

The Gap Between Knowing and Doing: Developing Practice in Open Adoption from OOHC in New South Wales

Executive Summary

Background

During late 2014, the NSW Government enacted changes to legislation to encourage consideration of open adoption for children placed in Out-of-Home Care (OOHC). These changes were driven by international research evidence indicating that children in OOHC who are adopted experience fewer placement breakdowns than those in long term foster care (Selwyn et al., 2006; 2015). In response to recommendations from KPMG (2013) and Deloitte and Second Road (2014) reviews at the time of implementation suggesting a need for sector culture change and capacity building in adoption from care practice to support the reforms, a study was undertaken by FACS to support the development of OOHC adoption practice and culture. The mixed methods study included responses to surveys provided by 614 practitioners (294 from FACS and 320 from NGOs), alongside in-depth interviews with a subset of 22 respondents.

The analysis presented within this document describes the study findings through:

- A conceptual framework which highlights the role of both individual practitioners and systemic factors in transitioning children and young people who are placed in statutory Out of Home Care (OOHC) to open adoption arrangements; and
- Key findings pertaining to service delivery in the open adoption from OOHC in NSW.

Conceptual Framework

A conceptual framework based on the study findings was developed to explain the conditions necessary for open OOHC adoption practice development (Figure 1). Four key practice drivers for adoption practice were identified to this end, being: **Capability** of the sector to undertake the casework associated with adoption; **Capacity** of the sector given the need to balance urgency in tasks; **Communication** skills necessary to support open adoption; and **Culture**, both personal and

organisational, which facilitates practice. These factors are deeply interconnected and must be present to some degree in order to achieve OOHC adoption.

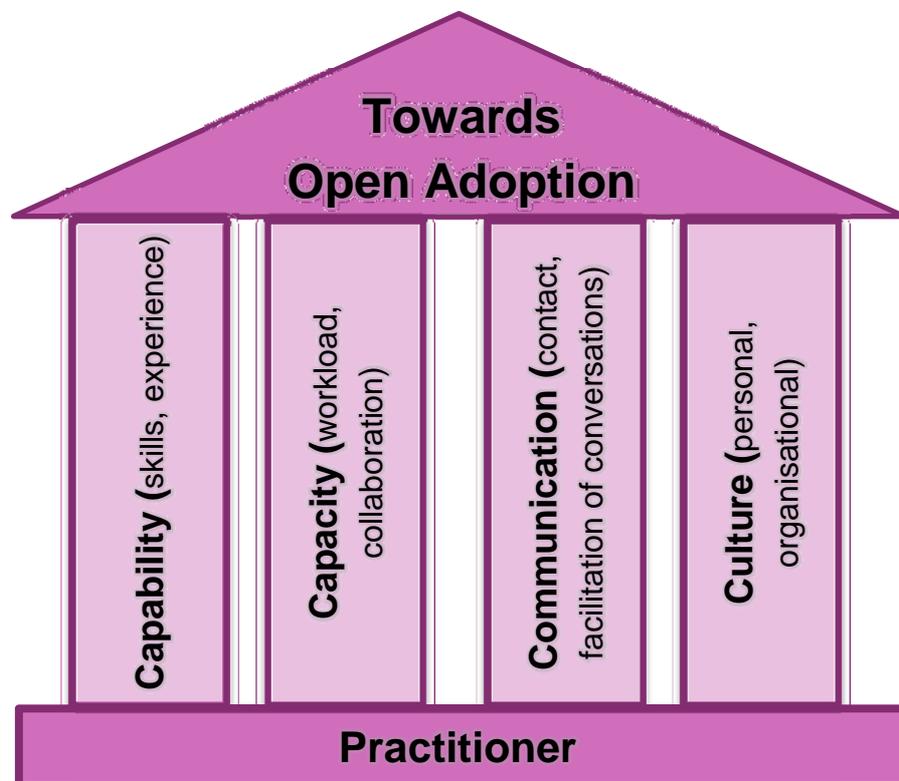


Figure 1. Pillars of Open Adoption Casework Practice

Key Findings

The study findings highlighted that practitioners are not opposed to the use of adoption from care to meet children’s permanency needs. However, a number of factors are necessary in order to deliver the high quality casework and relationship-based practice necessary to support open adoption. Study findings in relation to each key area identified in the abovementioned conceptual framework are presented below.

1 **Capability**

1. The child protection workforce in NSW is comprised of highly educated workers capable of implementing the practice that enables open adoption.
2. The child protection workforce in NSW is ‘polarised’ in experience. Half of the sector is entry level while around one third has four or more years experience in child protection. This places enormous pressure on experienced workers as key decision makers, and on entry level workers to become field-ready quickly.
3. The low rate of OOHC adoptions in NSW means that opportunities for ‘on the job’ experience in this casework are rare. In order to upskill and build

- confidence in *doing* this work, innovative ways of sharing on the job experience need to be developed across the sector.
4. The capability of managers is vital to enable open adoption practice work because they are keystone permanency decision makers, undertake task allocation and build local team environments.
 5. The sector needs to explore more effective supports for managers as well as inexperienced staff.
 6. There is a generally high level of sector understanding of permanency and adoption reforms, but a need for enhanced understanding of specific OOHC underpinning adoption policy, process and legislation.

II Capacity

7. There is a capacity gap between the '**knowing**' and the '**doing**' of open adoptions. On one hand child protection practitioners exhibit a high level of in-principle commitment to openness and good generalised understanding of permanency and adoption reforms. On the other hand practitioners exhibit less knowledge of the real-life application of open adoption reforms and practice.
8. High sector staff turnover results in accumulated skills and experience being lost, and the qualitative evidence of this study suggests this may impact the relationship-continuity between practitioners and client families in child protection.
9. The high stress and high workload operating environments of the child protection sector compromise the capacity to undertake open adoption work. The casework involved in progressing open adoptions represents high quality practice, regardless of if an adoption order is ultimately made. Exploring open adoption as a permanency option demands thorough family search action, meaningful life story work, high quality relationship building between birth and carer families and comprehensive recording of information. These are key components of good OOHC practice which can be lost in time pressured environments.
10. Practitioners perceive that the practice required to progress open adoption represents the lowest order priority at the frontline. They report that the pressing safety needs of children always take first priority.
11. In order to create capacity for open adoption work to occur, adoption-specific roles and teams are required.
12. The skills of Regional Adoption Caseworkers (RACs) are highly valued yet are used inconsistently across the child protection sector in NSW.
13. System capacity for adoption is tied to carer availability, capacity and diversity. 'Openness' needs to be better incorporated into all areas of carer recruitment, training and relationship-building across the child protection sector regardless of a carer's interest in adopting.

14. Practitioners perceive a low level of system capacity in the area of post-adoption supports. This poses a barrier for some practitioners in progressing open adoption and may impact carer interest and willingness to adopt.

III Communication

15. Communicating with children, birth families and carers is at the core of child protection casework. While practitioners **know** and affirm support for the key philosophical principles underpinning open adoption, they need support to **do** some of the intensive communication work which would enable open adoption.
16. Early and thorough family search action represents a core part of best practice child protection casework, including open adoption. Practitioners require support to undertake the associated communication work with families and agencies because it is particularly sensitive, labour intensive and complex.

IV Culture

17. There is a need for more structured collaborative decision making around permanency for children and young people to strengthen child focus, enhancing accountability, sharing professional expertise and minimising the risk of personal biases influencing adoption decisions. The UK model of permanency panels may support practice in this area.
18. Workplace culture can negatively impact the holistic assessment of adoption as a permanency option for children in OOHC. Managers play a leading role in shaping workplace cultures that are receptive to open adoption practice. Managers require organisational support in developing the skills necessary to achieve this.
19. There is a need for resources to inform and support permanency planning, including open adoption.
20. Birth certificate changes which see the replacement of birth families with adoptive families are perceived to be in direct contrast to the openness of current adoption work, and present an ethical barrier to adoption practice.
21. Synergy needs to be improved between legal processes and casework practices that enable open adoption. An overwhelming majority of practitioners identify a need for better information on court processes and procedures, and their implications for both relationship based casework and case documentation.

Implications for Practice

The findings suggest that in order for OOHC adoption practice to be developed, opportunities for skill development and training addressing capability, communication and culture needs must be provided to address current sector limitations.

Practitioners requested additional training in specific topic areas to this end.

The study also highlights that skill development initiatives alone, whilst essential, will not lift sector capacity to undertake open adoption from OOHC without addressing capacity issues. Structural supports are required to develop capacity alongside capability, communication and culture, including: increased numbers of specialised positions; increased opportunities for supported on-the-job OOHC adoption casework experience for early career workers; better supports for managers as leaders in the field; and improved support for permanency decision making through the use of structural supports, e.g. Permanency panels to support decision making.

Continued Work

As a result of these findings, the Open Adoption in OOHC Research Initiative team worked alongside other key stakeholders to develop content for the Open Adoption from OOHC Practice Innovation Forums delivered throughout February and March 2016. These forums focused on hands-on capability, communication and cultural skill development. This training was delivered as a roadshow series across the state, with approximately 600 NGO and FACS staff enrolled in one of these training forums.

