

Questionnaire on the impact of COVID-19 on intercountry adoptions under the 1993 Adoption Convention

<i>Identification for follow-up purposes:</i>	
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I. OVERARCHING QUESTIONS	
	<u>Both States of origin and receiving States</u>
1.	<p>In response to the COVID-19 pandemic, has your State modified intercountry adoption procedures under the 1993 Adoption Convention? If so, what has your State done to ensure that the safeguards and procedures of the Convention have been, and continue to be, respected?</p> <p>Some of the Regional Central Authorities have explained their intercountry adoption processes haven't changed as it wasn't necessary in their case. But some of them have added they have digitalised several procedures and communications, such as documents with digital signature, e-mails or videoconferences, when the country of origin have accepted using these digital tools.</p> <p>Other Regional Central Authorities have informed that they have stopped the assessment of the families as well as the follow-up reports of the children adopted, during the lockdown months, from March to May 2020. They have continued the assessments and the follow-up reports after that period. Nevertheless, they have proceeded with an online training for the families.</p> <p>In other cases, several intercountry adoption procedures have decelerated, even if the adoption processes, with those countries whose Central Authorities have kept providing minimum services, have continued.</p>
II. OUTBREAK OF COVID-19 (cases in transition only)	
	<u>Both States of origin and receiving States</u>
2.	<p>What measures, if any, did your State take to deal with cases where the child had already been matched with prospective adoptive parents, but no adoption decision had been issued at the time of the COVID-19 outbreak in your State? How many children were in such a</p>

	<p>situation?</p> <p>The measures Regional Central Authorities that had prospective adoptive parents in this situation have taken have been the following ones:</p> <p>Communicating the situation to the national Central Authority.</p> <p>Gathering information from Accredited Bodies about the families that had already met the country conformity to the matching, in order to study the possibility of travelling to the country of origin so that they can proceed with the intercountry adoption process. The Accredited Bodies have informed that the travels of the families had to be postponed for health reasons.</p> <p>In other cases the families waited for further instructions from the countries of origin.</p> <p>They have also informed the prospective adoptive parents about the measures and/or recommendations of health authorities that could affect this situation, both in the country of origin as in the receiving country.</p> <p>Some of the Spanish Regional Central Authorities have informed about the number of children that were in that situation: a total of 47 children; even if it is not a representative figure of our State, as not all of them have been able to answer this questionnaire.</p> <p>After the lockdown, some of these families were able to travel, except from the cases of some countries of origin, where it has not been possible yet.</p>
<p>3.</p>	<p>What measures, if any, did your State take to deal with cases where the adoption decision had already been issued, but the child was still in the State of origin at the time of the COVID-19 outbreak in your State? How many children were in such a situation?</p> <p>With reference to this question, some of the Regional Central Authorities have only communicated the situation to the National Central Authorities, as the international relationships are competence of the State in our country.</p> <p>Other Regional Central Authorities have only taken the measures to guarantee the prevention of Covid-19.</p> <p>In other cases, in order to complete the adoptive process that required travelling to the country of origin to pick the child up, the general recommendation was to wait until the situation came back to normal.</p> <p>They have also met and informed about the measures and recommendations taken by the health authorities related to the transition situation, both in the country of origin as in the receiving country.</p> <p>The Spanish Consulates offered as well the necessary support to the families, so that they could travel as soon as there were flights, without incidents.</p> <p>As answered to the previous question, only some of the Spanish Regional Central Authorities have informed about the number of children that were in that situation: a total of 32 children; but this is not a representative figure of our State, as not all of them have been able to answer this questionnaire.</p> <p>After the lockdown, some of these families were able to travel to the country of origin.</p>

