

The Adoption Barometer

A stocktake of adoption in the UK

May 2023



Executive Summary

AdoptionUK
Together we're family

Forewords

Eloise Jones

Adopted, adopter and social worker. That's not a description of my full identity but some of the most important aspects of what makes me who I am. Those words are my world. I'm proud to be adopted, proud to be an adopter and proud to be a social worker. And I'm proud to be introducing you to this year's *Adoption Barometer*, which represents the views of thousands of people who, like me, are living with the extreme highs and lows of adoption.

Adoption has brought me love. My parents are the ones who remain by my side and who love me fiercely as I do them. No perfection, no sweet story of success but real love. It's the same as the love I have for my children – fierce, proud, all-embracing, and never ending.

But (a word my mum has told me I use far too often), things aren't perfect. Life is trying, exhausting, and very testing. I have learned so much over the last decade and I wish I could go back to the beginning and start all over again with all this knowledge right by my side. Maybe then I would feel able to stand a little taller and a little prouder, and to say I know I did my best.

If I had been better prepared from the start, with more understanding of therapeutic parenting, if I had been coached and better informed about the signs of trauma and been given real strategies and tools, maybe I would not be in the position I am in today – holding the family together by a thread with a thousand plates to spin.

Adoption needs to change. Children who are removed from birth parents have experienced early life trauma. This impacts on a child's development across all areas and cannot be healed by love and positive care alone. Knowledge and understanding of neuroscience and what we know about the developmental impacts of early adversity need to be put into practice and play a central part in services, including social work, education and mental health services.

As the last five years of the *Adoption Barometer* show, many families are reaching crisis in a traumatised state, feeling lost and unsupported. The support is inadequate and ill-informed. Some social workers are still making assumptions, and laying blame, leading to catastrophic outcomes for those families and their children. Services need to provide support before families reach crisis point, and the practitioners providing that support must be experienced, trauma informed and have a true sense of the history of that child. Too often, compassion is missing. As families we are living in fight and flight mode, but we didn't start the fight and neither did our children. There are still too many parents being blamed for the situations they find themselves in.

I know that the love in our families is real. I am secure in my love for my parents, as I am in the love for my children. And that love comes right back to me. Adoption needs love to survive, but that isn't enough. Without a marriage between social work, education and the latest neuroscience, adoption is built on thin and shaky foundations. Parenting traumatised children is highly complex and challenging. It is also rewarding, real and of value to individuals and to society. As an adopted person, an adoptive parent and a social worker, I can say that hand on heart.



Anstey Harris

For most of my life – for almost six decades – I believed my status as an adoptee, and my understanding of that and attitude towards it, was a binary thing: a yes-or-no equation, where I understood my identity or I did not; where I was satisfied with my personal history, or I was not.

2023 has been a turning point for me and, I believe, for many adopted people. In March, Nicola Sturgeon made a heart-felt apology to the mothers who were victims of historical adoption, for the loss of their children and the injustice they had suffered. Crucially, Sturgeon's apology went further: it went out to the adult adoptees who had once been those babies – her apology recognised that the trauma was imprinted across generations, that it continues to ripple like a stone in a pond.

I felt valued and seen. And validated in my realisation that I can feel however I want about my adoption, that there are no rules or set paths I must follow in dealing with that trauma: it is my trauma – and I can do with it as I please. For the first time, I felt aware of all the aspects the shifting sands of my identity bring to my life and that, as an adoptee, at last I was starting to be heard.

This is the third *Adoption Barometer* that has included questions for adoptees. Any report about adoption must include our voices and listen to our lived experiences. There have been instances, historically, where organisations haven't listened to adoptee voices: it is imperative that, as more and more adoptees find themselves 'coming out of the fog', adoption agencies and charities find their way out of that maze too.

The debate about adoption, its trauma, its aftermath, doesn't ever quieten, just as it cannot find a solution. Deanna Doss Shrodes wrote in the *New Yorker* earlier this year, 'In order to be adopted, you first have to lose your entire family.' And that is a trauma that adoption cannot – and should not claim to – erase.

For me, adoption is the ultimate place where 'all these things can be true.' Yes, I believe adoption is trauma, and yes, I believe that – for some children – adoption is, at the end of a long journey of investigations and considerations, the answer. I also believe that there are many adopters who are providing vital stability and specialist parenting for children who could not live safely with their birth parents or in kinship care.

This is not a perfect world, nor is it the binary black-and-white that I grew up with. I am still fighting to find my identity, still amazed at the steps governments have taken to keep those details from me: it is more and more important to me, every day, to find out who I am. If adopters and agencies and social workers can listen to voices like mine, to our passion and our anger, that can only be a positive for adoptees and adopters alike.

There is still so much to be done. Words like 'lucky' and 'chosen' are still used in reference to adopted people. And too many adoptees come up against poor, dismissive, and even obstructive attitudes when they attempt to access their files. It's not good enough.

