

Child rights and international adoption: A response to critics

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Do-gooder or straw man hypothesis?

It is alleged that we have set up a 'straw man' in suggesting that international adoption is justified on the basis of rescuing children from the harm caused by institutional care. Yet in the recent debate on international adoption in the European Parliament in the autumn of 2006, the whole day was spent on justifying an easing of regulations governing international adoption across Europe in order to reduce the number of children in institutional care. The TV journalist Chris Rogers has made a number of high-profile documentaries for British independent television, justifying international adoption on the basis of the harm done to children left in institutions. Therefore, we reject the claim that this is 'a badly formulated research question' (Gay y Blasco et al, 2008, p 63).

However, the research we refer to by Kadlec and Cermak (2002), suggesting this claim could be questioned, was never mentioned by respondents. The US study of 124 children adopted from Romania showed that only 54 per cent came from institutions (three per cent resident for less than two months), 17 per cent were adopted directly from hospital, 14 per cent from their biological families and 15 per cent from foster care or other living arrangements. The harm caused by removing children for international adoption from their primary carers and attachment figures (in biological families and in foster care) and their siblings has never been adequately researched but is certainly against the principles of the 1989 United Nations Convention on the Rights of the Child (UNCRC) (Article 21) and the Hague Convention. No matter how complex the political, economic and cultural factors are, all UN member states (with the exception of the USA) have signed and ratified the UNCRC and are expected to uphold the rights of the child as determined by international legislation (UNICEF, 1998).

Reliability and validity of the data

The data that are available to explore child care and protection issues are notoriously limited and difficult to collect. We felt justified in applying the official data collected by the World Health Organisation on the number of children aged less than three years in institutional care across Europe (using a questionnaire we devised) because our observation showed that approximately a third of children adopted internationally from sending countries in Europe are infants and toddlers. Admittedly, data from eight of the 21 countries used in the analyses are estimates from populations of children over the age of five. There was no standardised information across Europe, and our survey represents the most extensive official database available in this area. There is only one

country, Italy, where the estimate includes children in small institutions of less than 11 residents. Overall, the 2003 survey of 33 countries (Browne, 2005a) found that approximately 23,009 children under the age of three were in institutional care. This indicates that throughout the European Economic Community (EEC), 11 children in every 10,000 under three years of age live in residential care homes. Another 2003 survey using official statistics from 27 countries in central and eastern Europe and the former Soviet Union showed that most Russian-speaking European countries and newly independent states in Central Asia have at least 20 children in every 10,000 under three years in 'children homes' (UNICEF Innocenti, 2004). There was an overlap in the two surveys carried out in 2003 and a strong correlation was found for the number of young children resident in children's homes between the 11 countries that appeared in both surveys (Browne et al, 2006). This suggests that, although difficulties exist when collecting such information, reasonable estimates can be made and the data are reliable enough to inform policy and practice.

Findings

It appears from the responses to our article that people are unclear why some countries were included and some omitted from the analyses. Therefore, we have formulated a diagrammatic representation of our investigation and the inclusion and exclusion criteria we applied prior to statistical analyses (see Figure 1).

In Chou and Browne (2008), a positive correlation ($r = .786$, $p = .036$) was found between the proportions of outgoing international adoption (from 7 sending countries) and the number of children aged under three years in institutional care (per 10,000 in those countries). In addition, a positive correlation ($r = .590$, $p = .026$) was found between incoming international adoption (to 14 receiving countries) and the number of under-threes in institutional care in these countries. We are grateful that our incorrect plotting of Sweden on Figure 3 of the article (p 46) has been pointed out. We have also noticed that there is a correction required to Table 1 (p 43); incoming international adoption for Ireland is 69.4 per cent of all adoptions (and not 92.9%). Unlike the Austrian Central Authority, we did combine the three Austrian states to include an estimate for Austria in the analysis (see Table 1, p 43).

We double checked our correlation between institutional care and international adoptions in receiving countries and confirm that it is correctly stated, despite the errors in the figure and the table. Nevertheless, for this commentary, we have included the unofficial information on international adoption we held for Denmark and Greece and re-analysed the correlation for 16 receiving countries (see Figure 2). Consequently, there was an even stronger positive correlation ($r = .578$, $p = .019$) confirming our original findings. We accept that if Iceland, Norway, Slovenia and the UK were included in the analysis this positive correlation is lost. However, these countries are unique among the 52 member states of the European and Central Asian regions. They have

effective community-based services to support children and families in need and successfully prevent the use of institutional care for young children under the age of five by the provision of specialist foster care services. With little or no young children in institutional care and limited numbers of children available for domestic adoption, it seems appropriate for parents to be selected to adopt children from other countries where a domestic solution for these children cannot be found. Nevertheless, the UK and Slovenia have relatively few incoming international adoptions in comparison to Norway and Iceland.