A full evaluation report on the Innovation Forums is currently being drafted, which includes repeated survey data post-attendance to examine changes in attitudes post-training. Findings will be finalised prior to the cessation of the Open Adoption in OOHC Research Initiative team in June 2016.

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The Gap Between Knowing and Doing: Developing Practice in Open Adoption from OOHC in New South Wales

Full Report

Study Background

During late 2014, the NSW Government enacted changes to legislation to encourage consideration of open adoption for children placed in Out-of-Home Care (OOHC). These changes were driven by international research evidence indicating that children in OOHC who are adopted benefit from fewer placement breakdowns than those in long term foster care (Selwyn et al., 2014; 2006). Research also suggests that these children also experience better developmental outcomes (Thoburn et al., 2000), a stronger self-reported sense of security and belonging (Triseliotis, 2002), and stronger attachments to their carers (Selwyn et al., 2006).

Despite the evidence on the potential for children to benefit from open adoption, its uptake in Australia for children subject to long term protection orders who cannot be safely returned to their family or placed with kin remains low. Between 2014 and 2015, only 94 such adoptions occurred (AIHW, 2015). It is notable, however, that this rate has been increasing; a higher level of adoption from care occurred in the 2014 - 2015 period than at any point in the previous decade, and was more than 4 times that of ten years earlier. The vast majority (87) of these children were adopted from OOHC within NSW, demonstrating NSW's leadership in this area.

Some authors have postulated that the detrimental impact of Australia's past adoption practices, including the forced removal of Indigenous children from their families, the *Stolen Generations*, and the forced adoption of children born to young unwed mothers (Ainsworth & Hansen, 2009), have created a reticence among frontline practitioners to consider adoption as an alternative to long term foster placements (Tregeagle et al., 2012). It is, however, notable that Australia is not alone in a contentious adoption history; for example, the United States of America and the United Kingdom both have quite similarly contentious adoption pasts, yet have moved on to utilise adoption as a means of creating stability for children in care more frequently than Australia. Proportionally, 5.8 per cent of children in care were adopted in 2013 in the UK (Department for Education, 2013), and 12 per cent of children in care were adopted in the USA in 2014 (U.S. Department of Health and Human Services, 2014). Other potential contributors to the apparent reluctance of frontline staff to consider adoption as a placement option for children in care include

variation in the level of experience across the practitioner workforce, and the qualitatively different approach to casework in OOHC adoption, which may be perceived to be at odds with the goals of restoration that most practitioners work with families toward prior to receiving long term protection orders.

Research highlights that the unique social, emotional and workload challenges associated with frontline work in the OOHC sector directly influence the attitudes and existing practices surrounding open adoption in this sector of child protection activity. Independent reviews commissioned by the Department of Family and Community Services (FACS) at the time of Safe Home for Life legislative reforms identified that the OOHC sector was not well equipped to implement open adoption practice work because frontline practitioners required both education and better resources in order to meet the additional workload responsibilities that expansion of open adoption processes would bring (KPMG 2013).

In response to these recommendations from KPMG (2013) and Deloitte and Second Road (2014), a collaborative study was led by FACS to assess frontline practitioner knowledge and attitudes towards open adoption for children subject to long term care and protection orders. The study applied a mix methods approach to analysis of FACS and NGO practitioner sector attitudes and training needs.

Research Questions

The study was underpinned by three key questions:

1. What level of knowledge do frontline child protection practitioners have on the recent reforms relating to the permanent placement principles and open adoption of children and or young people in OOHC?
2. What are frontline practitioners' perceptions on open adoption for children and young people in OOHC?
3. What supports do frontline practitioners require, and how should they be targeted, in order to implement the legislative changes on adoption for children in OOHC?

Methodology

The study was conducted by the Open Adoption in OOHC Research Initiative team, Family and Community Services (FACS). The study used a mixed method research approach. An online survey instrument collected information and attitudinal data from child practitioners on their knowledge and perceptions of open adoption of children in OOHC. One-on-one qualitative interviews were then used to gather deeper insights on the experience and perceptions of frontline practitioners in child protection and OOHC settings.

Participants

Participants were frontline practitioners from both the government and non-government child protection and OOHC sector in NSW. State government-employed participants included caseworkers, managers casework, casework specialists and senior managers from the Department of Family and Community Services. Non-government workers included caseworkers, managers, specialists and senior managers working in agencies providing out-of-home care and adoption services. All of the above roles identified will be referred to throughout this report as 'practitioners'.

In total 614 practitioners (294 from FACS and 320 from NGOs) completed the survey measure alongside in-depth interviews with a subset of 22 respondents.

Procedure

Emails inviting participation were issued via an internal distribution list for FACS workers and via email networks hosted by the Association of Child Welfare Agencies (ACWA) for NGOs operating in the OOHC space. Recipients were invited to participate in the project in two ways; completing an online survey, comprising a series of Likert -style response and open ended questions as described below, and/or nominating for interviews. Ethical approval was obtained via the University of New England's Human Research Ethics Committee prior to recruitment commencement.

Instruments

Two instruments were used to collect data. A survey instrument was specifically developed to collect quantitative data, and a qualitative open-ended, semi-structured interview protocol was developed to guide one-on-one interviews. Both protocols included questions pertaining to a practitioner's demographic, employment and situational characteristics (e.g. role title and years in current role, employing agency, and primary work location). Participants were then asked a series of questions in both interview and survey about their:

- Knowledge of open adoption, the legislative reforms and their implications for permanency planning and open adoption;
- Attitudes towards open adoption for children in out of home care, including beliefs about likely outcomes, perceived benefits and concerns, perceived barriers for implementation of legislative reforms at individual and organisational levels, and intentions in future practice, and;
- Needs regarding supports for undertaking open adoption casework, including skill development for working with birth families, prospective adoptive families and children and young people.

Whilst the vast majority of the survey items were designed specifically for the setting at hand, the utilisation of standardised measures was also integrated where possible. Items from the Open Adoption Scale (OAS; Brown et al., 2007) were slightly modified for the New South Wales policy setting, with wording altered to ensure relevance for a NSW practitioner sample.

Findings

A conceptual framework is used to present key thematic findings obtained through both survey and interviews because this is both instructive and useful to frontline practitioners.

The conceptual framework broadly identifies the core preconditions which lay the foundation for good practice in open adoption for children and young people in OOHC. Additionally, the framework helps to explain the interconnectedness of OOHC adoption work, as it comprises a mix of individual practitioner behaviours and systemic factors or forces. Finally, the pillars of casework identified herein represent signposts for quality practice in the field of open adoption, and therefore provide a meaningful tool through which practitioners, administrators and managers might calibrate practice to support open adoption practice.

A conceptual framework for understanding open adoption practice work

The following model (Figure 1, page over) identifies four core pillars or foundations essential to the provision of quality open adoption practice work in OOHC settings. While each of these pillars will be discussed in turn below, it must be noted that study findings suggested each of these factors or drivers are deeply interconnected, and must be present to some degree in order to achieve progression of an open adoption.

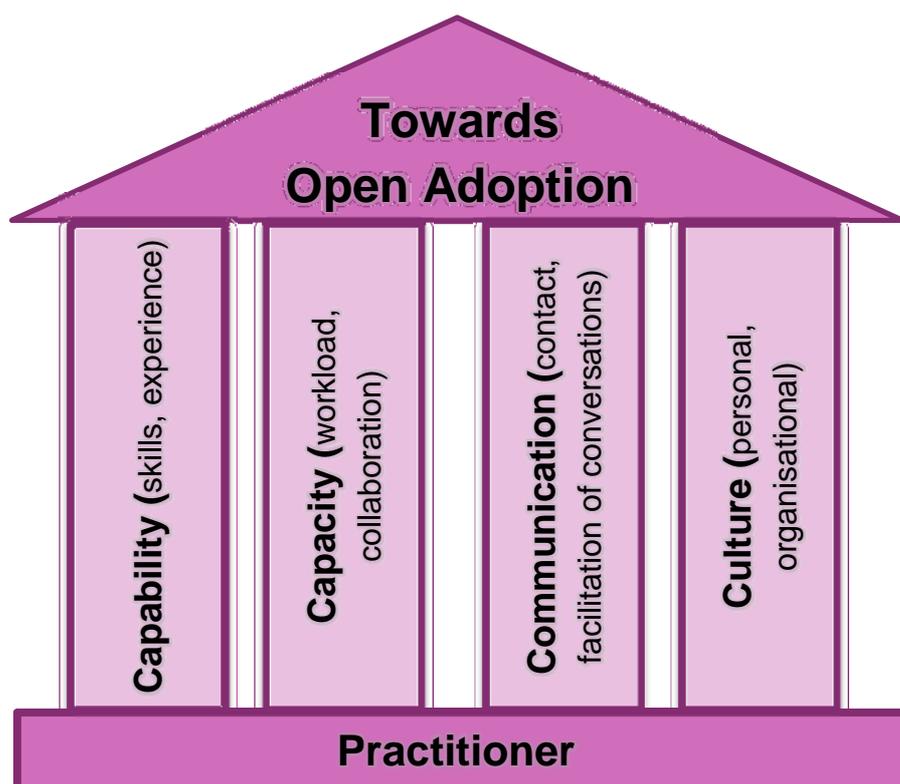


Figure 1. Pillars of Open Adoption Casework Practice

Key findings

1 Capability

The progression of open adoption requires a labour force of skilled and experienced people ready to assume the complex responsibilities associated with the work. While many different workers contribute to the progression of an OOHC adoption, this paper focuses exclusively on the work of frontline practitioners (caseworkers, specialists, managers and senior managers) in OOHC settings, and the level of capability for open adoption work which exists within these work units across NSW.