There are many voices and people involved in adoption, and many opinions and points of view. I cannot speak for all adoptees, but I can speak to my own truth and that is that I need to be heard, I need people to consider and acknowledge what this thing – that I had no part in, bar my starring role – has done to me. The only way to do that is to listen, to learn from that listening, and use that learning to protect and support adopted people of all ages.

I hope that the views expressed by adoptees in the *Adoption Barometer* are heeded by the politicians and practitioners who have the power to change things for the better.

A note about language

The language used to describe the people and processes involved in adoption is constantly under scrutiny. There is a valuable, ongoing conversation around the need to ensure that the language we use is empowering and reflects the views of those with lived experience of adoption.

The *Adoption Barometer* aims to evaluate existing government policy and assess how effectively it is being put into practice so that, where necessary, we use the terms that appear in government documentation in order to ensure clarity for the reader. However, we recognise that some of these terms may be considered outdated or inappropriate and that there are national differences as well as differences of views between individuals and groups.

The following terms are used in the report:

Adopted person/adopted child/adult adoptee: we know from consulting with adopted people that there are differing views on the appropriate terminology. In the report we use adopted person, adopted child and adult adoptee, to reflect the breadth of views that have been shared with us.

Care experienced: a child or young person who is looked after, or has previously been looked after, whether they have returned to their family, left care as a result of a legal permanence order (including adoption) or left care as a 'care leaver'.

Child leaving the family home prematurely: sometimes referred to as 'disruption', 'family breakdown' or 'adoption breakdown', this phrase aims to describe the situation that occurs when a child leaves their adoptive or permanent home prematurely under any circumstances, including those who then become looked after under any legal order.

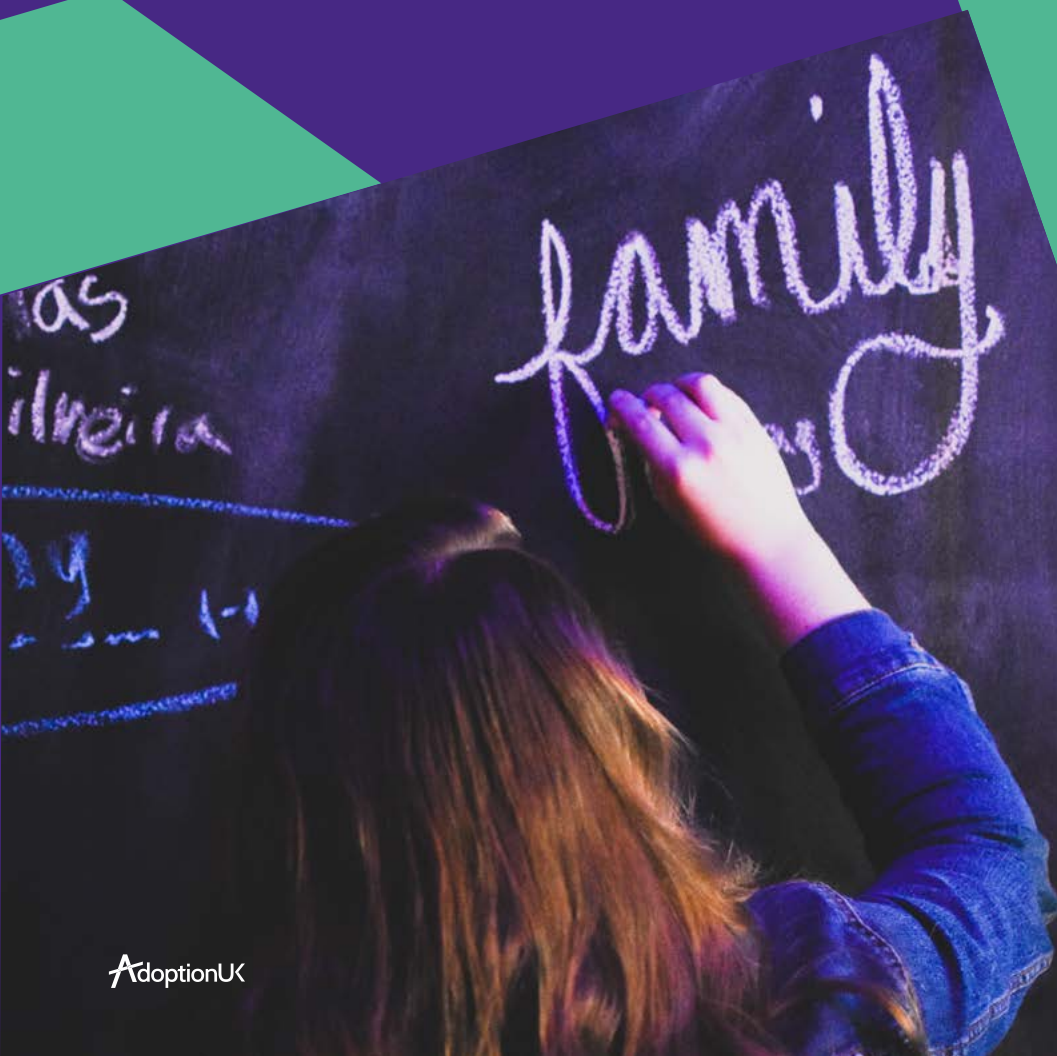
Contact: formal or informal arrangements made for adopted and previously looked after children to communicate, meet or spend time with members of their birth family. Although there is continuing debate around this terminology, it is still commonly used in government documents and is therefore used in this report alongside the more descriptive phrase, 'establishing and maintaining relationships with birth relatives'.

