Search for Origins, Mediation and Support

The right to know one's origins is guaranteed both by international Convention on the Rights of the Child and by the Hague Convention. In particular, the Hague Convention states that Countries of Origin of the children must guarantee access to their adoption files and therefore keep all the relevant information concerning them. Besides the Hague Convention lays down that the competent authorities shall ensure access for children to the relevant information with appropriate counsel. Whatever their origin (institution, foster family) or their age upon arrival might be, all adoptees need to build their own adoptive identity, understand what it means to be adopted and the circumstances which caused their adoption to happen. All of these needs encountered by adoptees in relation to their adoption status will require answers from their adoptive parents. On the other hand frequently adoptive parents need help in order to understand their children's behaviour concerning adoption, as well as certain guidelines as to what would be the best way to address it.

The right to know one's origins is guaranteed by international Law. Art. 7.1 of the International Convention on the Rights of the Child acknowledges the right for children to know their parents and to be brought up by them. The Hague Convention of May 29th 1993 on Protection of the Child and Co-operation in International Adoption laid down a framework for the ICCR general principle: the States of Origin of the children must guarantee access to their adoption files and therefore keep all the relevant information concerning them. However, the States of Origin also have to define the conditions of access by the child to his/her biological parents' identity. The issue of competence of the State of Origin has led to various procedures. Many States of Origin are inclined to recognise the right of an adopted child to know his/her identity and to know his/her origins.

Only under a few legal systems it is possible for the mother's identity to be kept secret upon her request or when the child's line of descent is not established in his/her birth certificate. However, many legal systems have set restrictions and conditions for the child's access to information on his/her origins (e.g. in some Countries a child under the age of 18 must obtain the consent of his/her adoptive parents to start this procedure).

Collection of information is a prerequisite in order to exercise the right of access to one's origins. To allow access, a Country must systematically collect and keep information relating to the child's history and origins. It is one of the principles of the Hague Convention (Articles 16 and 30). Collecting information must not be limited to the period around the birth of the child, but should continue until the child is adopted. The way a child has been welcomed in an institution or a foster family forms integral part of his/her history, of his/her pre-adoptive past.

The Hague Convention of May 29th 1993 lays down that the competent State authorities shall ensure access for children to the relevant information with *appropriate counsel*. Quite frequently, the child is accompanied, whether mandatory or not, by professionals, mainly social workers or psychologists. This role requires the ability to welcome the child, listen to him/her in a kind way in order to help him/her decipher the information collected, understand the chronology of events and know his/her own history in an appropriate manner.

The professional acts as a mediator between the child, his/her history and his/her adoptive parents and must help the child trace his/her history from the information available, express his/her feelings (anguish, injustice, pain etc.), give some meaning to his/her history established by adults, who have defined a project of life for him/her, and by the adoptive parents who have been expecting him/her.

In the field of international adoption, visits to the Country of Origin are increasingly organised under various initiatives (personal, run by the adoptive parents or supported by an association of adopted children, by the authorised adoption body, sometimes by the Country of Origin). This allows the child to be once again in contact with his/her Country of Origin, perhaps to revisit the areas where he used to live before being adopted or to meet his/her biological parents.

Particularities Linked to the Adoptive Status and Identity and the Search for Origins

Regardless of their development after adoption, all children here considered have one thing in common: their adoptive identity. Whatever their origin (institution, foster family) or their age upon arrival might be, all adoptees need to build their own adoptive identity, understand what it means to be adopted and the circumstances which caused their adoption to happen. Sooner or later, when they discover that their lives are connected to two different families, they will all need to face feelings of loss of different intensity levels. They will also discover that their life story was shaped between two worlds, two cultures, and will also have to solve the doubts and ambivalence this might cause them. It is frequently the case that adoptees have to cope with unpleasant remarks from their peers concerning their physical traits or their adoption history. On reaching adolescence, there will be an increase in doubts and deep reflections concerning their identity; many will want to learn more about their past and their origins; and there will be some who will want to reconnect with their Country and culture of origin or even with members of their birth families. All of these needs encountered by adoptees in relation to their adoption status will require answers from their adoptive parents. Research data show that even when parents are absolutely convinced that their children should know the truth about their origins, it is usually difficult for them to address adoption related issues with their children. In addition, as they are aware of the important benefits that adoption has represented for their children, they are not always able to understand the feelings of loss their children are expressing. And sometimes, they interpret their sadness or curiosity about the past as a sign of dissatisfaction with their new situation or as a threat to their family stability. It very frequently happens that adoptive parents need help in order to understand their children's behaviour concerning adoption, as well as certain guidelines as to what would be the best way to address it. They need help, for example, to understand that, in most cases, searching for their origins has to do with their children's need to understand and complete their own identity and not with making up for unfulfilled emotional needs in their relationships with their adoptive parents.

In many cases, the need parents have for post-adoption services is met in the form of a professional monitoring the progress achieved by the child and in the parents-child relationship, as well as by providing counselling to help parents understand and better respond to what is happening. Naturally, when the problems children experience are more severe, complicated and enduring, then children and parents will inevitably require more specialised services and more intensive and lasting interventions. These interventions are essential to prevent adoption breakdown.

Experiences

France

An Act dated 22nd January 2002 set up the National Council for the Access to Information on Origins. The Council has a Secretariat General and is attached to the Ministry for Social Affairs. In each «département», the Council has representatives, whose task is to gather – under a sealed cover – all information about the child's mother and any other details she may wish the child to know. The Council acts upon request of access to information on the origins by a minor and/or a grown-up.