1.1 Workforce characteristics

The characteristics of the child protection and OOHC workforce who responded to the survey (Table 1) highlight a number of important key findings with regard to capability.

Table 1. Workforce Profile of Respondents

Respondent characteristics (<i>n</i> = 614)	%
Gender	% (<i>n</i> = 569)
Female	88
Male	12
Level of experience in current role	% (<i>n</i> = 598)
<1 year	26
1-2 yrs	23
3-4	13
4+	35
Other	3
Highest level of education attained	% (<i>n</i> = 567)
Secondary school	2
Cert IV	4
Diploma & assoc diploma	11
Diploma & FACS top up course	3
Degree	52
Postgraduate degree	28
Workforce profile	% (<i>n</i> = 500)
Caseworker (child protection)	19
Caseworker (OOHC)	40
Specialist	8
Manager/team leader	29
Executive	4
Number of adoptions involved with in past 5 years	% (<i>n</i> = 523)
None	52
1	15
2	9
3	5
4	4
5	3
6+	12

- **The child protection workforce in NSW is comprised of highly educated workers**

The survey findings suggest the child protection workforce is highly skilled with more than 80 per cent are degree or post-graduate level trained. These staff come from a range of disciplines which are directly relevant to child protection work including: social work; psychology; social welfare; education and early childhood development. Published research in the child protection field highlights that having a highly skilled

workforce, composed specifically of disciplines with a strong theoretical base relevant to human service work is important to the provision of quality practice. As a number of researchers note, when seeking permanency outcomes for children, if practitioners have a range of higher order capabilities and baseline theoretical knowledge, this strengthens the ability of the sector when dealing with the complexity inherent to human service work (Barbee et al., 2011). Based on the high level of education and diverse skill set observed in respondents, the New South Wales workforce seems well placed to meet the challenges.

- **The experience level of the child protection sector in NSW is ‘polarised’. The sector has many highly experienced workers, but also many entry level workers**

It is important to note that while a high level of baseline skill exists across the NSW child protection sector, the workforce appears to exhibit features of experience polarisation. More than one quarter of all survey respondents reported being in their current child protection role for less than one year, with one third reporting having been in their current role for more than four years. The survey data indicates that almost half of the entire workforce (49%) have been in their current role for two years or less. This reflects the observation made by a number of studies of professional ‘burnout’ (e.g. staff exit). In community service sectors particularly, capability of the workforce has been noted to be maintained by a high level of labour market churn, which includes recruiting new staff frequently with only a small number of core staff staying long term (Bretherton, 2010). Any training efforts must be regularly repeated to take into account staff turnover.

Many practitioners highlighted challenges arising from high staff turnover and related low expertise retention in the child protection sector in NSW. While it might be argued that new staff can be trained in key areas of policy reform in open adoption at the job entry level, it is important to note that practitioners develop expertise over time, with practice experience and desk-based knowledge of policy interacting to shape a practitioner’s skill base. The following quote highlighted the difficulties in expertise retention amongst the sector, suggesting ongoing training opportunities are necessary to support practice:

“I know there was lots of training on adoption seven or eight years ago when permanency planning first came around as a concept. So there was a period when caseworkers were skilled up on having those early conversations with families and skilled up on when to consider adoption and when not to. And then that training fell away and any caseworker who’s been around less than 8 years, which is probably 70 per cent of the caseworker population, has got no knowledge about that. Having that information and training readily available and updated over time, and not just like a spurt of that training and then forget about

it [is necessary]. Because that information is then lost..." (manager, metropolitan area).

- **Staff turnover creates challenges in maintaining a high level of skill capability in the realm of open adoption practice because accumulated skills and experience are continually lost**

Survey data further affirms the need for training and information on open adoption and permanency reforms to be continually refreshed. As Table 2 indicates, just over half of those surveyed had received training and information on reforms associated with adoption from OOHC. It is highly likely that staff turnover within OOHC units contributed to the low level of training participation reported by these workers. As indicated earlier, half of the child protection workforce surveyed had been in their current role for two years or less.

Table 2. Training Received on OOHC Adoption

Access to training	% (n = 423)
Have received training or information on the reforms related to open adoption from OOHC	52

- **On the job experience provides child protection workers with skills essential to the provision of quality practice in open adoption work**

Published research affirms the necessity for frontline practitioners who are undertaking adoption work to develop skills through on-the-job training and experience. Studies undertaken overseas note that developing skills on the job and building a base of "experiential knowledge" is essential for practitioners who undertake adoption work. In the field of child protection work particularly, it is argued, where practitioners experience knowledge 'gaps', previous experiences are used to shape responses and ultimately longer term practice behaviour (Ryan et al., 2011; Kessler et al., 2005).

Previously noted staff turnover creates challenges for the child protection sector. In working with children and families consolidating skill development on the job, deepening understanding of the diverse circumstances of families, and broadening knowledge and understanding of the needs of individual children in care represent essential tasks. When staff exit this knowledge is lost, and this creates challenges for OOHC work units. The need to provide opportunities for skill development in adoption related casework is apparent.

"...in the past OOHC workers hung around for a while. They developed a lot of expertise. They developed personal knowledge about the kids that they

worked with, that extended over time, you know, decades. Whereas now the younger workforce is much more mobile. So we don't have much continuity in our work with kids and I think that's a problem" (caseworker, outer metropolitan area).

1.2 Role of managers in open adoption from OOHC

Strengthening the capabilities of managers across the child protection workforce is important for future skill development in open adoption. As the following qualitative commentaries show, the need to develop workforce capability in the area of supervision of open adoption cases is widely acknowledged by practitioners across the child protection sector.

- **In the field of open adoption practice, the capability of managers is particularly important in the provision of high quality open adoption practice work**

Managers are essential to open adoption practice because they can help practitioners to identify cases in which open adoption would represent the best permanency option for a child. Managers play an important role in guiding practitioners through the 'troubleshooting' of complex matters which underpin open adoption practice. Practitioners also note that manager endorsement for an adoption order is critical because managers prioritise workloads across a work unit and make final recommendations for children with regard to permanency. Without a supportive manager, frontline workers felt they could not devote the time or resources necessary to undertake the work which underpins adoption from OOHC.

"You may think, feel and identify that adoption is the best option for this child, but unless you have a manager who can help support you in putting forward that recommendation and doing that work, it goes nowhere" (caseworker, regional area).

"With adoption in particular, the manager is important. Unless a manager has philosophical support for adoption, it will not happen" (adoption specialist, regional area).

"Even I would say quite often the most effective ways are through managers, they're the ones that go 'remember to do this, remember to do that' I think training for them to help caseworkers have those conversations would be an easier way". (caseworker, metropolitan area)

In reflecting on the high proportion of entry level caseworkers currently in the field discussed previously, the need for managers capable of directing and supporting the undertaking of open adoption work becomes even more pronounced. As one practitioner notes:

“Managers delegate work, they decision make. What we have right now is no middle level role to support that front line, that means that MCWs spend a lot more time in the field supporting inexperienced staff. This means that people are spread too thin. Adoption cases are time consuming and a lot of work, so it is difficult for managers to devote time to that when you have a team of people who may not be that experienced in child protection matters”
(caseworker, metropolitan area).

Given the essential role of managers in the adoption process and the time consuming nature of high quality OOHC care service, ongoing targeted training and efforts to support adoption practice development at this level is essential to support adoption from OOHC.

1.3 Awareness and understanding of open adoption reforms amongst practitioners

- **Child protection practitioners exhibit a high level of generalised understanding of permanency and adoption reforms, but weaker knowledge and understanding of legal processes underpinning open adoption**

The survey included a range of questions on practitioner understanding of key areas of open adoption practice and reform in NSW.

Practitioners reported high levels of awareness and understanding of broad policy and practice in adoption from care. Over 70 per cent of practitioners indicated they held a sound understanding of the new permanent placement principle reforms. In addition, over 70 per cent of practitioners surveyed reported a sound understanding of permanency planning options for Aboriginal or Torres Strait Islander children, and over 80 per cent of practitioners indicate they maintain good understanding of why adoption does not represent the preferred placement option for Aboriginal or Torres Strait Islander children (Table 3).