III. DURING COVID-19 (cases in transition and new cases)	
	<u>States of origin only</u>
4.	<p>Has your State adapted, and if so how, the following stages of the adoption procedure:</p> <p>a) Declaration of adoptability of the child: Please insert text here</p> <p>b) Matching: Please insert text here</p> <p>c) Socialisation period: Please insert text here</p> <p>d) Support and counselling to adoptable children: Please insert text here</p> <p>e) Adoption decision: Please insert text here</p> <p>f) Other stages: Please insert text here</p>
	<u>Receiving States only</u>
5.	<p>Has your State adapted, and if so how, the following stages of the adoption procedure:</p> <p>a) Eligibility and suitability of prospective adoptive parents:</p> <p>There have been some answers from several Regional Central Authorities explaining they have not modified these stages of the adoption procedure. In these cases, they have only stopped the suitability assessments during the lockdown period. After this phase, some Regions have asked the families to sign a statement about their state of health related to Covid-19, in order to start the assessment.</p> <p>Several regions have also added that, after the third level of the alert state, small training groups started meeting, always respecting the maximum number of persons allowed by the health regulation (including the trainers). This way, during that phase, the process was not paralysed, respecting the health measures.</p> <p>Furthermore, in some cases, part of the training hours were online format, as individual work from home, through books, articles, videos, films and other kind of documents. Afterwards, these tasks were reviewed and commented during on-site sessions. This way the training service kept working, avoiding further delays and collapse.</p> <p>In other cases, during the lockdown period, the meetings of the Technical Committee of Assessment were held online dividing the Committee in three different Committees, during the months of April, May and June, as an alternative to evaluate the technical proposals. This avoided the delay on obtaining the suitability certificate.</p> <p>After that period the Committee meetings were held on-site, taking into account all</p>

	<p>the security measures.</p> <p>Most of the Regional Central Authorities have explained they have adapted the procedures to online mode as well as through video calls, included the interviews, the assessment activity, the exchange of information or the documents submission.</p> <p>Nevertheless, several Regions have affirmed they have also continued the face-to-face interviews, tests and questionnaires, as well as home visits.</p> <p>b) Support and counselling to prospective adoptive parents:</p> <p>The Regional Central Authorities have explained they have made the necessary adjustments in order to provide online training, as well as online or written informative meetings.</p> <p>Some of them have clarify they have reduced the number of persons who attend the training sessions to adapt their methodology in order to avoid risks.</p> <p>They have also added a reinforcement (monitoring and informations) to assist the prospective adoptive parents that were about to travel to complete their adoptive processes, above all during the period between March and June. The reinforcement consisted on enhancing the relationship with the authorities from the countries of origin (Central Authorities, Embassies and Consulates), through online contacts, in order to guarantee a greater legal and physical security of the families, in case they had to travel to the child's country of origin.</p> <p>Several Regional Central Authorities have clarified they have proceeded receiving the matching proposals from different countries.</p> <p>The rest have affirmed they have not modified the procedures of support and counselling.</p> <p>c) Other stages:</p> <p>During the lockdown period, they have adapted the training programme and the informative sessions to an online mode, as well as the follow-up reports, that were endorsed and sent online and digitally signed. Besides, they have interviewed the families and the children by video calls, specially when the technical team had met already met them. Some of them have even continued sending the follow-up reports by e-mail after that period, exceptionally.</p>
	<p>IV. USE OF TECHNOLOGY</p>
	<p><u>Both States of origin and receiving States</u></p>
<p>6.</p>	<p>Has the use of technologies (e.g, videoconferencing) evolved in the adoption procedures in place in your State since the outbreak of COVID-19 in your State? Please specify:</p> <p>a) any benefits and challenges:</p> <p>Most of the Regional Central Authorities have implemented digitalised procedures and communications with the families, such as the informative interviews, the training sessions or the assessment, that have increased the contacts with the families in order to assit them and give them a greater support, offering a sensation of closeness between the Public Administration and the families, as well as a greater accessibility to these services. They have found a good attitute towards the use of</p>

these tools, that have been very useful during the lockdown, as the calls and development of videoconferences or online meetings are easier, even if they require some experience and preparation of the organiser, when he or she is not familiar with all its possibilities. They have affirmed thus that using this technologies have allowed them to proceed with the adoptive processes and have improved their management.

Even some decisions were taken online in the technical committees and they are still working online.

Some of the Regional Central Authorities have pointed out that the use of technologies is efficient for individual training activities, even though they find it inadequate for activities such as interactive training, group dialogues or practical training workshops. On the contrary, they find it very useful to ask direct questions to the technical staff from other competent authority or to the families.

In other cases, they explain they have used these communication technologies between members of the adoption team, but not with the prospective adoptive parents, even if they think they are useful tools, whose use has to be enhanced, not only during health crisis, but in general, because it avoids so much travelling and allows to coordinate agendas.