Cause and effect

It should be pointed out, however, that measures of association do not prove causation and that longitudinal cohort studies are required to explore cause and effect. With regard to sending countries, we are currently examining the data from a longitudinal study of Romania where government data show a reduction in the number of children in institutional care only after a moratorium on international adoption was put in place in October 2001. At the peak of international adoption practices in 2000, 3,035 children were adopted abroad, which represented 70 per cent of all adoptions. In the same year, children (0 to 18 years) within institutional care also peaked at over 57,100 children. Only two years previously, in 1998, international adoptions from Romania were 2,017 and the number of children in institutional care was 33,356. This spurious relationship between institutional care and international adoption quickly reversed following the moratorium. By 2004, there were only 251 international adoptions (15% of all adoptions) and 32,679 children in institutions. Furthermore, following the moratorium, children living in domestic substitute families (kinship and foster care) increased by two-thirds, from 30,829 to 50,239, social workers were placed in maternity units to prevent infant abandonment, and community nurses were introduced to support families at home. In January 2005, legislation against international adoption from Romania (except in exceptional circumstances by relatives living abroad) was introduced and a law passed preventing the institutional care of children under two years of age (Browne, Chou and Vettor, 2006; Government of Romania, 2006).

Some may consider Romania to be a special case but poor practices have been observed in other countries, with specific examples from Moldova, Ukraine and Bulgaria reported to the Parliamentary Assembly of the Council of Europe (PACE, 2007). During her fact-finding visits, Ruth-Gaby Vermot-Mangold (Switzerland, SOC [SocialistGroup]), the rapporteur, met mothers from maternity units in these countries who assured her that they had given birth to babies who were in perfect health but who had been taken away from them immediately. The mothers never saw their babies again and were told that the babies had died. It was suspected that these babies were sold for international adoption. Similar cases had been reported in Romania (Vlad, 2004).

With regard to receiving countries, a recent report by Colombani et al (2008) to the French president acknowledges that in France there are some children who have been placed in institutions for a long period and very early in their development and that there is a need to consider these children for adoption alongside those from other countries. In 2005, there were 4,138 visas granted to children adopted from abroad in comparison with 841 domestic adoptions.

However, at the same time, 2,504 children were wards of the state, some of whom could be considered for domestic adoption. The strong demand for adoption in France is evident as there were 35,000 people who have obtained agreement to adopt a child yet only 5,000 adoptions per year (Colombani et al, 2008). This report suggests that in France there is too much emphasis on international adoption at the expense of children in institutional care. The same may be said for the USA (see Johnson et al, 2006). Because four out of five children internationally adopted into France come from outside Europe (Colombani et al, 2008), it was relevant for our article to discuss international adoption on a global level and the effect that it has on the care and welfare of children living in Europe.

The child rights perspective

As has been stated by our critics, one of the basic principles of the UNCRC is the child's right to grow up in a family. However, they failed to mention that the same Convention also states that the child should not be separated from his or her biological parents unless it is absolutely necessary and, most importantly, that it is the child's right to have services available to help and support his or her parents when they are in difficulty (Article 19). Furthermore, Article 21 emphasises that international adoption is considered only after all other domestic alternatives have been explored and failed. The Council of Europe (PACE, 2000) affirms these principles and states that the child has the right to know and be brought up by their parents in so far as this is possible. The purpose of international adoption must be to provide children with a mother and a father in a way that respects their rights, not to enable foreign parents to satisfy their wish for a child at any price; there can be no right to a child.

In the same PACE (2000) document, a similar opinion is expressed to that of UNICEF's (2004) observation that international adoption has transformed into a market regulated by commercial laws of supply and demand. This aspect of our article was not commented on by our critics. According to UNICEF and other non-governmental organisations (NGOs), this market is global and not restricted to Europe. Our previous article (Chou et al, 2007) identifies the commercial nature of international adoption on the internet. The fact that countries in transition use international adoption as a first resort rather than as the last resort has been reported in a number of NGO reports (e.g Carter, 2005) and UNICEF reports (UNICEF, 2004; Browne, 2005b, 2005c, 2007; Browne, Vettor and Dejanovic, 2006). Therefore, it is naïve to believe that sending

countries make children available for intercountry adoption because children in institutions in their realms cannot be found homes locally.

