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Themes, Issues, & Practice Dilemmas in Ethnically Matched Adoption

Placements

INTRODUCTION

Adoption is a complicated issue, and one that reflects changes taking place in the society in which it is practised (Triseliotis et al. 1997). Further, as Kirton (2000: 2) observed, 'If adoption is already primed for public controversy, it is its articulation with 'race' and ethnicity which lights the touch paper'. This paper draws upon findings from a service evaluation in the UK into the practice of ethnic matching in adoption to explore this controversial area, and considers the emerging implications for policy and practice across the globe. From the outset it is important to acknowledge that essential terminology differs significantly across countries, adding further to the complexity of the discussion. Terminology used in this paper will mainly reflect the focus on UK practice and context, and will also refer to relevant international literature when considering emerging issues of wider significance.

The terms used to describe ethnicity themselves can be problematic. In the UK, the terms 'Black and Minority Ethnic' (BME) are commonly used as an inclusive political term to describe individuals and communities of Asian and African/Caribbean heritage (Graham, 2007). While this clearly has its limitations in terms of representation, it helpfully captures a commonality of ethnic and cultural experience for people of Asian and African/Caribbean heritage. This experience reflects the

positive cultural aspects of these diverse communities as well as their more brutal experience of racism. This term is often used interchangeably with 'black'.

However, without 'minority ethnic', 'black' does not articulate the diversity of, in particular, Asian communities' representation and cultures in the UK (Modood, 1994). 'Dual heritage' is used to explain an identity and/or relationship comprising two or more ethnicities (Caballero, 2008). In this paper, it will be used to describe children whose birth parents originate from two or more different ethnic backgrounds.

While 'ethnicity' will be referred to throughout, we are aware that this has become a contested concept. Work focusing on group boundaries that define ethnicity and race, posit ethnicity as socially constructed, throwing into question past understandings of ethnicity as an easily definable and recognisable concept (Ivemark and Roth, 2012; Wimmer, 2008). Accepting this complexity and reflecting on the practice implications, the terms 'ethnic matching' have been used as shorthand to refer to adoption processes where a focus on ethnicity is a key factor. Critically, the term assumes placing a child with adoptive parents of the same or similar ethnicity. Another main kind of adoptive placement of BME children referred to in the literature is 'trans-racial' (TRA) or 'trans-ethnic adoption' that is, the placement of BME children with white parents (Triseliotis et al, 1997). Additionally, there is trans-national or inter-country adoption, which has involved high profile celebrity adoptions of children from other countries (usually Africa or Asia) and is becoming more frequent in its use (Huh and Reid, 2000).

As a result of the over representation of BME children in care as well as a lack of sufficient BME adopters (Triseliotis et al, 1997), the numbers of BME children placed with white couples became established practice in the UK from the 1960s onwards (Barn, 1997; Kirton, 2000). Wider political and ideological movements however, including the civil rights and black consciousness movements in the US and UK (Gaber, 1994), influenced development of legislation such as the Children Act 1989 in England, which placed a duty on local authorities to take a child's ethnicity, as well as religion, into consideration when making decisions about adoption placement. Since the 1980s, the number of BME children in care has continued to grow, leading to on-going controversy over whether such a policy has resulted in more BME children having to wait an unnecessary and potentially damaging, length of time for permanent placement (Rushton and Minnis, 1997). Recently a UK government Minister commented in *The Guardian* newspaper:

"Thousands of children currently in the care system are waiting to be adopted. Every day they're denied the loving home all children deserve. But politically correct attitudes and ridiculous bureaucracy keep many of those children waiting too long. Edicts which say children have to be adopted by families with the same ethnic background and which prevent other families adopting because they don't fit into left wing prescriptions are denying children the love they need." (Hill, 2011)

Contemporary debate in the UK has returned to this issue of whether or not BME children's interests are best served in a 'loving white family' through trans ethnic

adoption rather than remaining in children's residential units awaiting placement with adoptive parents of similar ethnicity (Tizard and Phoenix, 2002). While it has been argued that ethnically matched placements encourage and nurture a positive black identity (Banks, 2003), those in support of trans ethnic adoption maintain that placements of BME children in white families can be as successful, and that BME children do not need a 'black identity' in order to develop a healthy self-concept and self-esteem (Hayes 1993, Quinton 2012). Thus, the debate appears as driven by strong ideologies as it is based upon evidence, and we need to better understand what, for instance, ethnic matching means in practice, and why this may be important for children's identity development.