When it comes to understanding adoption policy, process and legislation associated with open adoption however, practitioners express hesitation. Only half of all practitioners surveyed indicated they have a sound understanding of dual authorization of foster carers. Only just over one third of practitioners surveyed (37%) indicated they have good understanding of court processes and procedures involved in open adoption from OOHC applications. These findings provide insights on areas where additional training or guidance and materials could support sector practice. A module on applying the permanency placement principles during Care Plan development, including a panel consisting of a local RAC, legal officer and

manager casework was thus included in the Adoption Practice Innovation Forums implemented in early 2016 in direct response to these findings.

Table 3. Awareness of Open Adoption Policy, Process and Legislation

	Agree	Neither	Disagree	Total
Perceived level of understanding of key areas of policy	%	%	%	%
I have sound understanding of new permanent placement principles reforms	72	15	13	100 (n= 532)
I have sound understanding of the new restoration timeframes	52	24	24	100 (n= 530)
Perceived level of understanding of key legal processes & carer authorisations	%	%	%	Total
I have sound understanding of what dual authorisation of carers entails	50	21	29	100 (n= 530)
I have good understanding of court processes & procedures involved in open adoption from OOHC applications	37	25	38	100 (n= 488)
Perceived level of understanding of open adoption and Aboriginal and Torres Strait Islander children and young people	%	%	%	Total
I have good understanding of why adoption is not the preferred placement option for Aboriginal or Torres Strait Islander children and young people	84	9	7	100 (n= 493)
I have sound understanding of the permanency planning options for Aboriginal or Torres Strait Islander children	73	14	13	100 (n= 530)

2 Capacity

The provision of high quality open adoption practice to children and families is contingent on a number of connected factors. Lifting the capacity of the system to undertake open adoption work requires addressing the sector's capacity across many different parts of the child protection system. Qualitative interviews conducted with practitioners provide powerful insights on the way in which different parts of the NSW child protection sector work in concert to manage, prioritise and progress open adoption work.

2.1 Practitioner capacity to undertake adoption work

Practitioners highlighted a number of barriers to both OOHC adoption casework and high quality OOHC casework in general, which are described below.

2.1.1 'Crisis' versus 'safety': the dilemma of practice capacity in OOHC contexts

At interview, practitioners suggested that OOHC work can be highly stressful with finite practice capacity. While working with children and families can be very personally rewarding, it is also intensely challenging. OOHC work units are required to provide support to a number of families simultaneously.

“Workload varies with a minimum of 8-9 cases or families- this could mean more than one child in a family at a time” (multicultural caseworker, metropolitan area).

“you’ve got another half a dozen kids that you’ve got to figure out what to do with, or 13 or 14 or whatever the case load is.” (caseworker, regional area).

“The reality is - in our organisation - the act of removing means a lot of decisions are pragmatic and don’t represent best practice. That’s the hardest aspect of it... managing time is a huge challenge”. (adoption specialist, remote area).

The impact of capacity limitations on OOHC adoption was evident in participant responses, as described below.

- **Practitioner capacity to undertake open adoption practice work is constrained by the high stress and high workload operating environments of many OOHC work units**

On a daily basis, OOHC practitioners must make decisions about the safety of children. A key responsibility of practitioners in OOHC work units is focused on identifying appropriate placements and managing placement breakdowns. Practitioners report difficulties in balancing these emergent crisis tasks with the ongoing work required to progress adoption from OOHC.

OOHC practitioners reported that they prioritise practice work in ways which identify apparent 'first order' priorities (families at absolute crisis point), 'second order' priorities (children and families on the brink of crisis, and requiring closer observation and more intense support/s) and 'third order' priorities (children in safe and stable placements). Throughout the qualitative interviews, practitioners highlighted the personal and professional challenges that prioritising work within OOHC posed. The use of terminology such as 'triage', 'critical', 'breakdown', 'crisis-driven pace' and

'emergency' as common vernacular amongst practitioners in this space highlights the inherently challenging nature of balancing priorities in OOHC work.

"Certainly the triage role is an ongoing stream of really difficult things to read, and that's why we don't last there very long" (caseworker, regional area).

"...our case workers with all the good intentions in the world are operating in an environment where other things need to take priority. For kids who are in stable placements, they don't need us breathing down their necks. OOHC should not be crisis driven, and it is. When kids abscond, kids run away, when something breaks down, practitioners have to respond to this, they must, but it creates crisis mode. We have to manage those crises, it's not policy but is practicality and in that context, adoption just cannot occur because you are dealing with something that needs to be resolved for the safety of the children involved" (caseworker, metropolitan).

"You know in the last week this office has had countless placement breakdowns due to carer issues. We've had children staying in hotels because there aren't any placements suitable for their needs. So in that kind of context you have lots of staff turnover, and lots of burn out, vicarious trauma. You are managing a lot of complexity. A lot of deadlines. It's a broken system" (caseworker, outer metropolitan).

- **Practice work that progresses OOHC adoption represents a lower order priority at the frontline than crisis response**

Practitioners report that children who are deemed 'unsafe' will naturally be prioritised over children who are perceived to be in safe, stable placements. This has the potential to impact the exploration, development and progress of adoption as an option for children in OOHC, in two ways. Firstly, the routine casework including administrative work and investigative tasks which are essential to progress adoption (e.g. searching for and locating a birth father) are not always undertaken as comprehensively in the OOHC environment as they could be. Secondly, the exploration of deeper level of insights about a child's physical, social and emotional needs, which might be gleaned through closer relationship-based work with both birth families and a potential adoptive family – are either not gathered, or there is limited scope for workers to professionally reflect on the material gathered.

"It's low priority work in the context of – no, this kid's fine, this kid's doing well, well we need to focus our attention over here on this kid over here who's not fine and who's not doing well" (caseworker, metropolitan).

"In this child protection, crisis-driven context in a rural area, where you don't have any resources anyway, I'm sorry but adoption comes right at the very

end of the line. And it's not that people don't want permanency and stability" (caseworker, remote area).

"I think really it's just a matter of resources... Child protection always gets priority and I understand the reasons why. But at the other end of child protection is adoption, and I think adoption should have some sort of priority" (caseworker, regional area).

"Some CSCs have allocated OOHC case workers, and they're often dealing with placement breakdowns and other commitments, and trying to get all of that kind of work done. Whereas an adoption task might just be a little less urgent. It might be urgent from my perspective, but from theirs, it's not. I think that's one of the challenges they have, and that makes my work a little more challenging. And what happens in the end, I usually end up doing the task myself...." (adoption specialist, regional area).

"It's relationship based practice but nobody does it because it's hard. It's challenging. I go home and my brain is ticking, I practice self care but I remember in my CP [child protection] days I'd wake up in the middle of the night and take work home. But in this position my kids are safe. If they weren't safe I'd be taking things home and be anxious about the next day and having that conversation. I have time to make that conversation, no one will die" (caseworker, metropolitan area).

Good quality OOHC casework was noted to be essential to the progression of OOHC adoption. Due to the crisis driven nature of OOHC as previously described, practitioners felt that this work was often rushed and additional support for these activities occur would be of use.

"When considering adoption, they need to know the impact of not doing things at the beginning and what that means at the end. I'm lucky I have survived nine years so I can see what I've done and would do things differently now as I know better. But most people don't know better- they may have been in the Department [for only] 18 months". (caseworker, regional area).

- **Family finding and understanding the network of family relationships in birth families represents a core part of OOHC casework essential to adoption progression**

In establishing and exploring positive collaborations with families, practitioners note the need for a high level of knowledge and understanding of the family and the individual dynamics within that family. This information helps the practitioner develop a picture of the breadth of birth family relationships which might represent key placements or, in the case of adoption, contact points for the child. As these

following excerpts highlight, practitioners acknowledge that finding birth family who may have lost ties with a child is part of the practitioner's responsibilities, but this is intense work which requires intense time from practitioners. While practitioners place immense value on this work, the day to day realities of balancing workload is also a factor undermining the ability to 'do' search work which supports open adoption processes. Notably it was felt that the NSW Children's Court did not demand the same level of family search action evidence as that required by the Supreme Court during adoption proceedings.

"...this is not mickey mouse searching, it's not like the searching we have done in the past... We need to explore every avenue and go down every rabbit hole to find family if they exist. This has to be done, so that the child at some point, if he or she ever wants to come back and look at those records, they can say – they looked as hard as they could, they really did try to find my family for me" (adoption specialist, remote area).

"It worries me because we don't do well enough finding families" (adoption specialist, remote area).

"...we rarely consider others. For example, if mum was significantly unwell or dad whatever, it doesn't mean grandma is, it doesn't mean aunty is. So that openness in contact doesn't have to be with just two people. Sibling contact. We can't even do sibling contact properly. How do we maintain children's contact with their siblings? I mean if children have different fathers, they're often in different places, they're with different families" (caseworker, remote area).

"I had a case recently where the mother had the child and hadn't had any contact since the child came into contact, and she'd been off the scene for about 5 years. And we were right at the end of the adoptions process. So the matter was filed in court...we'd previously written to the birth parents, but there was no response. But once those papers were filed, there was a response. So those kinds of instances are quite challenging from my perspective. You know, having to work out where we go from there, when we're right at the end of the process" (adoption specialist, regional area).