Worldwide, institutions or residential care homes for children are often referred to as 'orphanages'. This is despite the fact that European research has shown that the vast majority (94 to 98%) of children in 'orphanages' have at least one living parent, often known to the authorities (Tobis, 2000; Carter, 2005; Browne, 2005a). It is acknowledged that these figures do not refer to children in conflict or disaster zones but even in these areas, only a minority of children in institutions are orphans, with many of them being displaced and separated from a living parent or relative whose whereabouts may be unknown. Perhaps the increasing numbers of HIV orphans in Sub-Saharan Africa are the only exception to this misnomer, although it has been reported that 59 per cent of children in Zimbabwe living in institutions have at least one parent alive (Browne, 2008).

Our research team have emphasised the harm to children as a consequence of early institutional care (Johnson et al, 2006) and have spent the past five years mapping the problem across Europe and identifying best practices in the deinstitutionalisation and transformation of children's services (see www.tipdoc.info). We are not opposed to international adoption when it is in the proven best interest of the child and upholds the rights of the child; that is, after all domestic alternatives have been tried and failed, following Article 21 of UNCRC (Chou and Browne, 2008, p 41).

Research into the effects of international adoption has so far been limited to developmental studies of internationally adopted children compared to children born and brought up in the receiving country and this has shown mixed results in terms of outcome. Large-scale investigations comparing children fostered or adopted (sometimes the only distinction is that the foster carers are paid and have no legal jurisdiction over the child) in sending countries with children adopted abroad have yet to be made. Therefore, it is inappropriate to conclude that international adoption is superior to family-based domestic alternatives.

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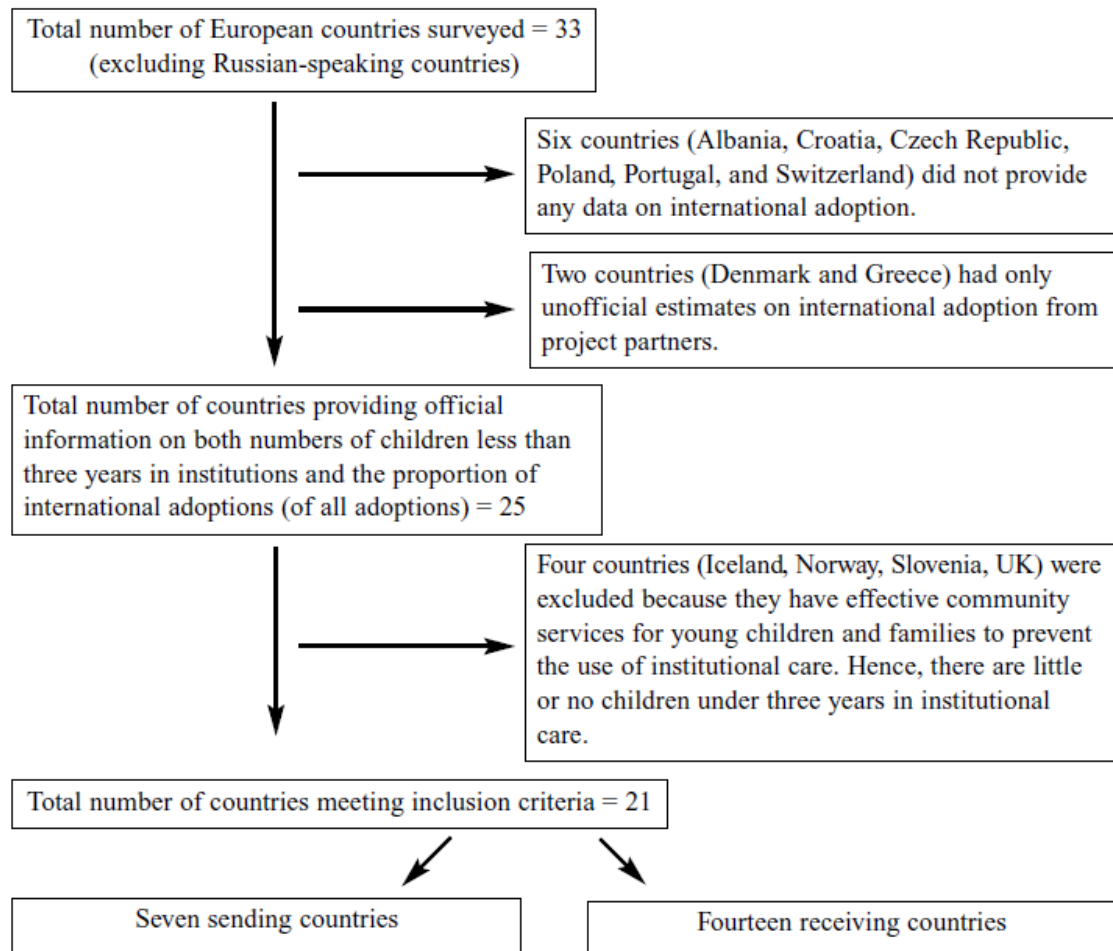
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Figure 1