Studies suggest that to posit the debate concerning the identity of children within a Black or white binary over-simplifies a much more complex and nuanced experience (Caballero et al, 2008, 2012). The concept of identity, whether in relation to sexuality, gender, ethnicity or culture is now understood to be neither fixed nor singular, but is rather more fluid over different times and contexts (Phoenix and Simmonds, 2012). Further, in respect of children of dual heritage, negotiations concerning identity and culture have been found to be a compromise and quite 'ordinary' inside the family when one parent is white and the other from BME background, while outside the family, how this is experienced depends upon the micro-location or diaspora (Caballero et al 2008, 2012). If the complex inter-play of identity in dual heritage families becomes quite 'ordinary' through a recognition and appreciation of the intrinsic importance of both cultures and ethnicities (Caballero et al, 2012; Phoenix and Simmonds, 2012), theoretically trans ethnic families, as well as ethnically matched families, can constructively negotiate this very same difference

inside the family, and effectively deal with racism outside the home (Twine, 2004; Harman, 2010).

Historically, research studies on the placement of BME children with adoptive families have tended to focus on trans ethnic adoption (Gill and Jackson, 1983; Simon and Alstein, 1987; Bagley, 1993). Few studies have explored the issues that may come with ethnic matching of BME children with similar adopters (Thoburn et al, 2000; Fraser and Selwyn, 2005). Using findings from a UK service evaluation of ethnic matching in adoption, this paper reflects upon the emergent issues, dilemmas and complexities that surround children's ethnic identity.

STUDY PURPOSE

The study was an independent service evaluation of an adoption service specialising in the recruitment of BME adopters and ethnically matched adoption placements, commissioned by a national not-for-profit children's organisation in England (Ridley and Wainwright, 2010). Its broad aim was to assess the effectiveness of the service in recruiting BME adopters to provide permanent homes for BME and dual heritage children in need of adoption. In particular, the study explored the experiences and motivations of BME families who were recruited by the adoption service; the motivations of its staff and those social workers who referred children for placement by the service; its effectiveness in recruiting prospective adopters from a range of BME communities, and in making appropriate ethnic matches.

METHODS

To address the main aims and objectives defined by the commissioners, a formative evaluation was undertaken using mainly qualitative methods, and applying Scriven's Key Evaluation Checklist (KEC) (as cited in Davidson, 2005) as a framework to guide the planning and reporting of evaluation findings. This model was used to ensure the evaluation was systematic, and to ensure that conclusions from the study could be supported by robust data collection. The KEC has been used to design and evaluate multiple projects, services and policies, as well as for meta-evaluations (Davidson, 2005). Qualitative methods offered the flexibility needed to explore complex, individual experiences and motivations (Temple, 1998).

Interviews and focus groups were used to collect information from staff and adopters about their experiences and perspectives, while an internet survey gathered the opinions of referring social workers. Monitoring information held by the service about adopters and children placed by them was collated, and time was spent observing staff and adoption panel members in decision-making meetings about adoption matches. While not a control study in a strict sense, for comparison, similar data was also collected from a generic adoption service in another city managed by the same national children's organisation.

Research questions asked of both adoption services and across different stakeholders were developed from the specification and review of the literature and included:

- How effective was the service in matching BME children with adopters of similar ethnicities?
- How did staff ensure children were at the heart of the process?
- What underlying beliefs and ethos drive the service and its staff?
- What motivates individuals/families to choose to become adopters with them?
- How important do different stakeholders feel ethnically matched adoption placements are?
- Why do social workers refer to them to find suitable adoption placements for BME children?