The Council is required to gather the following information:

- Identify the woman who has requested her identity to remain secret on her child's birth certificate.
- Identity of the person and/or people who has/have requested his/her/their identity/ties to remain secret upon delivery of the child to social services and/or adoption organisation (only for cases prior to January 22, 2002).
- Predecessor in title of the child whose name is not revealed.

In connection with the three above-mentioned circumstances, when the request has to do with children from abroad, the Council may urge the Central French Authority, the International Adoption Organisation and/or the authorised organisation concerned to gather information from foreign authorities. For those children under public custody, the local services of the General Council may be involved.

In all other cases, the local public services responsible for children under public custody (children in State custody with consent for adoption) and all organisations authorised for adoption are obliged to keep files on those children whose custody they are in charge of. They have to guarantee minors and/or young people, who have become adults, access to information on their origins. The child's biological mother may ask that her secret identity be revealed, although such information will be made known to the child only if he/she requests it. There is no age limit whatsoever for the child regarding access to information on his/her personal origins, but it is not possible for a minor and/or person of age to have access to information related to his/her mother's origins if the mother, having been contacted by the Council, has refused to reveal such secret information. In this instance, if the mother has not made clear that she refuses to reveal her identity to her child after her death, her identity may be revealed to her child after such event.

The Council is an administrative service with staff (magistrates and psychologists) whose task is to look for the child's mother, get in contact with her and be authorised to reveal her identity as well as to provide support, so that both parties may get back in touch with each other. The National Council for the Access to Information on Origins has developed a meeting programme for the collection of information between its representative and the woman wishing to keep her identity secret, with the aim of standardising the contents of the files. Professionals are being trained in compliance with the Act dated January 22, 2002 which provides the framework for their mission.

Through the Act dated January 22, 2002 the National Council for the Access to Information on Origins was set up. The Council has a Secretariat General and is attached to the Ministry for Social Affairs. In each «département», the Council has representatives whose task is to gather – under a sealed cover – all the pieces of information about the child's mother and any other detail she may wish the child to know. The Council acts upon request of access to information on the origins by a minor and/or a grown up.

The Council is required to gather the following information:

- Identify the woman who has requested her identity to remain secret upon drafting of her child's birth certificate;
- Identity of the person and/or people who has/have requested his/her/their identity/ties to remain secret upon delivery of the child to social services and/or adoption organisation (only for cases prior to January 22, 2002);
- Predecessor in title of the child whose name is not revealed.

When, within the framework of the three above-mentioned circumstances, the request has to do with children from abroad, the Council may urge the Central French Authority, the International Adoption Organisation and/or the authorised organisation concerned to gather information from foreign authorities. For those children under public custody, the local services of the General Council may be involved.

In all other cases, the local public services in charge of children under public custody (children in custody with public welfare with consent for adoption) and all the organisations authorised for adoption must keep the files of those children whose custody they are in charge of. They have to guarantee to minors and/or young people who have become adults the access to information on their origins. The child's biological mother may ask that the secret on her identity data become known, and yet such information will be made known to her child only upon her child's request for such information. The child has no age limitation whatsoever as to having access to information related to his/her personal origins. On the contrary, the minor and or person of age may not have access to information related to his/her mother's origins in the event the mother, once contacted by the Council, refuses to reveal such secret information. In the event the mother on such occasion has not made clear that she refuses to make her identity known to her child after her death, her identity may become known to her child after her death.

The Council is an administrative service with a staff (magistrates and psychologists) whose mission is to look for the child's mother, get in contact with her and be authorised to reveal the secret as well as provide support so that both parties may get back in contact with each other.

The National Council for the Access to Information on Origins has set forth a meeting program on information collection between its representative and the woman wishing to keep her identity secret for the purpose of standardising the content of the files. Professionals are being trained in compliance with the Act dated January 22, 2002 setting forth the framework of their mission.

2.1.4 When things go wrong

Problematic situations in adoptive families with a high risk of disruption sometimes occur in the first months after the arrival of the child, but mainly during the adolescence of the adoptee, that's why it is important to detect difficulties as early as possible and therefore the need of specialised and pro-active post-adoption support is fundamental. Despite of this support, some cases of clear and early failure of the adoption and rejection of the adopted child regularly appear. The management of the crisis situations requires the set up of a support and therapeutic mechanism based on coordinated professional interventions. There are lots of successful experiences in restoring the adoptive link within the initial adoptive family or in building another link in a new family. But unfortunately research also shows that a certain number of adoptions end up with a disruption process and the re-institutionalization of the adoptees.

Experience shows that two are the most delicate periods for adoptive families: the first year after adoption and adolescence. Things may easily go wrong at these times: in a few cases, soon after the meeting between the adoptee and the adoptive parents and, most of the time, when the adoptee is in his/her teenage years.

When Things Go Wrong During the First Year After Adoption

It occasionally happens that the "graft" does not take, and that adoptive parents and child do not succeed in creating any attachment bond at all. The parents-child relationship can be negatively affected by two possible parents' attitudes: they either play down, or even ignore, the symptoms or they feel guilty and question their parental ability.