Early permanence: an umbrella term to describe pathways (including concurrency and fostering for adoption) designed to minimise the number of moves through the care system that a child will experience before permanence.

Looked after child: a child or young person who is currently in the care of the local authority.

Previously looked after child: a child or young person who has left local authority care as a result of adoption or other legal permanence order.

Summary of key findings and recommendations



Executive Summary

The *Adoption Barometer* is the UK's only comprehensive survey and analysis of the lived experience of adoption, from the creation of new adoptive families all the way through to the experiences of those who were adopted decades ago. It also includes an assessment of the policies and practices that affect the lives of adopted people and adopters across the whole of the UK. Now in its fifth year, with over 16,700 unique survey responses, we have a rich picture of modern adoption, of how the system is evolving, of the direction of travel, and of the stubborn challenges that persist.

There are things to celebrate. More adopted children than ever before are able to maintain ongoing relationships with their birth family. The quality of life story materials in Wales has soared. In England, families who have accessed the Adoption Support Fund have reported a significant positive impact for their children. In all nations of the UK, there are some welcome improvements in the adoption system and in the lives of adopted people and adopters. Where there has been concerted effort, and financial and professional investment, things have got measurably better.

Nevertheless, the adoption system and statutory services like education and health are still letting far too many adopted people down – many of whom face considerable challenges throughout their lives because of their traumatic experiences in early childhood. In this year's report, we hear that adult adoptees, who are often living with the consequences of a lifetime of poor support, feel abandoned. These failings are both morally and economically indefensible.

This year's report is a snapshot of lived experience during 2022 – a year which began with some Covid-19 restrictions still in place, saw significant political upheaval in Westminster, and welcomed the long-awaited Adoption and Children Act (Northern Ireland) 2022 – but it also looks back over five years of policy change, data and individual stories.

How we've assessed policy, practice and lived experience

With the help of adopted people and adopters, we have formulated a summary of what 'good' looks like at each stage of the adoption journey and assessed policy, practice and lived experience against these summaries.

Our assessment of policy and practice is set out, nation by nation, in tables, summarised by scores of 'poor' (weak or no policy/practice in this area), 'fair' (some helpful policy/practice in this area) or 'good' (mostly helpful policy/practice in this area).

Our assessment of lived experience focuses on key questions from the *Adoption Barometer* survey, recording the proportion of respondents who agreed with each statement being assessed. Based on our analysis and these scores, we have called for changes that we believe would make the most difference to the challenges adopted people and adoptive families are facing today.

Any names included are pseudonyms to protect the confidentiality of contributors.

Summary of recommendations

Free, accessible, high-quality support for adoptees of all ages, whenever they need it.

This means:

Quality standards for preparation, approvals and matching to ensure prospective adopters are well equipped to meet the needs of the children who are placed with them, wherever they live in the UK.

Ringfenced, multi-year government funding for adoption support in all nations of the UK.

Free, expert support to establish and maintain relationships with birth relatives for adoptees of all ages.

Standalone multi-disciplinary support plans for every child to be placed for adoption, with a duty to deliver the support required.