Study Samples

Adopters who participated in the study were self-selecting from the total population of BME adopters recruited by each service. From the specialist service 18 adopters (23% of total) and six adopters (35% of total) from the generic service volunteered to participate. The 14 adopters who chose to be interviewed ranged in age from 30-50 years, included slightly more men than women, and were couples of the same ethnicity or were in mixed ethnicity marriages or civil partnerships. The six adopters from the specialist service who participated in a focus group were slightly older

(between 40-50 years), mostly female (four out of six) and included single parents and couples. Their ethnicities ranged from Asian, black Caribbean, black African, white and dual heritage.

All BME staff (social workers and admin staff) and managers (service manager and practice manager) from the specialist service, and seven out of ten staff and managers from the generic service participated in group and individual interviews held with the services separately. All staff and managers in the specialist service were from BME backgrounds, the majority being women of African, Caribbean and/or dual heritage, and one staff member from Asian background. In contrast, a minority (three) of the ten staff and managers in the comparison service came from BME backgrounds: two were Asian and one was African/Caribbean background.

Out of a potential 86 social workers and managers who had referred a BME child for adoption to either service, 30 replied, which represents a respectable 35% survey response rate. The majority of these were social workers (i.e. 20 out of 30), and most were from local authorities in the two cities where these services were located. Most (90%) were female and of white ethnicity (73%), although some social workers and managers of Indian, Caribbean and dual heritage completed the survey.

A sample of matching and adopter assessment records in respect of 16 adoptive families in the specialist service were examined to further explore the matching process using criteria identified by previous researchers (Dance et al., 2008).

Fourteen of the 16 cases were selected because of what seemed a poor ethnic match between child(ren) and adoptive parents, while two appeared to be a close 'fit'.

Study Recruitment

BME adopters with experience of being recruited and approved as adopters by either the specialist or the generic service were invited to participate. Information about the study and an initial invitation to participate in a focus group were passed onto all adopters on our behalf by social work staff and managers who therefore acted as gatekeepers (78 adoptive families in the specialist service and 17 in the generic service). This way of approaching adopters was necessary given the short timescale for the study and to meet the requirements of data protection. When few adopters responded to this initial approach, an email was sent inviting them to participate instead in an interview, which yielded a better response. The majority of participating adopters (14 out of 24) chose to be interviewed, many by telephone, as privacy was of key importance to them.

Staff and managers in both services were invited by the researchers to participate through direct contact with the services. Observations at a specialist adoption panel meeting were negotiated directly with the panel. Social workers and social work managers who the services identified as having contacted them about placing a

child, and for whom email addresses were known were sent a questionnaire survey via email.

Our background as researchers included experience of trans ethnic adoption, as well as being experienced social care professionals and academics with professional commitment and interest in promoting equality and diversity. The ethnicities of the team included a white woman, man of dual heritage and a woman of Indian origin. The evaluation prioritised the viewpoints of adopters and professionals and sought to place the findings within a wider context through reference to international literature.

FINDINGS

Motivations

The specialist adoption service had been created in 2004 as a direct response to the findings of research that pointed to an urgent need for dedicated permanency placement services for BME children in the UK (Selwyn et al, 2004). In particular, the researchers concluded there was a misfit between the number of BME adopters and BME or dual heritage children awaiting adoption. An experienced senior social worker was recruited to design and manage the proposed service dedicated to recruiting BME adopters. The generic adoption service that acted as comparator in the evaluation recruited adopters from BME and dual heritage applicants, but it also

recruited white adopters and placed white children. The same central rationale and ethos that BME children thrive best when placed with adoptive parents of similar ethnicity, was shared by both the specialist and comparison service:

"Everybody came to this project because they've got a passion to work with black families, you know, to place children with black families." (Social worker, specialist service)

"Recruiting black families for me is what this organisation should be putting more weight and money behind." (Manager, generic service)