It is notable that Permanency Panels similar to those modeled in the UK child protection system could provide one prompt which elevates the priority of adoption casework, and may ensure that thorough permanency planning casework is undertaken for all children in care. However, the study findings would suggest that without additional supports, it is likely that the limitations of resources which necessitate crisis-response driven casework would remain even with these prompts in place. In addressing the sector's need for family finding skills, the Office of the Senior Practitioner has recently engaged USA based family finding expert Dr Kevin

Campbell to provide intensive training. In early 2016, Dr Campbell provided training to a group of staff regarding family finding, which may also assist in meeting this casework need which is highly relevant to OOHC more generally, alongside adoption from care.

In the context of these challenges, practitioners note the value of the supports rendered by specialist workers to the frontline to be absolutely essential to open adoption work, and it is to this issue the research findings turn next.

2.2 The contribution of specialised adoption roles as part of system capacity to undertake open adoption work

Across the qualitative interviews, specialised adoption roles including RACs, adoption casework specialist roles and adoption specific teams were noted to be important in supplementing and guiding open adoption work being undertaken in OOHC units.

- **Regional Adoption Caseworkers (RACs) and adoption specific roles and teams as keystone roles in the progress of OOHC adoption**

Practitioners indicated that specialised adoption support roles lift the capacity of the sector to undertake adoption work because they are effectively quarantined from the crisis response work. Further they have the capacity to lift the level of quality associated with casework to an 'adoption-ready' standard of proof required by the Supreme Court.

“Adoption work, because it’s not crisis driven, tends to be low on the list of priorities... so we weren’t getting the level of work done in adoption that we felt we needed to, particularly for very young children who have entered care very early and achieved permanent placement very early. Them just remaining in OOHC for many years was essentially not appropriate” (adoption specialist, metropolitan area).

“Imagine how many more (cases) would be suitable (for adoption) if we actively pursued them. If every team had a caseworker that JUST processed adoptions or every CSC had an adoption caseworker that would make a big difference. A person to be quarantined to do that work” (manager, metropolitan area).

“RACs are essential... You could double the number of RACS straight away and the field, and that’s what is going to increase the rates of adoption across the board” (caseworker, remote area).

“RACs are the only reason adoption is progressing at all” (caseworker, regional area).

“If we want improved outcomes on adoption, resource it properly. Employ more RACs” (caseworker, regional area).

RAC roles were suggested to be typically held by seasoned and experienced workers who have a knowledge base which spans both court process and relationship-based practice, each of which represent core areas of activity underpinning high quality open adoption work.

“You need to have at least two – adoption workers – in every CSC. Have persons that can do the assessments, persons who can do the whole process, from go to whoa. Then you’ll see outcomes. You would have specific adoption caseworkers. Like you had the foster care support caseworkers, you would have the adoption workers. That’s what you need” (caseworker, remote area).

Specialised roles such as RACs can offer guidance, assistance and collegial support to the caseworker throughout the open adoption practice journey, if these specialists are contacted early in the casework process. This was noted to reduce delays to the progress of open adoption cases down the track, because good quality work has been undertaken on behalf of the child throughout their time in OOHC.

“Having people on the ground in adoption is essential. Like imagine if the adoption worker was integrated into the CSC and was the person annoying everyone about adoption. Like our data person walks around asking if anyone needs help. She’s that presence about data and emails reminders. Integrating them into the CSC, to be a physical presence for adoption, maybe that could be a way of doing it”. (caseworker, metropolitan area).

“I try to do joint work rather than take it away and do it for them. I have the experience working in adoption but a caseworker might only have one adoption case...I have the experience of other cases to try other things” (adoption specialist, metropolitan).

- **Many RACs face significant logistical challenges because they are required to travel long distances to provide services and support**

Practitioners identified a wide range of factors which impinge on specialised caseworkers, such as RACs, assisting in adoption matters. The first set of challenges might be collectively described as distance challenges which face many workers in regional and remote areas, and which manifest in some quite specific challenges for RACs.

“I also have to travel a lot... I travel between the two offices [located 200km apart], and I undertake group supervision. It means I am regularly travelling, operating on a fortnightly cycle”. (adoption specialist, regional area).

“The secret needs to get out – we have one adoption worker in this region, the entire region. Then six to eight weeks later she says yes they’re ready, or no they’re not”. (caseworker, regional area).

“Look at the example of RACs in regional areas alone. We have a RAC that works between [town A], [town B], [town C] [a distance spanning over 600km]. A four hour drive is common”. (caseworker, remote area).

- **The skills of RACS are used inconsistently across the child protection sector in NSW**

In some regions, the expertise of RACs is not only valued, but their expertise is actively solicited by managers and caseworkers alike. In other cases, interviewees report that their local work units do not actively consult around consideration of adoption at either intake points to OOHC or as cases progress. While the reasons underpinning this lack of engagement are complex, and will be discussed in a following section, it is worth noting the observation that caseworkers themselves cite variability around the use, and indeed under-use of RACs.

“RACS need to play a much greater role” (caseworker, regional area).

“I wouldn’t call it active resistance, it’s more like passive resistance. We don’t actively consult with RACs here because it doesn’t come up, because adoption hasn’t occurred here much...I’ve only ever seen one adoption and I didn’t work on it so I don’t directly know all the details, but I do that happened because the carer was pushing for it”. (caseworker, remote area).

Ensuring the availability of RACS or other specialist adoption roles in accredited NGOs, and consistency in their use across areas, must be considered in order to adequately support OOHC adoption.

2.3 Capacity to progress open adoption, is impacted directly by a range of issues surrounding carer supply

Open adoption of children from OOHC cannot occur without suitable carers. The following section summarises a range of important insights surrounding carer supply, and how this impacts the form and content of practice work in the field of open adoption.

2.3.1 Carer supply: key observations

- **There are significant shortages in carers evident in many locations across NSW**

The shortage of carers across the sector in NSW was noted by practitioners as being an issue for OOHC and adoption:

“We don’t have a lot of carers. We don’t have carers so we take what we can get” (caseworker, metropolitan area).

“Kids over the age of 3 over the last few months, placements are fewer and further between. Especially [region A] and [region B] have had to put a lot of kids in hotels. It’s that bad. For a 5 year old, a five year old little kid - it’s crazy.” (caseworker, metropolitan region).

“The past couple of weeks we have been saying to caseworkers “I get you have to remove if you have to remove, it is what it is, but you have to really consider family and all other options because if you bring this kid into care they will go a weekend or until tomorrow then have to go somewhere else....One case at a CSC, the court restored back to the mum because there was no stable placement for the kids. The better outcome was for the kids to remain with the mum who had issues with her own parenting capacity over foster care” (caseworker, metropolitan area).

- **A shortage of carers directly impacts the provision of high quality practice which might be used to underpin open adoption**

The low levels of ‘carer supply’ impacts the quality of practice in OOHC work units, and in turn, this impacts open adoption. Interview quotes provided below highlight the very real moral and ethical dilemmas which practitioners face every day in seeking to source and develop the pool of prospective adoptive parents across the state.

“There’s so few carers available now that we don’t match placements now”. (caseworker, metropolitan area).

“One of our biggest challenges in our funding process is actually contact. I’ve actually made a couple of errors not realising what the outcome would be. So for instance, we take a child away here in [region A], or we take a child in [region B]. There are so many state wide referrals now for children, because they just can’t find any carers in their particular area. And then we actually end up finding out, oh well, contact actually needs to be done twice a week, so it’s supervised contact that has to be done, even if it’s halfway in Sydney or

something along those lines. And then our funding dwindles away and it becomes very, very difficult' (caseworker, regional area).

These findings suggest that concerted and well resourced efforts to recruit carers, including dually authorised carers with a view to adoption, are necessary to support adoption practice across NSW.

2.4 Capacity of the sector to provide post-adoption supports

At interview, a wide range of practitioners across the state identified concerns about the lack of formalised supports available to children and families after an adoption order is finalised. During interviews and survey responses, practitioners argued that people impacted by an adoption experience generally required specialised therapeutic supports, because of the psycho-social complexities and longer term identity implications that can arise from both their trauma history and adoption experiences.

- **Practitioners perceive a low level of system capacity in the area of post-adoption supports**

The following section condenses a range of issues raised by practitioners through surveys and interviews regarding post-adoption supports.

Practitioners advocating for the more formalised provision of post adoption supports argue they are necessary for birth parents because:

- Grief, sadness and anger will inevitably be experienced when a child is removed, and the provision of post adoptive support acknowledges that compassionate therapeutic supports are necessary in dealing with this grief, particularly as birth parents may go on to have further children who are at risk of entering care without increases in parental capacity; and
- Systematic and focused therapeutic support can help to minimise the risk of aggravating or compounding existing drug and alcohol addiction issues, because relapse to addiction is perceived to be common for birth parents post-removal.

For adoptive families, the lack of post adoptive supports is also a concern for practitioners. Practitioners argued that post adoptive supports are important for adoptive families because:

- In an open adoption arrangement, adoptive parents may require additional supports in managing challenges including independent management of ongoing birth family contact
- Adoption is perceived to be a journey that impacts all family members, and not just the child or young person who has been formally adopted, and supports

need to be provided to enable parenting of children as trauma related needs emerge.