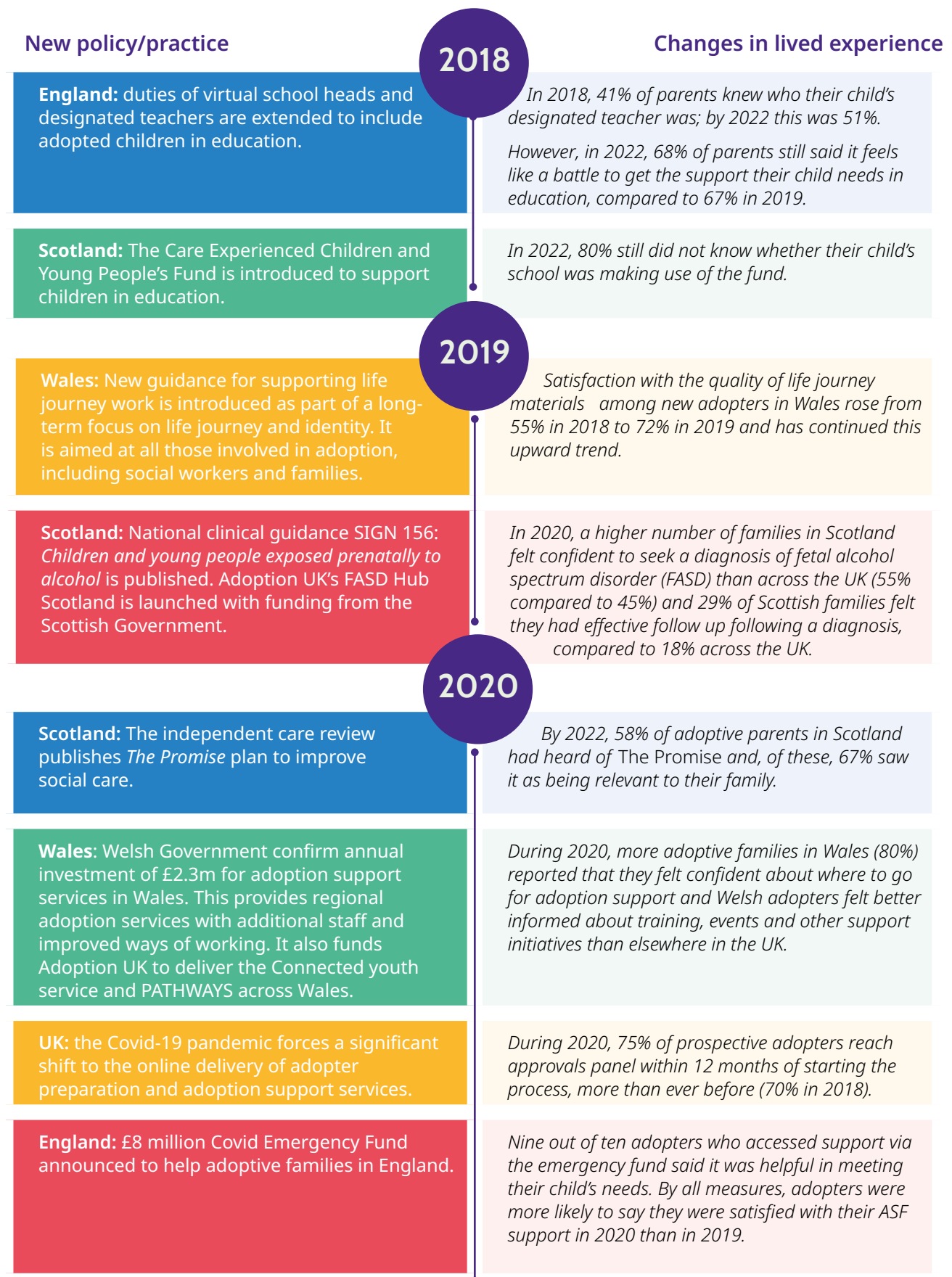
Education and health professionals trained in early childhood trauma.

Free, professional, adoption-informed therapeutic support for adult adoptees.



Five years of adoption policy and legislation and its impact

Over the lifetime of the *Adoption Barometer*, significant new strategy, policy and legislation has been introduced in all four nations of the UK. This timeline plots its impact in the adoption community.



New policy/practice

2021

Changes in lived experience

UK: Covid-19 restrictions continue; many services continue online.

By 2022, 89% of approvals panels were being held online; 81% said their approvals panel was a good experience overall.

England: National Adoption Strategy published including a commitment to best practice for contact arrangements.

In 2021, the proportion of adoptive families with direct contact had risen to 31% compared to 23% in 2018. However, only half felt confident their agency could provide effective support with contact.

2022

Northern Ireland: The Adoption and Children Act (Northern Ireland) 2022 is passed.

The Act includes a duty on adoption agencies to assess support needs and deliver the support identified, making Northern Ireland the first nation to enshrine such a duty in law.

England/Wales: The Joint Committee on Human Rights publishes *The Violation of Family Life: Adoption of Children of Unmarried Women 1949-1976* report.

Only 23% of adult adoptees feel they have all the information they need about their early life and how they came to be adopted; 96% agree that suitable counselling, therapy and mental health support should be available at no cost and throughout the lifespan of adoptees.

England: National Adoption Strategy provides an extra £7 million for adoption services.

Government strategy emphasises the importance of listening to those with lived experience and the Adoption Barometer is cited in the strategy as one of the key ways the success of the strategy will be measured.

England/Wales: Adoption UK worked within a coalition of organisations and individuals with lived experience to push for a new NICE standard on FASD assessment and prevention which was introduced in 2022.