An all BME team in the specialist service had, argued the staff, enabled it to develop and utilise a broader expertise and insight into the myriad of ethnicities, cultures and religions of BME adoptive parents and children, an assertion supported by some adopters:

"I'm not a racist but a white person wouldn't understand. With a black social worker you can go into depth, you can explain yourself." (Adopter)

Other writers have highlighted the institutional racism and discrimination prospective BME adopters face when choosing to engage with mainstream children's services, and their subsequent reluctance in coming forward to adopt (Barn, 2003; Selwyn et

al, 2004). As the manager of the specialist service explained, local authorities had often fallen short in their response to prospective BME adopters:

"Black people feel that agencies do not understand what they are about, and fear being rejected, and don't want [to approach] local authorities because of a potential stigma, and a lack of understanding of the needs of families."

The majority of adopters reported feeling more comfortable talking and working with staff who they felt understood their experiences because, importantly, they were from similar ethnic background to themselves. While not the sole reason, the specialist focus was a key reason why prospective BME adopters had approached the BME service. The following quotations were typical responses:

"I liked the fact that it was black Caribbean focused and when I spoke to one of the social workers I just got a sense that they knew the culture and the cultural differences and difficulties that both myself and my child may experience." (Adopter)

"We just thought it was a good idea to contact them because obviously they were more specialised at dealing with finding children for mixed race families."

(Adopter)

There were a minority of adopters however, for whom the focus on 'black families' (the terms used by the service and incorporated in the service name) was not the main reason for making contact:

"Neither of us would have thought of [name of service] as suiting us because none of us identify as black...We were not born in the UK so we are not used to having black define any ethnic minority..." (Adopter)

Nonetheless, this same sex couple reported they were "welcomed" by the service, and staff affirmed they could find a suitable match for them. In common with most adopters interviewed, they commented they felt immediately comfortable with the BME social workers. Staff responded promptly to initial enquiries, and the common experience of adopters was that the service was "immediately on the case", an approach that they valued highly:

"They literally swept us off our feet and sort of took care of us because it is a really hard phone call to make when you're saying you know 'we're interested in adoption, what do I do?' It's down to the other person to tell us what to do and they did look after us... and that's why we stuck with them because we felt from day one they built up that relationship with us and showed us that they actually cared about what they were doing and what we were doing."

(Adopter)

The consensus among local authority social workers and managers who had referred BME children for adoption placement, was that the specialist service was better at meeting BME children's needs than the generic service: i.e. 13 out of 20 of respondents felt the specialist service was 'good' or 'very good' at meeting BME children's needs compared to 5 out of 14 respondents commenting on the generic service. Among the main reasons they highlighted for referring children to the specialist service were the availability of BME adopters, the skills and experience of staff, and the ethnic composition of the team. Such motivations were less likely to be mentioned in relation to the generic service, indicating that what motivates external stakeholders to refer to adoption services is influenced by the specialist focus.

Adopters and Children Placed

During the same five year period for which figures were available (i.e. 2004/05 to 2009/10), the numbers of BME children placed for adoption by the specialist service was 98 compared to 26 by the comparison service: almost four times as many placements. The number of BME adopters recruited was also highest in the specialist service (78 compared to 17 in the comparator service). These figures however, need to be read in the context of the generic adoption service placing children from all ethnic backgrounds including white. When this is taken into account the overall number of children it placed was comparable (i.e. 95 placements over the same five year period).

The picture regarding the ethnicities of adopters recruited by these services, and the children placed in BME and dual heritage families, demonstrates the complexity of ethnic matching in practice. According to the ethnic categories recorded by the two services, the majority of adoptive parents recruited (50% in the specialist and 65% in the other service), and children placed for adoption (58% and 64% respectively) were from dual heritage background, commonly black dual heritage. The second largest ethnic group was Asian and/or Asian dual heritage background, and this was slightly higher for the comparator service. The category 'Asian' had been used by these services to include those of Indian, Pakistani, Bangladeshi and Chinese origin. 'Other' ethnicities recorded included Greek, Italian, Moroccan and Mauritian. A minority of adoptive couples were both from the same ethnic background (29% in the specialist service, and 17% in the comparator). Almost one in five were single parents.