For adopted children, practitioners assert that the availability of post adoption supports must be improved because:

- The identity, attachment, emotional security and psycho-social needs of children who have experienced an adoption are likely to be different to children who have not experienced an adoption. Children and young people adopted from OOHC have experienced trauma, abuse and neglect and these issues may not be resolved through the legal instrument of adoption, but require additional and specialised therapeutic interventions;
- As children approach adolescence, issues of identity and self-esteem may become magnified and the need for post adoption supports may become particularly intense.
- While there are not-for-profit organisations which seek to support a wide range of people impacted by adoption experiences, these are perceived to be significantly overwhelmed and lacking expertise in their ability to meet the demand of OOHC adoptees and their families.

3 **Communication**

Practitioners highlight a broad range of communication issues which are important in the support and progression of open adoption arrangements. Practitioners argued that high quality open adoption practice work requires much more complex communication abilities than the skills used in general child protection tasks. The findings of this research highlight that an important distinction can be made between **knowing and valuing** the importance of communication work on one hand, and feeling confident in the act of **doing** this work on the other. The following discussion highlights that practitioners identify strongly with the key principles and beliefs which underpin current practice approaches to open adoption work, however, they feel less confident in their ability to actually undertake this work on a day to day basis.

In the following section, quantitative data is used to measure practitioner perceptions of the value of communication based activities which underpin open adoption practice work. Qualitative data is used to explore and ultimately identify why practitioners may express reticence to undertake this work.

2.5 **Knowing the communication facilitation work of practitioners in open adoption contexts**

The following data highlights that practitioners understand and philosophically support the need for positive and meaningful communication between stakeholders

in open adoption. It is important that practitioners are skilled in developing communication between birth families and adoptive parents, as the Supreme Court reviews these relationships when considering OOHC adoption cases. On a number of measures, practitioners indicate a high level of understanding of the positive role that a practitioner can play in: encouraging openness in adoption, and supporting adoptive parents to understand the need for ongoing contact between a child and his or her birth parents wherever this possibility exists. Table 4 identifies that practitioners express almost unanimous agreement that contact is important for a child's identity development (96%), and feel that it is especially important for adopted children to have ongoing contact with birth siblings (95%). In addition, more than 80 per cent of practitioners surveyed indicate that they believe contact, and the communication activities surrounding contact, can help children come to an understanding of the reasons why their birth parents are unable to care for them. The overwhelming majority of practitioners indicate support in-principle for open adoption, with only four per cent of all respondents indicating that they believe adoptive parents need closed adoption in order to develop a strong sense of family identity. Similarly, only six per cent of respondents express the belief that closed adoptions are simpler and easier for all parties.

Table 4. Practitioner Perceptions of Openness in Adoption

	Agree	Neither	Disagree	Total
	%	%	%	%
Contact and the impacts for children				
Is important for children's identity development	96	3	<1	100 (n=423)
Helps children understand why birth parents are unable to care for them	81	14	5	100 (n=422)
Children will not be able to bond with adoptive family if they have contact with birth family	3	14	83	100 (n=421)
Children will be confused about who their parents are if they have contact with birth family	10	14	76	100 (n=421)
Children placed with adoptive families are more settled if they know about their birth parents	75	23	2	100 (n=422)
It is important for adopted children to have contact with siblings	95	3	2	100 (n=422)
Is generally distressing for children	10	40	50	100 (n=421)
Contact and the impacts for birth parents				
Birth mothers who have contact with their child will have more difficulty with grief resolution	11	33	56	100 (n=421)
Birth parents who previously abused or neglected their child should not be able to have contact with their child once they are adopted	7	21	72	100 (n=421)
Contact and the impacts for adoptive parents				
Adoptive parents will be less likely to adopt children if they have contact with the birth family	28	40	32	100 (n=422)
Adoptive parents will feel less entitled to the role of parent if adoptive child still has contact with birth family	20	33	47	100 (n=420)
To develop a strong family identity, adoptive parents need closed adoption	4	16	80	100 (n=422)
Adoptive parents won't need to follow contact orders once the adoption order is made	10	19	71	100 (n=415)
Adoptive parents are more likely to have empathy for birth family, if they have contact with them	59	32	9	100 (n=420)
General impressions of contact				
Closed adoptions are simpler and easier for all parties	6	24	70	100 (n=420)
Parties in open adoption will be confused about their parenting rights and responsibilities	17	22	61	100 (n=421)

2.6 Doing the communication work to manage relationships pivotal to open adoption

The quantitative data findings suggests that the frontline OOHC workforce in NSW at the present time express 'mixed' levels of readiness to undertake the communication work needed to progress open adoption. Approximately 70 per cent of practitioners indicate that they feel ready to work with adoptive parents in developing their knowledge and skills to care for children and young people who have experienced trauma. Similarly, there was a lack of confidence amongst OOHC practitioners in the complex relationship building and communication work with families which open adoption entails. Table 5 makes a number of important observations about practitioner readiness to work with adoptive parents including: only 60 per cent of practitioners indicate that they have the knowledge and skills to work with and prepare prospective adoptive parents; only half of the practitioner workforce indicate feeling ready to assess suitability of adoptive parents; and less than one-third (30%) indicate that they have good understanding of the post adoption supports available to adoptive families.

Table 5. Perceived Level of Self-readiness to Undertake Open Adoption Work

	Agree	Neither	Disagree	Total
Perceived level of readiness to work with adoptive parents	%	%	%	%
Knowledge and skills to help adoptive parents care for children experiencing trauma	71	18	11	100 (n=491)
Knowledge and skills required for preparing and working with prospective adoptive parents	60	21	19	100 (n=491)
Knowledge and skills required to assess suitability of prospective adoptive parents	50	22	28	100 (n=493)
Understanding of post adoption supports available to adoptive parents	30	25	45	100 (n=489)
	Agree	Neither	Disagree	Total
Perceived level of readiness to work with children and young people	%	%	%	%
Confident in determining if adoption in best interests of child or young person	69	16	15	100 (n=487)
Confident in having skills required to involve children and young people in talking about adoption	67	19	14	100 (n=492)
	Agree	Neither	Disagree	Total
Perceived level of readiness to work with birth parents	%	%	%	%
Feel prepared for talking with birth parents about the prospect of adoption	59	22	19	100 (n=490)

Many practitioners appear less than confident in assuming the responsibilities associated with communicating with children concerning issues of open adoption.

Table 5 highlights that a significant proportion of practitioners do not express confidence in determining if adoption is in the best interests of the child (just over 30%) and one third did not agree that they have the skills required to involve children in discussions of open adoption (33%). When asked if practitioners perceive themselves 'ready' to communicate with birth parents about the prospect of adoption, only half (50%) express confidence in their ability to do this work. Coupled with the value placed on these casework skills, the lack of self-perceived confidence in these areas suggests further practice development supports are required to build casework skills required for progressing OOHC adoption in NSW.

2.7 Strengthening relationships between stakeholders

A strong theme continually emphasised in interviews was the role practitioners play as 'coaches' in developing relationships between birth families and adoptive families necessary for adoption orders to be granted. Practitioners identify that open adoption requires carer and birth families to embrace new ways of independently maintaining their relationships. For practitioners this is an area of practice that is exciting but may be intimidating, because it represents a departure from the unstated norm underpinning child protection work of maintaining separateness between carer families and birth families.

"From my personal experience you tend to keep people separate - foster carers here, birth family here, agencies you try and get them to work. We don't do the challenging conversations with the carers, what is your issue, what is happening for you, why don't you want to talk to the birth family, and same for the birth family. The reasons behind it are: it's hard. As a caseworker you are pulled in so many different directions so it's easier to just say, this is how we are doing contact, and arrange a contact worker. It's easier doing that" (caseworker, metropolitan area).

Additionally this work can be particularly challenging for practitioners as there is variation in the level of openness foster carers bring to their foster care experience. Practitioner interviews identified that OOHC adoption is able to progress more efficiently when carers readily understand and demonstrate "openness" in attitude and behavior. Some carers require intensive levels of communication, akin to therapeutic intervention rather than traditional casework support, in order to develop appropriate open attitudes and behaviours towards birth families

"The carers that I was involved with and (who) adopted while I was in that role, I was quite confident because they had been doing it. They didn't need someone to say 'you need to tick these boxes'. They had been doing it for years it wasn't just verbal talk that they needed to say". (caseworker, metropolitan)

“The excellent carers who are flexible... are empathic toward the kids, their circumstances, the birth family and I think they have an understanding of the kid’s behaviours. They don’t have such high expectations of the kid’s behaviours in terms of they should be listening and following.” (caseworker, metropolitan).

- **Building skills and confidence within carer families to assume the responsibilities associated with an adopted child represents a core part of open adoption casework.**

As the practitioners quoted below identify, excellent communication and relationship-building skills are often required on the part of the practitioner to help develop and facilitate trust between potential adoptive families (e.g. current carers) and birth families.