This situation may lead to a more or less open adoption disruption. Such cases are fortunately rare. They can often be linked to errors in the management of the adoption process by third parties, and especially to the lack of professional intervention in the pre-adoption phases with regard to birth families, children and/or prospective adoptive parents, such as:

- Bad practices with the birth family, lack of support or pressure towards relinquishment of the child with the consequence that the child is not allowed to get attached and be happy with his/her new parents.
- Lack of preparation of the child: preparing a child for adoption is not only a matter of providing information about the new parents, but first of all of helping him emotionally manage the loss of the former parents and wish to have new ones.
- Errors in the evaluation of the prospective adoptive parents aptitudes and ability to adopt and/or lack of preparation of the parents-to-be providing them with the specific skills required by adoptive parenthood.
- Lack of a professional matching procedure: the child matched with the prospective adoptive parents is too different from the parents expectations, and/or the parents have not been properly prepared to receive that particular child. It often happens that prospective adoptive parents would like to say no to the proposal that has been put forward to them or have actually tried to refuse the child, at the time of matching or at the time of the meeting with the child, but they do not dare do so or they are not listened to by the professionals.
- Lack of professional post-adoption support immediately after the arrival of the child.

The management of the crisis requires joint intervention of multidisciplinary teams to prevent major risks like mistreatment or removing or relinquishing the child to an institution. Such early intensive and specialised intervention may be beneficial in several cases and contribute to solving problems; sometimes however it does not achieve the desired effect and leads to new instances of disruption. In some Countries like Belgium, the law allows passing a new adoption sentence, under restrictive and well-defined circumstances, taking into account the exclusive interest of the child. Some professionals, like Claudette

Perin in France, have published works about their interesting experience of intervening successfully in similar cases, deconstructing the relationship with the first family and building a new attachment with a second family.

When Things Go Wrong in the Adolescence Years

It is relatively common that some of the above-mentioned situations, instead of disrupting openly, develop slowly during the adoptee's childhood. Parents and child do not get properly attached but only adapted to one another, and the teenage adoptee challenges the adoptive bond. This is the reason why it is important to detect difficulties as early as possible. Post-adoption services should strengthen their prevention policies. Early support can avoid the mid or long term, but always painful, re-emergence of problems when a child turns into a more vulnerable teenager.

If there are difficulties in the relationship between parents and child and they are not dealt with, they will later on lead to a deeper malaise in the child, who could develop an antisocial behaviour in a family environment fraught with mutual violence. Adolescence is a second birth for all children, adopted and non-adopted. It is a sensitive period in the identity building process, a period full of questions and suffering, when the teenager goes back to his/her former griefs and losses. Where these have not been sufficiently processed at an emotional level, adolescents express them through acts and transgressions that can be violent.

These family situations are very delicate and potentially explosive; they require professional support and it is often necessary to find an acceptable and temporary solution by removing the child and putting some distance between parents and youngster. This can be achieved by placing the teenager in a boarding school or by agreeing to temporarily put him/her in an institution. In any case, preserving the parents-child link should always be the main objective of professional support required in these circumstances. But this is no easy task; these family situations usually see the involvement of many professionals, as the teenager is going from one life environment to another, from one placement to another. The management of crisis situations usually requires the creation of a support and therapeutic mechanism based on coordinated professional interventions, which is normally associated with high human, social and financial costs.

Adoption Failures and Disruptions

In spite of all of their efforts, the Receiving Countries must acknowledge that it is inevitable to have a certain percentage of adoption failures and disruptions. Different studies conducted and published in different Countries (see for example Verhulst & al. in Holland, Hjern & al. in Sweden, Sellenet recently in France) highlight that a small percentage of adoptees experience family disruption and/or major life problems like psychiatric disorders, delinquency or even suicide. Some larger studies, like the one carried out by Hjern and published by the Lancet in 2002, tend to show that these problems can be considered to be statistically important in a population of adopted young adults.

These results must however be considered with caution, and in any case no univocal and causal link should be made with adoption. No comparable studies have taken into consideration what could have happened to these children had they not been adopted. It seems more appropriated to conclude that the resilience capacity of children is sometimes deeply damaged by early life experiences and adoptive placements do not always ensure by themselves a successful outcome and recovery. Central and competent authorities should be aware of this fact, and their staff must receive appropriate training, not only with regard to the administrative and judicial aspects of the work, but also concerning the social, psychological, and medical sides of adoption. They should work towards the implementation of responsible policies based on professional support throughout the entire bilateral adoption process. This is absolutely necessary to help birth parents, children and adoptive parents gain the greatest benefit from this particular family institution and cooperate in the real best interest of the children.

2.2 Post-adoption Services Providers

What are the characteristics of the services which should or can provide professional and efficient post-adoption support?

Different options exist in the way of organizing post-adoption support in European Countries; each of them having their advantages and disadvantages. A range of possibilities could be provided according to the answers given to the following questions: Which services should be provided to all adoptive families in a systematic and pro-active way and which should be left to the families' own initiative? Can general services available to children and parents be useful and pertinent for adoptive families or is there a need for some specific services specialised in adoption? What is the responsibility of public authorities in the implementation of post-adoption services, should they be public services, or private bodies duly authorised?

2.2.1 Services Specializing in Adoption

The characteristics of the services which should/can provide support in the period after adoption have been discussed at length both at national and international level. The fundamental question is linked with the legitimacy of such an intervention – as discussed above (see legal context) and in the section of the ChildONEurope report dedicated to post-adoption services in the Countries that are partners of the network. On the one hand, it is stated that the needs for support and accompaniment of the adoptive family can find a response in the general services for parental support, that is non-specialised services. On the other hand, it has been acknowledged that adoptive families – even if they are families like any others – have specific requirements or problems during this time that need, on the contrary, specialised intervention. As stated in the report, such an activity is organised by public services and by private bodies, duly authorised to supply these kinds of services.

With regard to all the issues mentioned in the previous chapter, parents or teachers should receive additional help or guidance by counsellors specialised in adoption. They must have sufficient knowledge of the possible impact that the past of an adopted child may have on its development and its capacity for attachment.