Realities of Ethnic Matching

The main elements of a good adoption match as identified by Dance et al (2010) were evident from the matching and assessment reports analysed. In addition to ethnicity, such factors included consideration of prospective adopters' preparedness for parenthood; their flexibility; the strength of their relationship (if a couple); the network of support from family and friends; their flexibility and understanding of health conditions or disability the children may be experiencing, and an understanding of the impact that loss, separation, neglect and abuse will have on the

child. Critically, prospective adopters were required to appreciate that adoption was about meeting the child's needs, as well as their own.

Social workers in both agencies, and many prospective adopters commented on the importance of feeling there was a physical resemblance with the adopted child (Wainwright and Ridley 2012). As well as feeling a bond when they first met their child(ren), adopters were shown to refer to the resemblance in appearance or behaviour that enabled them to feel connected with the child(ren). This was articulated in the records for all 16 cases, and is illustrated by this comment.

"The applicant was able to tell her daughter how she reminded the applicant of herself when she was a little girl." (Matching record)

Analysis of the monitoring information held by the specialist service showed the majority (51%) of matches made between child(ren) and adoptive parents were a clear ethnic 'fit'. However the fit was less obvious when the adoptive parents and /or the child was of dual heritage. Examples of an exact fit or match included placement of a Greek child with Greek adopters, or a black Caribbean child with black Caribbean adoptive parents. A more 'partial fit' can be seen in the placement of a white British/Caribbean child with a couple of Spanish/Nigerian and black Caribbean origin. However, the meaning of an ethnic match was unclear in some cases, for example, in the placing of a Chinese child with a couple who were white Irish and Malaysian ethnicities, or a white Hungarian/Arabic child with adoptive parents of

white British and Asian heritage. This flexibility was perceived positively by some adopters as well as by staff:

"They allow the boundaries to leak much more in terms of identities and ethnicities than I know the local authorities [do]. My daughter is black African and I'm not, I'm black Caribbean and I know that would have been a difficulty. She is the right child for me, but that would have been a difficulty because on her form it said her birth mother wants a black African parent. So that automatically would have crossed me out, but I found they actually allowed that fluidity." (Adopter)

The majority of adoption matches appeared to have been made on the basis of commonalities, whether this was in terms of known ethnicities, culture, religion or, to some extent, skin colour. The rationale for this approach was that the most important goal was to ensure that adopters would meet the child's identity needs (Wainwright and Ridley, 2012). Caballero et al (2008, 2012) argued that for dual heritage children the formation of ethnic and cultural identity is an on-going process of dialogue and (re) negotiation, and that flexibility in matching with BME and dual heritage families can achieve positive outcomes for children's identity. It is however, important that this flexibility does not reduce the matching process to only pragmatic, available placements because the ever changing reformations of ethnicity will be lost (Selwyn et al, 2010; Phoenix and Simmonds, 2012). Nonetheless, flexibility in matching acknowledges the 'ordinariness' of BME adoptive families accommodating

and negotiating a BME child's emerging cultural and ethnic identity (Caballero et al, 2008, 2012).

Study Limitations

This paper has drawn upon findings from a service evaluation of specialist and generic adoption services in one national children's organisation in England UK, based upon the experiences and views of a self-selecting group of adopters and professionals. The views of those who were more ambivalent or critical of the services may not have been heard, although a range of positive and negative perspectives were expressed by participants. It does not claim to be generally representative of the views of BME adopters in the UK or elsewhere. That said, our review of the literature showed that few studies have systematically gathered the views of BME adopters and staff from specialist BME adoption services, and for a small qualitative study, respectable samples of both adopters and professionals were achieved. As far as possible, the findings are discussed in the context of themes emerging from international literature. Further, given that most studies focus on trans ethnic adoption and outcomes, this study contributes to the slowly growing body of knowledge about the practice of ethnic matching in adoption.

