

## **Issues Paper- Establishing an Institute of Open Adoption:**

General feedback, related only to area of personal practice knowledge.

### **Issue 1**

#### **How should the proposed institute become a leader in the development of best practice for open adoption?**

The institute needs to be recognised as a peak body for adoption matters, with endorsement from FACS, ACWA and NGO's. It also needs to be positioned to seek endorsement and support from Adoption bodies throughout NSW, Australia (such as Adopt change) and possibly internationally.

Whilst having endorsement and support, it also needs to be impartial and governance opened to members outside the lead organisation. The governance structure needs to be robust: with a governing body holding overall responsibility and clear lines of policy and practice and development, research, implementation and review/assessment for all areas of the institute.

The lead agency should have good community relationships and be able to demonstrate an ability to provide a wide spectrum of services, access a wide variety of funding models and the implementation of quality service models.

The research arm should be able to demonstrate previous involvement in peak body research and implementation of community based interventions

### **Issue 2**

#### **What are the core activities that should be undertaken by the institute?**

### **Issue 3**

#### **What is the most appropriate services delivery model for the proposed institute to achieve its objective and why.**

#### **Issue 5 should the institute play a role in the evaluation of individual interventions and the provision of expert evidence in individual matters? Why or why not**

Considering the models put forward in the paper: the Hadley Centre for Adoption and Foster Care studies and the Institute of Child development would be a preferred option. In particular the incorporation of research into brain development and therapeutic care in interventions and expert advice is required to ensure adoption is not only the best option for permanency, but that agencies have the knowledge and ability to develop the relationships required for open adoption to be successful for the child short and long term.

Using this model also allows for the provision of 'expert advice' to the Supreme Court; combining research, practice, clinical interventions and assessments to the court, however it does raise many more questions about the role of the institute and how this works in current practice. It may feel like the role of current accredited adoption agencies is being replaced by the institute, so the caution would be for

very clear roles and boundaries.

For example it raises questions such as: Does the institute become responsible for an assessment or for just supplying expert general opinion to the court? Adoption legislation outlines the assessor has to review all files, so what does that mean for the adoption assessment itself? The institute would be required to review information and conduct interviews to provide an expert opinion, so does this add to the adoption assessment process or does the institute become the external assessors who provide a report to the agency and Supreme Court on the best permanent outcome for the child.

Despite the questions and issues this would raise, long term outcomes for children would be better placed if the service delivery model was able to use research to develop best practice policies and a frameworks for open adoption and building therapeutic care relationships, that can be incorporated into current agencies practices, whilst also being able to provide an impartial, but expert assessment service on the best permanent care options. In a simplistic overview (that would need to be fleshed out) this would make the process of adoption holistic; agencies have evidenced programs that foster good child focused relationship with carers/adoptive parents and birth parents and the process of adoption is faster as the expert opinion satisfies the Supreme court- providing early permanency outcomes for children.

#### **Issue 4**

**What needs to be included in the tender process so the institute is in a sound position to receive funds from a combination of philanthropy, grants and service?**

Outcomes: long term benefits of good permanency planning reducing the need for intervention services throughout a person's life time.

Evidence: that the institute will be in a position to provide practice, training, process that will provide these long term benefits, will encourage support from most funding areas.

#### **Issue 6**

**What priority areas of applied research should be addressed by the tender? What needs to be done in the formation of the institute to ensure these specific functions of applied research are to be undertaken?**

Open adoption messages: across Government, non-government agencies and within the community at large, incorporating a change management approach to ensuring the institute and its function is accepted.

Early permanency planning assessments: how Government and non-government agencies can work together and with families to ensure planning outcomes are timely, well managed and in the best interest of the child.

How therapeutic interventions and brain development research can be incorporated into OOHC/adoption practice.

How evidence required by the Supreme Court reflects best practice outcomes for permanency planning

options for children (the why behind the requirements of legislation and court).

Long term outcomes for adoption: comparing outcomes on main domains such as health, education, work, and accommodation stability of adults who have left care to adults who were adopted. Also consideration to time spent in care or the time from removal from birth family to an adoption order being made, and comparing this to outcomes.

Comparison of intervention services, training, education and support provided to adoptive parents prior to adoption order and outcomes for the child.

Research on the long term relationship between children, adoptive parents and birth families

#### **Issue 7**

##### **How broadly should this term open adoption be interpreted?**

Adoption is a service to the child, so anything; attitude, person, relationship or piece of information, that fosters the development of the child's story, where they come from, where they are now and can help the growth of who they can should be incorporated into an interpretation of open adoption.

#### **Issue 8**

##### **What specific powers to access information and data should the proposed institute have?**

Any research needs to be approved as ethical and valid and comply with privacy laws. Perhaps only permission to contact people for consent to participate in research or have the agency involved contact people on the institute's behalf. There can be some agreement to access non identifying information: numbers of current adoptions at various stages, time in care, ages, demographics of birth parents, adoptive parents etc.

If the institute is to provide expert advice to court, then access to the files is required: this was raised previously as a concern as to whether this overlaps with current practice or replaces the current practice of adoption assessment.

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