The counsellor needs to gain a clear insight into:

- Representations of the child and the adoptive parents
- Attachment experiences of child and adoptive parents in early childhood
- The history of the child before adoption, history of the adoptive parents
- The first encounter between parents and child
- The counsellor's first impression and observation of the adoptive family.

The counsellor has to be sensitive and responsive, be aware of his or her own strengths and weaknesses and have the ability to self-reflect. He or she is able to build a working relationship with the adoptive parents, to know the strengths, the weaknesses/risks of the family, the child(ren), the parents and the environment. And she or he is also able to empower the adoptive parents.

Frequently, however, post-adoptive support is not recognised as an independent service, but is included among the many other services provided by public or private entities involved in the adoption process in various ways. In France, for example, it is expressly stated that there are no specific services for the phase immediately following the formation of the adoptive family, whereas in actual fact support services can be included in the functions ascribed to public and private bodies involved in adoption. It is also necessary to distinguish between post-adoption support provided by authorised private bodies who concern themselves with adoption intermediation and support provided by public assistance bodies in the territory.

In most of the Countries examined, support for the post-adoption phase is provided both by authorised private bodies and competent public authorities. The procedure commonly adopted by private bodies in all the Countries examined is to make family support services normally available on request by the parties concerned. In the majority of cases, accompaniment of adoptive families does not come under the control

and supervision of the competent public authorities except indirectly, linked to the authorisation of the function and consequent monitoring by the latter over the former.

Furthermore, as indicated later, support and assistance by public authorities are provided almost exclusively after a specific request has been submitted by adoptive families.

2.2.2 The Role of Accredited Bodies

In Countries where intermediation in intercountry adoption by a public and/or private body is allowed or provided for – if not even mandatory – by law, it has progressively acquired an increasingly relevant role. Indeed, these bodies have evolved from associations of families helping each other to organisations with a “public” function which are professionally prepared to provide a set of services to adoptive families, from the initial phase (information, preparation, support), to the completion of all technical procedures (technical-legal and psychological counselling, etc.) and also after the arrival of the child (different stages of his/her integration in the family and in society).

The relationship between the family and the chosen body is built over time, mainly based on:

- **Sharing of a common project**, and of a view of intercountry adoption and of the procedures which will lead to the meeting between the child and the family.
Where there is a considerable number of authorised bodies, the choice is made on the basis of different criteria, linked to practical aspects (proximity, Countries in which the bodies work or expected waiting times), but also to the sharing of the mission and purposes of the organization.
In many cases, the organisation originated as an association (groups of adoptive families which form associations to help other families and children). Many of the workers and volunteers in the organisations are in turn adoptive parents or even adoptive children who have become adults.
- **Continuity of the relationship** – the adoption procedure can last for several months or even years. In this period of time, if dialogue is ongoing, the couple and the worker may develop a strong relationship, especially if the worker has been able to combine a willingness to listen to and support the couple with his/her technical expertise, knowledge of Countries and of the child.
- **Critical moments** – even the critical moments, the uncertainties, the disappointments and the failures, if managed with empathy and professionalism by the workers of the organisation, can help strengthen a relationship based on trust.
- **Happy ending with the realisation of a long felt desire** – feelings of gratitude and trust for having been able to carry out a much desired family project (stork).

After the Arrival of the Child

If the relationship between the family and the organisation has been successful in the previous stage, after the arrival of the child the couple will most probably continue to consider the workers of the organisation as a resource and as a point of reference for the integration of the child in the family and in school, from the very first days of his/her arrival in the Receiving Country.

When organisations are required to send periodical reports on the progress of the adoption to the Countries of Origin (follow up), the organisation and the family are actually obliged to constantly keep in touch for several months or even years.

Support Initiatives

Standard Support

Besides the drafting of periodical follow-up reports, the organisation may provide optional services in order to support the family and the child in facing sensitive issues and to strengthen resources. The following may be some of the possible services made available:

- Social, psychological and educational counselling to parents
- Support groups for parents
- Groups of adopted children

- Physical and mental activities for children
- Meetings with the whole family nucleus
- Work with the institutional network (local services, school)

Specific Support

This kind of optional assistance can be provided to deal with specific issues and/or family situations at risk. For instance:

- Psychological and educational support to parents
- Psychological support to the child
- Family or individual psychotherapy
- Specialist services for specific issues (handicaps, physical or mental illnesses, behaviour disorders, learning disorders, etc.)
- Work with the institutional network

Later Contacts

Even several years after the adoption, the family may consider the organisation as a point of reference in case of need. Experience shows that many adopted children, once adults, want to get in touch with the organisation which took care of their adoption. In the archives, they will find (or hope to find) the file concerning them and, if they are lucky, they could even meet the person who took care of their case and he/she might even remember them.

Trips Back to the Countries of Origin

An Italian organisation has periodically organised group trips (maximum 30 people) to the Countries of Origin of the children for more than 20 years.

The trip includes the visit to all the places and institutes which are of interest to the participants.

The group is accompanied by a representative of the organisation and by a psychologist.

Experience has shown that, before getting in touch with one's own "origins", it is necessary to be adequately prepared and to be accompanied by experts.

The presence of the group helps create a feeling of empathy and sharing.

Association Activities

The organisations which are structured as "associations" normally organise institutional activities (annual assembly, internal elections, etc.), often with the participation of several member families. These are not merely bureaucratic events, as they represent an opportunity to meet, discuss and share the future choices of the organisation.

Leisure Activities

Far from confining adoptive families to a ghetto, parties, trips, meetings and creative activities involving adults and children actually help strengthen a sense of belonging, of "sharing" a much broader human and social experience.