“Carers and parents meeting and having the opportunity to build a relationship. It’s hugely important for carers and parents to meet, in big part so adoptive parents can address built up judgments about the birth parent surrounding the circumstances of removal” (caseworker, regional area).

“Some caseworkers come with negative attitudes and thoughts against birth parents and that is projected on to foster carers, in a sense, of not making them do contact, they keep them separate. So they say “we’ll organise contact”, but if you are moving towards adoption you need the carers to be a part of that contact.” (caseworker, metropolitan area)

“I can tell these carers really feel that I’ve just made trouble for them. For five years they had their life, they were a childless couple too. They had this beautiful boy, they had a beautiful life, they wanted to adopt so that they could just carry on their way and I went and stirred the pot and found the birth parents and now there is a mum who is interested in her child who they have to share with now, and now they have to factor in to decision making in everything they do” (adoption specialist, metropolitan area).

“... I also think it’s about that openness, it’s about that relationship that we’re establishing with parents. I mean children need to enter care, I’ve got no qualms about that. But we need to be able to talk to families in a way that encourages that relationship and doesn’t set the carer up as the one who now has your child. I think we’re doing that a lot better. But it’s about how we recruit new carers, and how carers are dually authorised” (adoption specialist, regional area).

“To me, open adoption means contact between members of the adoptive and birth family. So that’s face to face, or might be letter exchange – all those kind of contacts. But I think the other contact is with the communication and the openness in communication - having discussions about the birth family. And the child being able to speak freely in the adoptive family about their own birth family. It’s about the child feeling comfortable and being able to raise discussion about their birth family and their history” (caseworker, remote area).

The following quotes describe the challenges associated with navigating the complexity of issues surrounding contact and adoptive families in particular.

“Adoptive parents need to keep that channel of communication, that involvement open with the biological parents. The ability to love someone else’s child, I am so respectful of it, and the hoops these parents go through, they are amazing, but we also require something more of them and that is engagement with those biological parents and to not see them as a bad family. And frankly I have stopped adoption in cases where adoptive parents just could not make that leap, because they despise the origin of the child, their family. They couldn’t get past it. And the child will get a sense of it. My decision to progress adoptions has stopped in some cases because of this completely” (caseworker, metropolitan).

“There is no tick-a-box box of how carers should be, or contact. People ask how much should contact be? And I say there is no magical number” (adoption specialist, metropolitan).

“A major limitation is the adoptive parents. Major, major. This challenge on the part of the adoptive parent- well it’s not the only factor, but it’s a factor big enough to warrant specifically mentioning it” (caseworker, metropolitan).

“... and where to have that meeting, and how long to have that meeting. I think that it just comes with being a caseworker for so long and having good assessment skills. It is difficult to frame that, but I think preparing each of the parties before that is the key... I think a new caseworker would struggle with all of that because they probably haven’t had to do that kind of work before. We sometimes find with caseworkers they do find those sorts of situations challenging, to arrange that, and to work out how that might work best” (adoption specialist, regional area).

The data obtained throughout interviews and surveys suggests that support to practitioners in developing these relationships is essential to support OOHC adoption work. A module on developing relationships between carers and birth families was thus included in the Adoption Practice Innovation Forums implemented in early 2016

following these findings to begin addressing this need. This module included a video from Justice Brereton on the level of relationship which the Supreme Court requires families to demonstrate in open adoption cases, providing the legal underpinnings to relationship building and contact in adoption.

2.7.1 Early communicating: early conversations?

The need for transparency in the conversations between caseworkers and birth parents about the prospect of adoption is highlighted by many practitioners as a critically important, but an underdeveloped area of practice. This work is often referred to broadly across the sector as 'early conversations', however, it must be noted that practitioners themselves argue that diverse approaches could be applied. The following interview excerpts highlight that while there is strong shared philosophical agreement that early conversations with birth parents represent authentic, genuine, transparent practice, there is far from consensus amongst practitioners about what should constitute 'early' and little agreement over how these conversations should be initiated and managed.

"I think that for most workers there is a real lack of knowledge about adoption broadly and so there would be an avoidance of having that conversation. I think it requires a bit of bravery to have that conversation early on, and some real first hand knowledge about the process and what that means for children" (caseworker, outer metropolitan).

"It's a very delicate topic, it's really tricky to speak to parents. When do we do it? Once we have Interim Orders? Is that when we start?" (caseworker, regional area)

"I've certainly never had any training about how to have that conversation" (caseworker, remote area).

"It would be good for caseworkers to even just have a script about how to have conversations with birth parents. Obviously the word adoption is not nice for anybody to hear I don't think, and some people cope with that word better than others. Some birth parents react very strongly to that, but I think it's also how you can get a better reaction if it's delivered in a better way. You know, rather than, I'm sorry your child's been in care for two years, we're going to adopt them. With our conversations, we tend to talk more about permanency and adoption as an option" (adoption specialist, remote area).

"I believe that we should be very transparent with birth parents during the court phase and I've always said that we should have a fact sheet that we could hand birth parents. Just letting them know that adoption might be an

option for your child...down the track, if you're unable to have them restored to your care or whatever the case might be. I think when you mention the word adoption after a birth father or mother's child has been in care for 5 years, and they have no idea that that was ever going to be an option. I don't think that's, well, it's not very transparent" (adoption specialist, regional area).

As the following commentary notes, an early conversation with a birth parent about the possibility of an open adoption, can yield a number of profoundly important benefits in maintaining the relationship with the birth parent for the child in the long term.

"We find when children first come into care that birth parents can be very, very volatile, and having the conversation with them actually empowers them a bit as well. It gives them a role in their children's lives. That they know they are still going to have some form of contact, and have some involvement in their children's lives" (caseworker, regional area).

- **The concept of 'early conversation' requires clarification and needs to be properly defined for, and in consultation with, practitioners in the field**

The qualitative commentaries also highlight the complexity of practice beliefs and philosophies surrounding this issue. On one hand, practitioners collectively affirm the need for greater transparency between practitioners and birth parents and there is broad agreement that early conversations represents one mechanism through which this goal can be achieved. On the other hand, however, practitioners assert the need to preserve professional discretion over how, where and when these conversations take place, because of the diversity of families with whom practitioners engage across the sector in NSW. In each of these cases, the diverse circumstances and profiles of families represents an important reason why practitioners require practice development and guidance around early adoption conversations.

"It's important to understand that the adoption conversation – just saying that word is like lighting a match. It is a really hard thing for birth parents...how the conversation happens is important" (caseworker, outer metropolitan).

"I think when caseworkers are sending [information] to birth parents, to try to call them first to have a discussion before they receive that information. All the little practical things that I think would help caseworkers. Because when they're not doing that work, you don't really understand it. Sometimes some caseworkers will just send that information to a birth parent, and it's not really nice to receive that mail without having a prior conversation" (caseworker, remote area).

Practitioners indicated throughout interviews that they require greater clarification on the practice skills needed to conduct positive conversations with both birth parents and adoptive parents around open adoption, with particular development necessary in the area of early conversations. A module on early conversations was included in the Adoption Practice Innovation Forums implemented in early 2016 following these findings to begin addressing this need.

4 Culture

Culture can either enhance or inhibit the ability to undertake open adoption practice work in two main ways. Insights provided by the qualitative interviews identify that **individual workers** can exhibit personal and cultural characteristics which mean they are receptive to the open adoption concept, and **workplaces** can also have cultures which are more or less receptive to children and young people being adopted from OOHC settings.

4.1 Individual and personal issues for practitioners and the work of open adoption

Given the previous Deloitte Second Road (2014) and KMPG (2013) reviews which had suggested personal resistance to adoption across the sector, it was perhaps surprising that the majority of caseworkers responding to this study's survey did not report holding concerns on the permanent placement principles encompassed in the Safe Home for Life legislative reforms. The following qualitative interview quotes reinforce this:

"It's not because people don't want permanency and stability for children but it's about if you have a kid that has absconded from their placement ...and you can't get a placement for them that's going to be the focus of your work" (senior manager, regional area)

"I firmly believe that for many children in OOHC adoption offers them the best outcomes and for me I take a lot of satisfaction seeing those outcomes for children. I had enough experience in child protection to see what happens to children in long term foster care and I found that unsatisfactory" (adoption specialist, metropolitan area).

However, for just under a quarter of the practitioners surveyed the notion of permanency and the related SHFL reforms were challenging and represented an area of child protection practice in which they felt personally and professionally conflicted (Table 6).

Table 6. Perceptions of Permanency Principles

Item	% Agree
Holds general concerns about permanent placement principle reforms in NSW	24% (n=518)

The following qualitative commentaries help to shed light on the reasons for caseworker hesitation regarding the issue of permanency. These quotes identify that many factors can fuel fears of adoption including: empathy for the sense of loss that will be experienced by birth parents; and generalised uncertainties about the experience needed to undertake open adoption work appropriately and to a high standard.

“Welfare has been damned over many, many years for adoption practices that have happened in the past, with a big focus on adoptions that haven’t been successful. But there hasn’t been a big focus on adoptions that have been successful” (caseworker, regional area).