In 2022, only 22% of adopters felt that healthcare professionals were knowledgeable about FASD, demonstrating the urgent need for the new standard.

England: Final report of the Independent Review of Children's Social Care is published.

The report focuses on kinship and foster care and has little to say about adoption. Adoption UK and others call for a more joined up approach.

England: removal of therapist travel time costs from Adoption Support Fund funding.

Adoption UK's Cost of Living report revealed 79% were worried that the cost of living crisis would reduce their child's access to adoption support. The government has committed to monitoring the impact of this policy.

England: announcement of the extension of pupil premium plus funding to include children adopted from overseas from April 2023.

The Early Stages

What does 'good' look like?

- The approvals and matching process is clear and fair and prepares adopters well to meet the needs of the children they will be parenting.
- Social workers and prospective adopters work together closely in a proactive search for a match.
- Adopters receive comprehensive information about their child before placement and are clear about how their child and the whole family will be supported once they are placed.
- Introductions are well planned and supported.
- High-quality life story materials are provided during the early months of placement.
- Arrangements for ongoing birth family contact focus on the needs of the child, include a commitment to provide support to all involved and are regularly reviewed.
- Every family receives a programme of core support designed for the first year as a family.

How does the reality match up?

As in previous years of the *Adoption Barometer*, the early stages – approvals, matching and moving in – are a generally positive picture, particularly when it comes to training and support during approvals. However, children with a plan for adoption are spending too long in care, and some prospective adopters are still experiencing long delays. There have been some improvements since 2018 in the assessment of children pre-placement, and support planning, but this is still not giving the majority of adopters what they require to meet the needs of their children.



How does this compare to five years ago?

Assessment of current national policies		Score			
		England	Northern Ireland	Scotland	Wales
There are nationally agreed timescales for each stage of the adoption approvals process.	2022	GOOD ↔	POOR ↔	FAIR ↔	GOOD ↔
	2018	GOOD	POOR	FAIR	GOOD
There are nationally agreed standards for training and preparation of adopters.	2022	FAIR ↔	FAIR ↔	FAIR ↔	GOOD ↔
	2018	FAIR	FAIR	FAIR	GOOD
There is tailored preparation and support for early permanence adopters.	2022	FAIR ↔	FAIR ↔	FAIR ↔	GOOD ↑
	2019	FAIR	FAIR	FAIR	FAIR
There are national standards determining the quality and delivery of life story materials.	2022	FAIR ↔	POOR ↔	POOR ↔	GOOD ↔
	2018	FAIR	POOR	POOR	GOOD
Every child receives a multi-disciplinary assessment of support needs before placement, shared with adopters and informing robust support plans.	2022	FAIR ↑	POOR ↔	FAIR ↑	GOOD ↑
	2018	POOR	POOR	POOR	POOR



Assessment of lived experience (Changes of less than 5% are indicated by a horizontal arrow →)		Score				
		UK	England	Northern Ireland	Scotland	Wales
My approvals process ran smoothly and with no delays.	2022	40% →	42% →	30%* ↓	28% ↓	45% →
	2018	42%	41%	40%	47%	44%
My social worker understood and supported me during the approvals process.	2022	89% ↑	89% →	81%* →	85% →	85% →
	2018	84%	85%	81%	84%	83%
I feel that everything possible was done to find the right match for me and my adopted child.	2022	82%	82%	100%*	81%*	80%*
	(asked for the first time in 2022)					
I feel as though I was given all the information I needed about my child before they moved in.	2022	72% →	72% →	83%* ↑	62%* ↓	58%* ↓
	2018	73%	72%	70%*	70%	80%
The approvals process prepared me well for becoming an adoptive parent.	2022	73%	74%	67%*	81%*	59%*
	(asked for the first time in 2022)					
Our introductions were handled well and ran smoothly.	2022	81% →	81% →	100%* ↑	77% ↓	84% →
	2018	80%	80%	70%*	86%	82%
I have a written adoption support plan in place.	2022	32% →	32% →	N	36%* →	40%* ↑
	2018	35%	36%	N	40%*	28%*
I received life story materials by or soon after the adoption order.	2022	52% →	51% →	N	58%* ↑	64%* ↓
	2018	52%	51%	N	33%*	77%*

* - Fewer than 30 respondents were eligible to answer the relevant question(s)

N - Fewer than 10 respondents were eligible to answer the relevant question(s)



Recommendations

The approvals and matching process and the early months of placement present a crucial window of opportunity to set things up well for the future. These early stages must be focussed on the needs of each individual child and must give adopters the best possible chance of meeting these needs.

Our recommendations are:

Set nationally agreed timescales for preparation and approval from initial contact with the agency to approvals panel, and timescales targets for all agencies. All timescales to be monitored centrally on an annual basis.