2.2.3 The Role of Training

The following are general guidelines which must be carefully selected and integrated in order for training activities to better meet the specific needs of different systems of post-adoption services.

Adoption, both domestic and intercountry, is a complex process which

- has to do with significant and often tragic life and relational problems – of the adopted child, but also of the parents willing to adopt;
- involves and affects a considerable number of institutional, public, authorised and private actors;

- involves multiple complex procedures which, especially in the case of intercountry adoption, pose a significant challenge to the traditional rigidity of laws, codes and legal provisions.

For the full implementation of the principle of subsidiarity, it is necessary to work towards the potential extinction of intercountry adoptions, but in the short and medium term it is necessary to develop practical tools to face, among others, issues such as the increasing age of the adopted children, the arrival of a growing number of children and adolescents with disabilities, the adoption of coloured children or children with markedly differentiated characteristics from the ones of the Receiving Country.

On the other hand, in 2006 there was a generalized decrease – from 5 to 25% less – in the number of intercountry adoptions across the vast majority of Receiving States in Europe and North America (International Social Service – Monthly Review n. 3/2007).

This evolution involves an increasing accentuation of the *willingness* of the adoptive parents, compared to the still legitimate area of the *desire* for parenthood.

This accentuation also involves a considerable *intellectualisation* of the choice of life of the adoptive parents, which can restrain their *spontaneous affectivity*. Hence, the predominant aspect of the adoption push may become the *must be*, rather than the *know how to be*, which requires a higher level of sacrifice: it goes without saying that in these cases there is the risk of stimulating *mimetic* dimensions and strong *rationalisations*.

These brief considerations, which are only relevant for adoptive parents – who still represent a key element for a good post-adoption experience – are aimed at underlining the central issues of *complexity* on the one hand and of *subjectivity* on the other for training purposes in post-adoption.

For a good post-adoption experience (which should be neither *denied* nor *mimetic*), it is possible to identify some methodological contributions – four in particular – to be followed in training for post-adoption.

A) **An autobiographical contribution**, which, even in a highly specialised professional context, should be re-discovered in the post adoption phase, thus stressing:

- The centrality of the history of the single adopted child;
- The crucial importance of the couple's motivations and of the process followed with regard to the adoption (or of the single parent, where possible);
- The peculiarity of the professional and personal history of the worker dealing with adoptions (often carrying out several roles – an extreme case may be a regional representative who is also a social worker, and an adoptive parent in contact with an authorised body who might even be an honorary judge at the Juvenile Court). This plurality of roles may be a limitation, or even a resource, but it is first of all a significant element to be taken into consideration.

These autobiographical contributions are at the centre of the different post-adoption services, of the subjects and organisations taking *also* care of adopted children, and of the social actors who are marginally involved in the post-adoption process.

B) **A structural contribution**, which includes:

- A specific focus on knowing the legislative context and broader rules;
- An in-depth analysis and comparison of the measures taken in the different regional contexts which every nation should adapt to its own situation (bilingualism or plurilingualism, markedly different cultural contexts, etc.);
- A close examination of the different contexts at European level (objectively favoured by the initiatives of ChildONEurope in the field, but which in the future may continue to be the subject matter of research work and studies on this issue);
- A brief description of the reforms underway, which must reflect the rapid changes occurring in all sectors, but in particular in the sector of intercountry adoptions, which is characterised by numerous critical aspects.

- C) **An instrumental contribution**, aimed at preparing a well thought out and targeted sequence of the different instruments which can be used in training in post-adoption, which may include:
- Proposals for instruments aimed at improving the skills of all the people assisting adopted children at school (which may at least in part derive from the issue of immigrant minors and which may be extended to the growing issue of unaccompanied foreign minors);
 - Proposals for instruments for integrating, maintaining and enhancing the skills and knowledge of adopted children;
 - Proposals for instruments for socialisation and debate among adoptive parents (creation of diversified group settings, promotion of contributions by peers, problem solving strategies);
 - Proposals for instruments aimed at developing skills for receiving children in different social and geographical contexts, in order to improve cultural mixing;
 - Proposals for instruments guiding the mandatory drafting of the reports required by the States of Origin, with the aim to monitor and control information, prevention and support activities (focusing in particular on assessing the child's situation, rather than on drafting the report). Based on a principle of non-discrimination, the procedures for reporting inadequate parents to the competent Authority must be the same for all the families.
- D) **An interpretative contribution**, among the possible ones, which can anticipate an evolutionary model for post-adoption. Starting from a basic model characterised by empowerment, this model can progress towards a situation characterised by self-empowerment (see in particular Brusciaglioni and Gheno, 2000) and to self-training, though integrated with traditional training courses (see in particular Quaglino, 2004).
- **Empowerment**, with its techniques and possible specific applications in post-adoption which must certainly be implemented, aims at making people and organisations powerful, so that their resources may be best used to satisfy needs, objectives and desires in order for them to play a more active role. In our case, by power we mean in particular all that has to do with the subjectivity of the individual and with his/her inner world rather than with the external power (power-influence). The centrality of strengths over weaknesses seems particularly important for a post-adoption approach which aims at favouring optimal well-being in contexts in which unsuccessful integration may lead to tragic situations (adoption failure, another separation, suicide, etc.).
 - **Self-empowerment** makes it possible, in particular, to overcome a partial lack of substance in the use of the concept of empowerment (good intentions, but little action), in order to open up new desires, views and possibilities. In this way, through specific instruments, it is possible, with regard to post-adoption, to promote and contextualize:
 - an increase in possibilities;
 - a mobilization of “desiring energy”;
 - the specific weakening of historical subjective problems;
 - reversible experimentations;
 - possible significant improvements (structured through tendential evolutionary scales);
 - a new, positive view of oneself;
 - a generative management of contradictions.
 - **Self-training**, as a prospect for development to be pursued and reached, can be considered as a vital process of growth and development of one's own self, which goes through successive stages of learning generated by experience. And we know how crucial the experiential field is in the complex processes that characterise post-adoption. By enhancing the autobiographical aspects mentioned before and by operating in an integrated manner, self-training will be, on the one hand, the prerogative of workers dealing with post-adoption, and on the other hand, it will support personal development in families.