The inconvenients they have found is some families don't have access and/or the ability of using this technologies and also the training sessions are always more positive face-to-face, given the didactic and human approach. And some of the Regional Central Authorities added they don't think it is suitable for interaction with children on follow-up, as it creates a very artificial and unknown environment. So, only in cases when the children had already met the adult person physically, the communication gets a little bit easier.

The challenges now would be to take advantage of the possibilities this technologies provide to prepare the children who wait to be adopted, if it is possible to find a right way to use this technologies at this purpose. Also to implement the digitalisation of the apostille and legalization of the documents and, finally, to improve their general efficiency.

b) if your response to **question 72** ("Use of new technologies") of the [2020 Questionnaire on the practical operation of the 1993 Adoption Convention \(Prel. Doc. No 3\)](#) has changed:

Some of the Regional Central Authorities have expressed there haven't been any changes.

Some others have admitted the advantage was that it allowed to continue the activities of information, assessment and suitability certificate activities in order to proceed with the adoption processes.

The use of new technologies have also prevented the accumulation of assessments of suitability resolution procedures.

They affirm they have started using videoconferences from the Covid-19 crisis, as before they had only used videos of the prospective adoptive parents introducing themselves to the child assigned, or to tell children's stories to the child, in order to start to prepare him or her.

The challenges they find is the use of not usual tools that was not planned for the development of the regular information, assessment and suitability study activities in

	<p>an online mode, as well as the availability of the technical staff in charge of the assessment to use new technologies for the online activities or even the availability and compatibility of these tools between the technical staff and the families.</p>
<p>V. POST COVID-19: LOOKING AHEAD</p>	
	<p><u>Both States of origin and receiving States</u></p>
<p>7.</p>	<p>Has your State developed any practices during this pandemic period that would be useful to mainstream into regular work practices? If so, please elaborate on what those practices are and how you plan to go about mainstreaming them into regular work practices:</p> <p>The documents digitalisation and the online processing of all the possible procedures. Also the online training and meetings, that are more effective and reduce the travelling time.</p> <p>A greater contact through electronic means with the countries of origin, specially with some of them that have expressed their will to do so.</p> <p>Some of the Regional Authorities affirm it would be possible to avoid most of the written communication and to replace it by an electronic platform, as in some other countries. The CARING system, in India, for instance, could be generalized.</p> <p>They also think in the future they would use videoconferences for informative and training activities, both aimed at the general public, as at the prospective adoptive parents. They will, as well, take advantage of the possibility of video calls to the colleagues from the countries of origin.</p> <p>Finally, some of them affirmed the health crisis has not affected their regular way of working.</p>
<p>8.</p>	<p>Please share any good practices and lessons learned by your State which may be applied in the event of another pandemic or similar state of emergency:</p> <p>The disposal of resources and technological tools at the Public Administration, in order to proceed with the adoption processes or other procedures related to children in order to protect their interests, as well as the interests of the families affected.</p> <p>To establish and improve the necessary coordination between the actors involved in the intercountry adoption processes: Accredited Bodies, Central Authorities and families, in order to overcome the problems that could arise and to strengthen the links and coordinate the different working methods.</p> <p>To be updated in the use of new technologies and the development of teleworking.</p> <p>To ease the documents submission by electronic register, to replace paper documents.</p> <p>To intensify the exchange of safe e-mails between competent authorities to replace postal mail and paper documents.</p> <p>To ease the videoconferences for not complex issues between technical staff as well as with the prospective adoptive parents.</p> <p>To seek procedures so that the digital signature with apostille could be recognised</p>

	by the countries of origin as, for the moment, they require physical apostille.
VI. ANY OTHER COMMENTS	
	<u>Both States of origin and receiving States</u>
9.	<p>Please insert here any other comments you may have:</p> <p>They affirmed that the current situation is terrible, but it is also a lesson of life to keep proving that all the professionals involved have to continue working for the children's well-being, despite the difficulties we are finding.</p> <p>Some Regional Central Authorities add it would be very helpful to count with a communication channel about the situation in the countries of origin, through The Hague Office, to communicate the situation and measures taken by every country of origin related to the health crisis and they think it could be a permanent communication point.</p> <p>Other Regional Central Authorities have affirmed the answer of the child protection system cannot be to stop the activity, as well as it has happened with health and education, but to find the guarantees not to delay the right of this children to live within a family.</p>