“What makes it hard is the permanency. I know that’s what adoption is, about permanency, it is 100 per cent beneficial for the kid, but the permanency for the birth family. I don’t know, I think it would be so heartbreaking” (caseworker, metropolitan).

“I just think it’s not on the agenda. In terms of the timeline, where does it go, when do you do that? When do we stop and say, well at the Care Plan. That’s when you do it. But it feels too early sometimes. We do Care Plans very early on. Adoption is so final. Birth Certificates change. I think people are scared of that” (caseworker, metropolitan).

“If you are not working on a matter then you don’t get used to it, and if you are working on it, you just do status quo. It’s the culture that needs to be turned on its head” (caseworker, metropolitan).

- **‘Personal’ culture (values, opinions and attitudes) can inhibit the willingness of practitioners to consider and progress adoptions from OOHC settings**

In the following examples, practitioners note that their uncertainty surrounding adoption is fuelled, in part, by what one interviewee describes as the ‘legal hypocrisy’ of open adoption. These practitioners were keen to note that they did not oppose adoption for children in OOHC, but rather, they believe that elements of the legal process need to change in order to reflect the spirit of an open adoption arrangement.

“Another big issue that I have a huge problem with... is the changing of birth certificates. We need to create another bureaucratic process to reflect the legal proceedings that have taken place in adoption, but to change the birth certificate only adds to the pain.... The changing of the name is a major and deeply emotional issue for birth parents” (adoption specialist, regional area).

“It’s about being open with the adoption, being comfortable with adoption. It should not be like replacement to the birth situation - it’s a transition. A lot of people are uncomfortable with the birth certificate change... I say to carers when you get that new birth certificate you have to put it right next to that original one. Like they need to sit side by side. Not like you get the new one and file the old birth certificate away. That’s what happened in the dark days and pretending you were born to them. You cannot pretend that.” (adoption specialist, metropolitan).

It is notable that recent discussions held at the Australasian Post Adoption Meeting in New Zealand (January 2016) included a National agenda item of addressing birth certificate changes, with a suggestion that States must commence lobbying for alterations to the current system of re-issuing birth certificates to more fully encompass the spirit of openness espoused in current adoption practice.

4.2 Workplace culture and open adoption practice

During the course of qualitative interviews, the theme of ‘workplace culture’ was also identified as impacting on open adoption practice.

- **Workplace culture may be receptive or unreceptive to the issue of open adoption of children from OOHC**

The following interview excerpts demonstrate that while personal beliefs may influence a practitioner’s propensity to undertake adoption work, part of this reticence may also be shaped by a lack of institutional adoption knowledge and attitudes. The

following quotes highlight that workplace cultures which appear unreceptive to adoption may actually be the result of baseline fears held by practitioners regarding a lack of knowledge and experience sufficient to 'troubleshoot' challenges associated with adoption once the legal process for open adoption are initiated.

"I would describe it as a culture of avoidance in adoption..." (caseworker, regional area).

"The ability to do the work is very dependent on the unit itself" (caseworker, metropolitan).

"There is a fear. People are so scared that they're going to get it wrong. Or it's all going to come back at them. There is fear in everything that we do in child protection" (caseworker, regional area).

"We need to take the starting point that it is not just OOHC. It is the entire system that needs to change... We have been too adversarial" (adoption specialist, metropolitan area).

"I think we've often come from a view that we keep carers and parents separate – it reduces complaints, it reduces reportable conduct issues. You know, 'parents are really dangerous', and we're really scared of them. And surely a carer couldn't [manage that relationship]. I think we're getting better at 'a carer could, and a carer should'" (adoption specialist, regional area).

4.2.1 Leadership, workplace culture and open adoption

The issue of leadership, and management attitudes towards open adoption was identified by many frontline practitioners as an area of concern during the course of qualitative interviews.

- **Managers and leaders play an especially important role in shaping workplace cultures receptive to open adoption practice work**

The following interview excerpts demonstrate that managers are perceived to play an important role in shaping and altering expectations within work units to consider adoption matters in the permanency planning regimes undertaken for children. Practitioners are looking to their managers for leadership on OOHC adoption.

"You have to be a confident negotiator and it takes a strong person to negotiate with a manager... You need to be strong to advocate with a manager to put your position about anything to do with that family" (caseworker, metropolitan).

“Our team has a reputation for being disconnected to the District so we come in and go to bat, but ultimately if the District Director says no we are not progressing this we don’t have any ability to say otherwise... We’ve had managers say “I will not sign this Briefing Note to this assessment” and I say, if that’s your personal view you need to step out of this case, because it’s not about your view, it’s about what this child actually needs” (caseworker, regional area).

“I can recommend adoption but at the end of the day a manager makes the decision...I’ve had managers say to me ‘I don’t know why we do adoption of kids in care’. They don’t fundamentally believe in it. They have never met a family who has been able to do it” (adoption specialist, metropolitan).

As was previously identified, managers and high level staff across OOHC represent key positions requiring education and practice development in OOHC adoption to ensure that any cultural barriers at this level are addressed. Again, permanency panels may also play a role in mitigating the impact of cultural barriers in OOHC adoption practice, through providing independent oversight to permanency decisions in a more routine way than is currently espoused in the NSW model.

Conclusion

A number of factors are required to work in concert to deliver the high quality casework and relationship based practice necessary to support open adoption. The four pillar structure outlined herein demonstrates that the drivers for open adoption practice are deeply interconnected and must be present to some degree in order to achieve progression of an open adoption arrangement. Importantly, the framework also highlights that skill development initiatives alone will not lift sector capacity to undertake open adoption from OOHC. Structural supports including specialised positions, increased OOHC casework skills, increased independence and oversight of permanency decisions, and implementation and related structural reforms are also required in order to adequately develop OOHC adoption practice in NSW to ensure all children are provided with permanency options which best meet their developmental needs.

Ongoing Work

The findings of the survey and interviews highlight that caseworkers are not opposed to adoption practice, as had been previously postulated. Indeed, it is particularly notable that the contentious history of adoption was rarely raised as a practice barrier. Instead, concerns around the ability to practice with competence and confidence given lack of skill development and adoption casework exposure was clear throughout interview and survey responses.

When considering practice development in adoption from care, a number of areas of need were identified in survey responses, as highlighted below (Table 7). District forums were identified by caseworkers as the preferred means by which this information could be delivered (Table 8).

Table 7. Identified areas of training need

Identified areas of training & information need in open adoption from OOHC	%
How to assess suitability of prospective parents	67
How to determine if adoption is in best interests of child	72
Strategies for involving children and young people	62
How to talk to birth parents about prospect of adoption	69
How to prepare and work with prospective adoptive parents	61
How to help adoptive parents care for children experiencing trauma	62
Access for adoptive parents to any post adoption support	76
Information on why adoption is not preferred placement option for Aboriginal children and young people	39
Information on relevant government reforms	69
Information on court processes and procedures	81

Table 8. Preferred mode of training

Mode	%
District workshops or seminars with guest speakers	91
Research to practice notes on relevant topics on intranet	61
Information sharing through regular team meetings	48

As a result of these findings, the Open Adoption Innovation Forum Steering Committee worked alongside other key stakeholders to develop content for the Open Adoption Practice Innovation Forums delivered throughout February and March 2016 which have been briefly mentioned earlier in this document. These forums focus on hands-on skill development in the area of communication. Specifically, they included workshops on early conversations and relationship building between adoptive parties, and in applying the SHFL Placement hierarchy to an individual case in order to develop skills in weighing if adoption is in the best interests of a child. An emphasis on legal underpinnings of adoption work was also included in these sessions to address these identified needs. This training was delivered as a roadshow series across the state, with approximately 600 NGO and FACS staff enrolled in one of these training forums.

A full evaluation report on the Innovation Forums is currently being drafted, which includes repeated survey data post-attendance to examine changes in attitudes post-training. Findings will be finalised prior to the cessation of the Open Adoption in OOHC Research Initiative team in June 2016.

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Appendix A: Methodology and Response Rate

In attempting to calculate the response rate for the NSW OOHC caseworker survey, a number of methodological challenges must be acknowledged. As it stands, the ABS does not routinely disaggregate labour force data to the state, nor sub-sector level, therefore independently collected workforce data on the NSW child protection sector is not currently available.

The entire frontline OOHC workforce in NSW was invited to participate in this study. The study was widely promoted and advertised through staff intranet boards (both government and NGOs) and through the regular ACWA newsletters and circulars. All staff, from entry level OOHC caseworkers through to middle managers and executive staff were invited to participate. A total of 614 survey responses were received. This was approximately double the number of participants anticipated based on previous surveys of the same sample using similar recruitment methodologies.

Anonymity of participants preserved

The anonymity of survey respondents were preserved throughout the data collection process, with no personal or identifying information recorded.

Participants for qualitative interviews were de-identified during the transcription phase of the data collection process. Generic job titles are used to preserve anonymity of participants (e.g. caseworker, adoption specialist). Specific regions are not named. Instead, descriptive distinctions of remote, regional and metropolitan locations are highlighted where this is important for the insights being drawn.

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