In conclusion, some observations on the centrality of the demands of children, on the one hand, and on the need to co-build dynamic training contexts on the other.

As regards training courses for workers in post-adoption services, they must take into consideration the educational needs of children growing in social, geographical, cultural and family environments which are very different from their own. To do so, it may be useful to follow and adapt some observations on learning how to live in a land which is lent to us (Ciotti, 2006). Such considerations allow us to look at the world of adoption and post-adoption services as people who know nothing about the advancing new, in order to better understand what is needed.

These observations can be structured in different *educational keys*, valid for all children, but particularly useful for adopted children, given also the increasing age at which they access their new Country:

- The relationship as a tool to grow and plan with children their integration (more listening, more communication and constant exchange of views in micro-contexts);
- The recognition of their limited and partial skills, which must however be enhanced and applied, even starting from small things (thus favouring an increase in self-esteem);
- The need to allow concrete activities, relating to an increasingly virtual world (more real autonomy and less dependence on the adult);
- The development of a broader spectrum of emotions and experiences. As adopted children may be more introverted and weaker than their peers (capability to detect silent questions and not only expressed questions);
- The implementation of educational paths on differences and diversity, in order to face stigmatising distances (increase opportunities for differentiated normalities as against single standardised normality);
- The promotion of subjective dimensions – based on the autobiographical aspects mentioned before – but also of collective contexts (diversify opportunities for meeting, showing full respect for the cultures of the Country of Origin and of Destination of the child).

These *educational keys* can influence various educational areas and determine most of the skills to be activated, in order for them not to be too *adult-centred*.

Finally, why would it be useful to co-build dynamic contexts in training concerning post-adoption?

The main reason is that the training contexts, if well-planned, can make it possible to create *temporary organisations* which would give participants the opportunity to think about and possibly change their point of view without running the risk of failing or of feeling inadequate. This also prevents the emergence of an excessively rigid and defensive attitude, which actually hinders any kind of change. Therefore, in particular:

Why *co-build*? Because, especially in the case of post-adoption, the participation of several people with different skills is crucial to implementing the “best interest of the child”, which the Hague Convention is intended to protect. Besides, in this context it is important to consider the workers involved in training more as authors – who co-build and become capable of playing an active role in defining policies concerning the services – rather than as mere actors – active in training sessions – (Orsenigo, 2005, Olivetti Manoukian, 2007).

Why *dynamic training contexts*? Because, for instance, by using tools of training-intervention or training-action, they represent a concrete opportunity to search for new, non-invasive ways to protect the well-being of children and adolescents who usually have already been tried by abandonment and sufferings.

2.3 Monitoring and Research activities regarding Post-adoption Services

The post-adoption stage is an important part of the adoption process which is extremely demanding for the individuals involved but less followed at a social level because of the respect for family privacy. The question of individual choice vs social responsibility is particularly crucial in this field. Monitoring and research activities are integral part of building and implementing a post-adoption services system. There is therefore the need for evaluating the effectiveness and quality of these services, but also, in a broader sense, for evaluating the entire adoption management system in order to improve the whole system and lay the foundations for the future development of the decision-making process.

General Comments

Adoption is a specific example of applying children's rights to a family environment. It is important, in particular, for guaranteeing **permanence from an** individual, relational, social and legal point of view. In most Countries, special attention is therefore given to the preparation stage (considering both the child and potential parents), as well as to adoption itself.

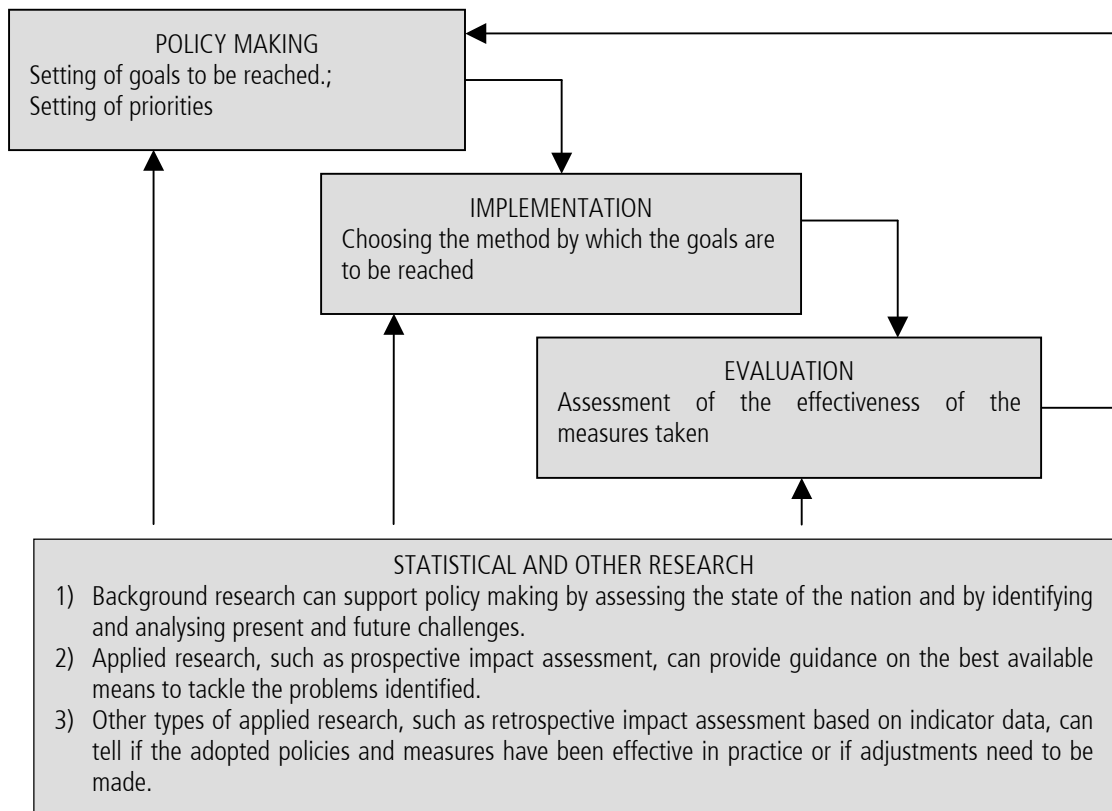
Another integral part of the entire adoption process is the post-adoption stage, which is extremely demanding for the individuals involved, but less followed at a social level, mainly because of the issue of family privacy.