Investigation into the association between institutional care and the international adoption of children in Europe (Chou and Browne, 2008)



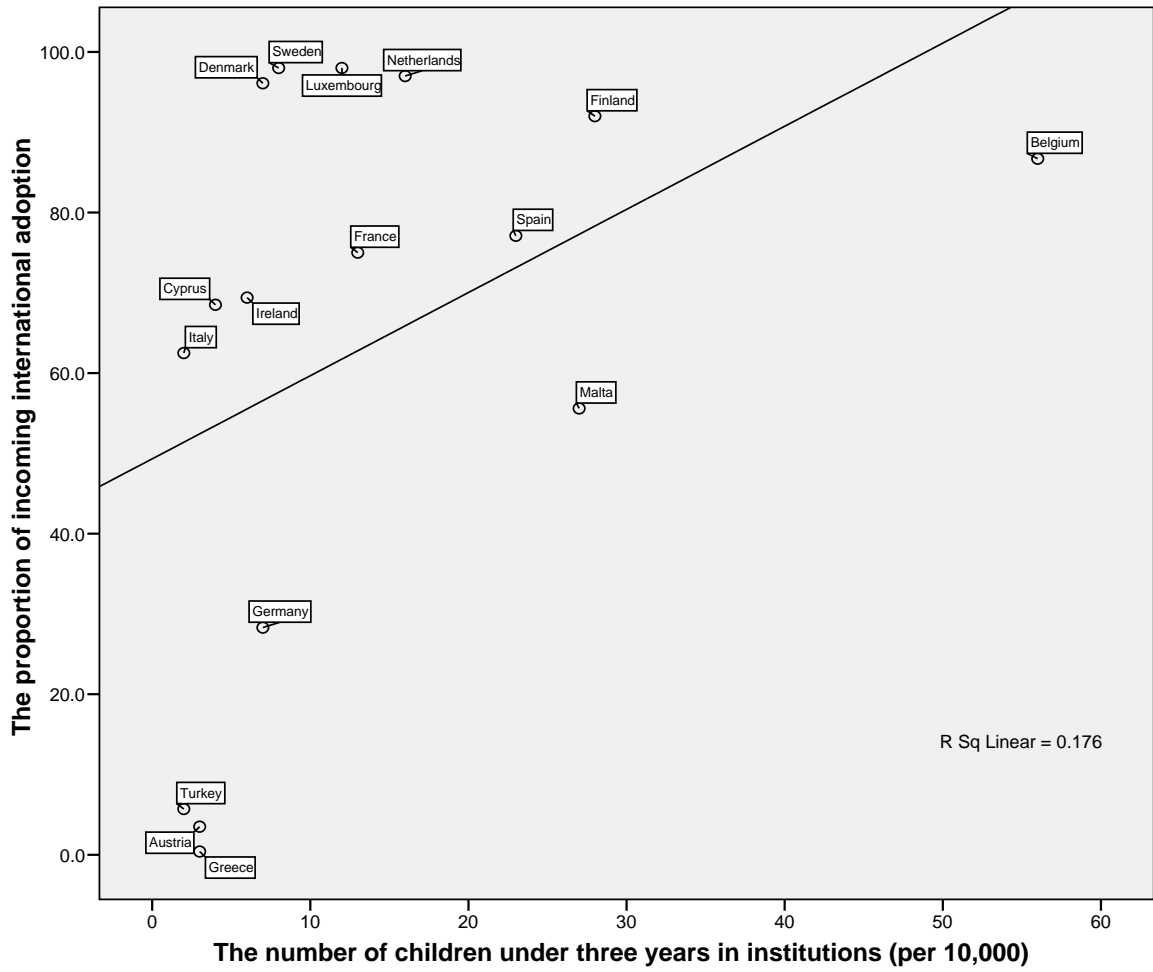


Fig 2