Tailored preparation courses to help adopters meet the differing needs of children to ensure that adopters are prepared well to parent the children they are likely to be matched with, such as sibling groups or children with disabilities. Life story and therapeutic parenting training should be incorporated into all preparation courses. Courses must be able to meet the needs of the full diversity of prospective adopters.

Improve support for prospective adopters during matching, including training on navigating the matching period during preparation courses. Communication with adopters during this period should be regular and supportive, with routes to peer support offered wherever possible.

Collect national data about prospective adopters who do not complete the process to enable agencies to make evidence-based improvements to the approvals and matching process.

Improve diversity amongst the social care workforce and on adoption and matching panels to encourage the broadest possible range of prospective adopters who may be able to meet the needs of children who spend longest in care.

Provide a multi-disciplinary assessment of need and a standalone support plan for every child to be placed for adoption which anticipates future as well as current support needs, is agreed with adopters prior to placement and is linked to a commitment to provide the support that is specified.

Correct adoption leave inequality by bringing entitlements for statutory adoption leave and pay for self-employed adopters into line with maternity entitlements for the self-employed. Provide greater flexibility of adoption leave between partners and equalise entitlements for adopters not eligible for Statutory Adoption Pay.

Give all new adopters access to peer support through their agencies from the time their child is placed with them through, for example, peer mentoring, buddying or community groups.

Improve support for early permanence adopters by providing parity of training to early permanence adopters so they feel equally equipped in their role as foster carers as well as adopters. Training to include preparation for the possibility of reunification and follow-up support to be made available in this event.

Established Adoptive Families

What does 'good' look like?

- Every adoptive family has access to a good range of core support, including support groups, training and online resources.
- All those who need it can easily access free, high-quality, enhanced support.
- Birth family contact is managed effectively, well supported and reviewed regularly.
- Other statutory services, including health and education, have trained staff and sufficient resources to properly support adopted children and their families.

How does the reality match up?

Five years after the first *Adoption Barometer*, most adoptive families still feel it's a battle to get the specialist support their child needs. Established adoptive families show real resilience and commitment in the face of considerable and growing challenges. There have been improvements since 2018 in the policies and practice around core support and most adopters value the core support their agency offers. However, they are less satisfied with the quality and range of enhanced adoption support, including support for contact. There is still little confidence among adoptive parents that healthcare and education professionals understand the needs of adopted children.

How does this compare to five years ago?

Assessment of current national policies		Score			
		England	Northern Ireland	Scotland	Wales
High quality therapeutic support services are accessible to all adoptive families via a defined route and paid for through a nationally established ring-fenced fund.	2022	GOOD →	POOR →	POOR →	GOOD ↑
	2018	GOOD	POOR	POOR	FAIR
There are nationally agreed minimum standards for core adoption support.	2022	GOOD ↑	POOR →	FAIR ↑	GOOD ↑
	2018	FAIR	POOR	POOR	FAIR
There are national standards defining support for birth family contact.	2022	FAIR →	POOR →	POOR →	GOOD ↑
	2018	FAIR	POOR	POOR	POOR
Training on the needs of care experienced and adopted children is included in initial teacher training and education settings are resourced to support their needs through a dedicated funding stream.	2022	FAIR ↑	POOR →	FAIR ↑	FAIR ↑
	2018	POOR	POOR	POOR	POOR

Assessment of lived experience (Changes of less than 5% are indicated by a horizontal arrow →)	Score					
	UK	England	Northern Ireland	Scotland	Wales	
I am satisfied with the quality of the core adoption support I have accessed via my adoption agency.	2022	66%	64%	60%*	68%	75%
(asked in this format for the first time in 2022)						
Families with significant or urgent needs are provided with a package of enhanced adoption support.	2022	61% →	64% →	N	33% ↓	47% ↓
	2019	64%	66%	N	38%*	63%*
I am satisfied with the quality of the enhanced adoption support I received via my adoption agency.	2022	57% →	58% →	67%* ↑	54% ↓	55% →
	2019	55%	55%	51%*	59%*	58%*
My agency manages arrangements for direct and indirect contact effectively.	2022	58% →	57% →	65%* →	61% ↑	55% →
	2018	55%	55%	61%*	56%	53%
My child's school works with me to find the best ways to support my child.	2022	72% →	72% →	67%* ↓	72% →	80% ↑
	2018	74%	73%	82%*	70%	69%
My child's teachers have a good understanding of the needs of care experienced and adopted children.	2022	44% →	45% →	10%* ↓	40% ↓	45% ↑
	2019	45%	45%	37%*	50%	39%

* – Fewer than 30 respondents were eligible to answer the relevant question(s)

N – Fewer than five respondents were eligible to answer the relevant question(s)



Recommendations

All adoptees deserve high-quality, easily accessible and free lifelong support. We are still a long way from providing this. It goes beyond the support adoption agencies must provide, requiring radical improvements in the way health and education systems understand and support people who have experienced trauma in their childhoods.