The current situation in the post-adoption services arena can be described as a period of more concentrated efforts on the part of the European Countries to specify the post-adoption services contents and scope, which have also been addressed in previous chapters of this publication.

On the other hand, elementary statistical data and information from particular Countries with regard to experiences and good practice in the area of post-adoption services are not available. Existing services are currently extremely different depending on individual Countries. The issue of releasing information – in particular from the Receiving Countries to the Countries of Origin – still remains a delicate one. In addition to legislative and social barriers, this scenario also contributes towards creating information barriers for partners and to open cooperation between some EU Countries which, considering the diversity and the different experiences made concerning intercountry adoptions, could otherwise be a model for other Countries that are parties to the Hague Convention.

Monitoring and research activities are undoubtedly an integral part of building and developing the post-adoption services system. But without relevant information and data, and without the possibility to draw comparisons, it is however impossible to evaluate the effectiveness and quality of a post-adoption services system. Regular and objective evaluation can consequently lead to improving the system of these services and become a basis for the future development of the decision-making process. A similar approach is valid in all areas of the social sphere where the scope and extent of quantitative and qualitative data as well as the method of their collection must be considered very carefully.

The relation between data collection and the decision making process is clearly described by the Finnish author Timo Makkonen in the next diagram.



Post-adoption Services - Importance of Their Monitoring and Assessment

Experience shows that in addition to the individual preparation of the child and the parents and the general social climate, post-adoption services, and their accessibility, quality and variety are very important factors to be considered for the general success of an adoption.

The area of post-adoption services is not a classical example of services based on supply and demand; therefore, the measurement of effectiveness requires specific indicators due to subjectivity, emotionality, long-lasting assessment and other specific factors affecting the outcome. A discrepancy between private and public interests is particularly apparent in this respect and this gap may be closed by developing and supporting the preferred option. Thus, in measuring the monitoring and research activities of post-adoption services, we will consider the following scenario:

individual choice

 social responsibility

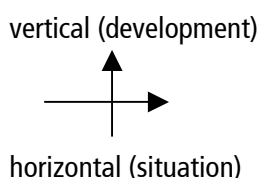
In this context, the introduction and development of any post-adoption measures and services is affected by the knowledge of the real situation and by having sufficient relevant data and information available.

Data and Specifications

There are two important levels of data collection: firstly, the vertical level, which provides an insight into the development over time, e.g. after passing important national legislation, or adopting or ratifying important international documents (the UN Convention on the Rights of the Child), or adopting the Hague Convention on Intercountry Adoption, etc.).

The time required may confirm or disprove the selected trends of post-adoption services, which may also become an inspiration for further intervention in this area.

Secondly, the horizontal level which includes the collection of data from a certain fixed point (e.g. as of 1st January 2006). It provides a snapshot of the current situation, and highlights, in particular, regional differences within certain Countries, and makes it possible to draw comparisons between specific Countries.



Data Properties

In terms of their indicative value, the data and information collected should have the following properties which are also typical of monitoring and research activities in other social areas:

- Valid and reliable information and data
- Actual information according to situation and cases
- Comparable information (with national, international surveys and monitoring data)
- Longitudinal information
- Forming an internally structured and informatively open database
- Possibility of presenting “good practices”

Methods of Data Collection

Success in obtaining objective data on post-adoption services is determined by the scenario already mentioned and depends on the location of such data between individual choice and social responsibility with regard to the extent and quality of services and conditions from which some adoption families can choose.

General satisfaction, however, also results from the extent and nature of mandatory contacts between the adoptive family and public institutions (such as reports on intercountry adoption).

Monitoring post-adoption services is an example of the need to combine qualitative and quantitative methods in data collection. Using these two methods separately, will not provide a relevant degree of objectivity. It is therefore necessary to combine them, and to include qualitative data and information into the reference framework of quantitative data.

Contents Analysis

Legislation is the basic social framework which makes adoption possible and defines its progress and implementation. The first step in the monitoring of post-adoption services is therefore a contents analysis of international commitments and national legislation. Even though the international convention and the resulting commitments are more or less identical in all EU Member States, the method and extent of their implementation vary, and so the analysis, mainly with regard to international comparison, should focus on this area.