Discussion/Conclusions

The evaluation findings demonstrate a clear added value from the specialist focus on recruiting BME adopters and matching BME children with adopters of similar ethnicities. Adopters valued an ethnically and culturally sensitive approach, often comparing the service favourably against experiences with local authority (or state) adoption services. Referring social workers also recognised the specialised focus and looked more frequently to place children through a service dealing exclusively with BME families than one providing generic adoption services. However, we also found that the emphasis from the service name and composition of its staff team on 'black' ethnicity (African/Caribbean) did not fully reflect the diverse ethnic identities of both children and adopters, especially those from dual heritage backgrounds.

Appropriate ethnic matches between prospective adoptive parents of dual heritage and children whose ethnicity is also dual heritage (especially when the ethnic heritage of one or more of the birth parents is uncertain), pose particular challenges for adoption agencies. Such circumstances are however, being experienced with increasing regularity (Thoburn et al, 2000; Selwyn et al, 2010), and some argue, are beginning to fundamentally question the achievability of ethnic matching. In this study, some adoption matches were made on pragmatic and flexible grounds, while still aiming to safeguard the child's ethnic *identity* by ensuring a broad 'fit'. Further, matches were being increasingly made within the context of ensuring the adopted

BME child was placed within a family that would enable him/her to develop resilience against racism (Thoburn et al, 2005; Barn, 2003).

The findings of this and other studies are increasingly throwing into question whether it is ever possible to achieve a broad ethnic 'fit' given the problematic nature of conceptualising ethnicities as singular fixed entities, rather than as a complex interplay of 'space and place', micro-geography and the shifting sands of the diaspora, negotiating culture, difference, religion and 'race' (Luke and Luke, 1999; Twine, 2004; Caballero et al, 2008, 2012). Contemporary studies suggest that the ethnicity and identity of dual heritage children are in a process of constant (re)negotiation, and that white as well as BME (adoptive) parents are engaged in this process (Barn and Harman, 2006). These on-going re-articulations and repositioning of a child's ethnic identity make the placement of a BME child with a similar BME family both theoretically and practicably problematic.

Further, when considering the placement of children of dual heritage with families that 'resemble', the challenge of matching is magnified as the assumption of the identity of the adopted child and family is one that can be described as a best guess. This is laudable, if practitioners and policy makers acknowledge that the ethnic matching of BME and dual heritage children is an activity of ethnic generality, an approximation rather than an exact science.

Ethnicity as a concept is in a state of flux and is open to interpretation (Caballero et al, 2008; Ivemark and Roth, 2012). This is not to deny that racism and discrimination are a part of BME people's lives, but rather highlights the need for practitioners to critically debate understandings of ethnicity. While clearly an important variable that needs to be thought about in adoption placement, ethnicity is but one factor among many. If the debate is to move forward and beyond the political rhetoric, future research is needed into the outcomes of varied adoptive placements, in particular into the outcomes for children as they mature into adults who have experienced what it means to grow up in ethnically matched adoptive families.

In conclusion, consideration of this study's findings point to a number of implications for adoption policy and practice, which potentially have broad international applicability. In summary these are:

- The value of promoting the recruitment of families of BME heritage to adopt children of BME heritage through specialist provision should be acknowledged in service planning.
- In light of the changing nature of ethnicity, recruitment of prospective BME
 adopters needs to be cognisant of the diverse ethnicities of the children in
 need of adoption, which has implications for the strategies deployed to recruit
 adopters from a range of BME ethnicities.
- In light of the findings of this and other studies, there needs to be careful
 consideration of the relative merits of both trans ethnic and ethnically matched
 adoption in planning future provision.

A continuing critical debate and re-appraisal around the notions of ethnicity
and culture is needed in adoption agencies, acknowledging the changing
cultures and identities of BME individuals and communities, and being mindful
of the increasing population of dual heritage children in need of adoption.

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