Our recommendations are:

Secure long-term funding for adoption support through a 10-year commitment to the Adoption Support Fund in England; multi-year, ring-fenced funding to be introduced in Scotland, Wales and Northern Ireland.

Train education and health professionals in early childhood trauma and associated conditions to support the needs of adopted children and young people and, in schools, provide resources to meet these needs through targeted funding. This should include understanding of highly prevalent conditions such as Fetal Alcohol Spectrum Disorder and attachment disorders.

Improve data on adopted children in schools through the collection and analysis of data on attainment, special/additional educational needs and exclusions by all UK governments.

Improve support for maintaining links with birth families, offering training and support to all those involved in helping children maintain birth family relationships. All plans for contact to be regularly reviewed.

Agencies to offer an annual 'keeping in touch' opportunity to review support needs for all adoptive families to reduce the proportion of adopters who are facing significant challenges or at crisis point at the time of asking for help.



Families with Older Adopted Children and Young People

What does 'good' look like?

- Effective and timely support around establishing or maintaining contact with birth families is provided.
- Statutory services, including health, housing and education take a trauma-informed approach and have staff who are well trained to be able to support adopted young people.
- All adopted young people have access to bespoke, funded support for their age group, including peer support.

How does the reality match up?

Families with older children and young people face serious challenges and shortfalls in support and are more than twice as likely as those with younger children to describe themselves as at crisis point. There has been little improvement in policy or practice for this age group since 2018. Parents still have very low confidence in statutory services and most still do not feel that there are suitable, specific adoption support programmes for teens and young adults, including support for contact.



How does this compare to five years ago?

Assessment of current national policies		Score			
		England	Northern Ireland	Scotland	Wales
There is a nationally agreed framework for supporting adopted young people as they transition to statutory services for adults.	2022	POOR →	POOR →	FAIR ↑	FAIR ↑
	2018	POOR	POOR	POOR	POOR
Outcomes for adopted children and young people are tracked nationally and this information used to drive improvements in the provision of adoption support, education and health services.	2022	POOR →	POOR →	POOR →	POOR →
	2018	POOR	POOR	POOR	POOR
Statutory services (e.g., education, housing, mental health, youth offending) are required to provide trauma training to all members of staff and engage a designated member of staff to oversee engagement with all care experienced young people.	2022	POOR	POOR	FAIR	FAIR
	(not previously scored)				

Assessment of lived experience (Changes of less than 5% are indicated by a horizontal arrow →)		Score				
		UK	England	Northern Ireland	Scotland	Wales
I feel well prepared for the possibility of direct contact during the teen years.	2022	31%	31%	N	36%	29%*
	(asked in this format for the first time this year)					
I feel confident that appropriate support is available from adoption support services for teens and young adults and their families.	2022	28%	27%	N	26%	33%*
	(asked for the first time this year)					
I feel confident that other statutory services (e.g., mental health, housing, education) have a good understanding of the needs of adopted young people.	2022	9%	10%	N	11%	4%*
	(asked for the first time this year)					
My young adult child is getting the support they need from statutory services.	2022	11%	11%	N	11%*	10%*
	(asked in this format for the first time this year)					
My young adult child is in education, employment or training.	2022	76% ↑	76% ↑	N	73%* →	74%* ↓
	2018	71%	71%	78%*	74%	84%*

* Fewer than 30 respondents were eligible to answer the relevant question(s)

N – Fewer than 10 respondents were eligible to answer the relevant question(s)

Recommendations

The transition to adulthood presents challenges for every young person but particularly for those who have experienced trauma in their early childhoods. The foundations of a healthy transition to adulthood must be laid in the very early stages of a child's life, but most young adoptees are likely to need extra support once they reach their teens in order to avoid crises for them and their families.

Our recommendations are:

Extend adoption support services for children/young people to at least age 26 (see below for our recommendations for support for adult adoptees) since many adopted people need specialist support into adulthood. This would bring support for previously looked after young people more into line with that for care leavers.

Improve the transition from child to adult services to avoid young people falling off a 'cliff edge' during the transition to adulthood. Governments should bring the thresholds for accessing adult services more into line with those for child and adolescent services.

Training and peer support to be made available for all adopters when their children reach 13, with a specific focus on parenting adopted teens, to include online safety, navigating contact, managing challenging behaviour and helping school to support your child.

Targeted support pathway and peer support for all adopted teens and young adults provided by adoption agencies. This should include access to therapeutic support, help to navigate services and access to ongoing peer support which could include support groups, buddying or mentoring by youth workers with lived experience of being an adoptee.

Creation of a best practice guide focused on support for young people and families in crisis, including context-specific approaches to safeguarding, joined up approaches to supporting young people and families, help to repair and rebuild relationships and enable parenting at a distance wherever possible.