The contents analysis of national legislation should particularly focus on conditions and rules of adoption regarding both the child and the parents. Conditions related to the Family Statute, maximum age at which children could be adopted and other factors also influence the forms that post-adoption services may take (e.g. adoption only possible for married couples, or also for single people).

Another area of focus for contents analysis should be the social and family policy measures adopted by a particular State. These measures, which may, for example, include entitlement to maternity leave or parental holiday, affect in many ways the need or superfluousness of certain services. The amount and scope, and the mandatory or optional nature of various child and family allowances also play an important role in this context.

Quantitative Analysis

Quantitative analysis should include the following data:

- 1) On **the extent and scope of adoption** as a social phenomenon within a certain area;
- 2) On **the extent and scope of the services** provided.

All data can be collected, as and when needed, for certain Countries, regions, towns or administrative units.

1. Proposed Indicators of the Extent and Scope of Adoption:	Number		Type of adoption		
	Absol.	Relat.	National	Intercountry	Total
Number of children living in adoptive families					
Number of adoptive families					
Number of court rulings on permitting adoptions per year					
Number of adoption applications filed with the relevant authorities					
Number of successful applications					
Others					

2. Proposed Indicators of Services:
Type of services
Personnel provision of services
Providing services
Length of time the services were provided
Accessibility of services
- Financial
- Territorial
- Time
Awareness of the existence of the services
Awareness, promoted by the media

3. Proposed Indicators of Mandatory Communication
Extent of information about the family
Source of information
Periodicity
Length
Place and type of communication, communication means

Qualitative Analysis

Qualitative analysis complements a quantitative analysis. It deals with measuring and assessing opinions, values, attitudes and needs that could be called indicators of service satisfaction, in terms of situation, extent, accessibility, differentiation, development, and orientation of post-adoption services etc.

Several methods or their combinations can be used:

- A structured interview (with recipients, providers, third parties, etc.)
- A questionnaire
- A record sheet
- Observation

These are various methods used in so-called „self-reporting surveys“. They can relate to the following subject matters:

- Self-reflection
 - of the child
 - of the parents/the mother and the father separately
 - of the members of the nuclear family
 - of the members of the extended family
 - of the community (friends, neighbours, teachers, doctors...)
 - of the service providers.

In terms of validity of the data, at least two sources are often preferred. In terms of time and finances, it is possible to study the mediated experience.

Particularly challenging is collecting data about the child and from the child. In the case of the child, it is, of course, necessary to take into account not only the attitude of the parents but also the child's age, length of the adoption, mental and language skills etc.

As the parents are the main applicants for and recipients of post-adoption services, they are also the main source for obtaining information by means of self-reporting surveys.

Case studies are a very important part of the post-adoption monitoring and research activity. Their indicative and informative value depends on several factors. First of all, there is a specific time and space classification, identified through indicators of contents and quantitative analyses. Without them, a case study is a literary work rather than a source of knowledge.

A case study requires in-depth knowledge of the problem. It is time consuming and requires an accurate and detailed analysis of the issue as well as knowledge of the various links between different pieces of information. Within the context of post-adoption services, a case study may take the form of a study on a family/families but also as a study on individual service providers.

Post-adoption Reports

An extremely important role in monitoring the post-adoption development of a child is played by post-adoption reports. They are designed to be an actual mirror of the progress a child is making in terms of adaptation to his/her new family, and they also are an indication of whether various types of post-adoption services are successful, not so successful, necessary or superfluous.

For the purpose of intercountry adoption, the Hague Convention introduced a standard concerning the work conducted with the family in the post-adoption stage and also established a quality standard as well as the quantity of these reports.

For a number of Countries, it was also an incentive to develop a method for working with families following an adoption at national level. In terms of the need to make monitoring and research activities relating to post-adoption services more objective, in the future it will be necessary to define the layout of these reports and specify the type of basic information and complementary information necessary so as to simplify the comparison between post-adoption services at both horizontal and vertical level as well as in the international context (more about this point in the chapter on follow-up reports).

In terms of monitoring, the follow-up reports are to be understood as an important information tool rather than a tool for quality assurance or legal commitments.

These reports are a good way of building bridges between the Countries of Origin and the Receiving Countries, especially with regard to emphasising their mutual cooperation which should play a more important role than relations based on mechanisms of control. This approach, however, requires subsequent analytical work in connection with follow-up reports after their sending and registration in the Countries of Origin.

This activity should be mainly concentrating on the following:

- Monitoring and evaluation of reports
- Contents analysis of reports
- Research applying several methods (e.g. comparing contents of report analysis with a guided interview in the adoptive family).

Considering the knowledge obtained on particular stages of post-adoption adaptation, the practical impact and use of such monitoring and research activities is varied:

- It helps achieve a focused and adequate preparation
 - of the child for the future adoptive family abroad
 - of the future adoptive parents to accept a child from abroad in their family
- It helps create a favourable social atmosphere
 - in connection with intercountry adoptions, in particular in those Countries of Origin where the concerns about the fate of children adopted abroad and the interest in knowing what happens to them once they leave the Country are still frequently expressed;
 - also in the Receiving Countries, especially with regard to overcoming intercultural barriers;
- It helps make the creation of post-adoption services systems more effective, particularly in the form of external objective analyses;
- It helps establish inter-disciplinary cooperation and international cooperation of experts in implementing international conventions related to children's rights.

The post-adoption stage, which is extremely demanding for the individual involved, but less followed at a social level, especially due to the issue of family privacy, represents an integral part of the entire adoption process.

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