Adult Adoptees

What does 'good' look like?

- Easy and well supported access to personal, historical records.
- All adopted people wishing to trace and re-establish contact with birth relatives have access to the professional support they need.
- All adopted people have free, lifelong access to appropriate, adoption-informed therapeutic services and safe, high-quality peer support.
- Adopted people form the core membership of advisory groups that design and oversee the provision of services for adult adoptees.

How does the reality match up?

Support for adult adoptees is poor. Respondents' confidence in the availability and suitability of therapeutic services was extremely low and most did not feel that statutory services (such as health) had a good understanding of the needs of adopted people. Most of those who received therapeutic support had paid for it privately and many more could not afford to do so. The current requirement for Ofsted registration in England creates a significant barrier. The experience of looking for historical personal records, tracing and reunion is poor. The survey indicates that adult adoptees feel forgotten and abandoned by policy makers and service providers at all levels.

Assessment of current national policies	Score			
	England	Northern Ireland	Scotland	Wales
There are nationally agreed standards for access to personal historical records and associated support services.	POOR	POOR	POOR	POOR
There are nationally agreed standards for support for continuing contact with birth relatives, tracing and reunion, including mediation and counselling.	POOR	POOR	POOR	POOR
Nationwide, free, lifelong therapeutic support for adopted people, designed to national standards, including therapeutic services, counselling and mental health support, is delivered by professionals with expertise in adoption.	POOR	POOR	POOR	POOR
Nationwide provision of peer support networks for adopted people.	POOR	POOR	POOR	FAIR
A national advisory board oversees the design and delivery of services for adult adoptees with a majority of the members being adopted people.	POOR	POOR	POOR	POOR

Assessment of lived experience	Score (UK)
I feel confident that suitable, professional support would be available to me when obtaining personal, historical records from the relevant authorities	44%
I have been supported by professional services to maintain any relationships with birth relatives that were established during my childhood through direct or indirect contact arrangements (excluding respondents who did not have such arrangements)	25%
I would feel confident approaching professional services for support with tracing or reconnecting with my birth relatives	58%
The counselling I was offered as part of tracing or reconnecting with my birth relatives was attuned to my needs as an adopted person	74%
I know where I can access counselling, therapeutic services and mental health support that is attuned to my needs as an adopted person	25%
I feel confident that a range of appropriate therapeutic services are available to me as an adopted person	17%
I feel confident that I can access formal and informal peer support networks if I wish to do so	47%





Recommendations

Adoption is lifelong and the challenges around early childhood trauma, and the loss of identity and family connection that come with adoption don't stop when someone reaches 18. Many adult adoptees did not get the right support as they were growing up and many also carry deep wounds from the circumstances of their adoptions. The adoption system must acknowledge this and deliver the lifelong support that is owed to all adult adoptees.

Our recommendations are:

Establish adult and youth advisory boards in each nation, led by adoptees, to advise governments and adoption agencies about policy and practice, based on lived experience.

All adult adoptees to have access to free, adoption-informed therapeutic services whenever they need them.

Free wraparound support for all parties during tracing and reunion, including access to free intermediary services and specialist counselling.

All adult adoptees to have access to peer support, such as befriending and support groups.

Formal apologies for historical forced adoption practices should be issued by governments in all nations of the UK, following the lead of the Scottish government.

In addition, Adoption UK supports the recommendations set out in *The Violation of Family Life: Adoption of Children of Unmarried Women 1949-1976*, including:

The government should consider as a matter of urgency how to make sure that the necessary regulations to protect standards [currently Ofsted registration] do not prevent mothers and adult adoptees from getting the support they need.

The government should monitor and publish compliance by local authorities with adherence to the guidance that sets deadlines for responses to requests for adoption records.

A system should be established so that a [birth] parent can pass on medical information that could be relevant to their child.

Conclusion

The responses to this year's *Adoption Barometer* survey, the analysis of current policy and practice and the assessment of changes over the past five years reveal an adoption system that is improving in some specific areas but is generally very slow to change. Adoption is lifelong and adopted people need support throughout their lives.

Three things in particular stand out. More needs to be done to resolve inconsistencies in pre-placement assessment and support in the early years so that fewer families reach crisis point later on. Urgent specialist support is needed for teenage children who are in crisis. Finally, adult adoptees of all ages feel abandoned, and are not getting the support they need. This needs to be urgently addressed. Adoption UK are ready to play our part. Led by adopted people we are shaping our own services and campaigning for more support.

It is time for governments and the wider adoption sector to accelerate progress towards the changes those with lived experience have been seeking for decades.





Our vision is an equal chance of a bright future for every child unable to live with their birth parents. We work to secure the right support at the right time for the children at the heart of every adoptive and kinship care family.

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