

The adoptive kinship network: issues around birth family contact in adoption

June Thoburn

Introduction

The legislation, protocols and practice relevant to relationships between birth family members, adopters and adoptees (as children and adults) has changed over time and varies across countries in light of their particular models of adoption in general and adoption from care specifically. This is apparent in the past and present language used. In England, the more rights-based term ‘access’ changed in legal and practice terminology to ‘contact’, and the term preferred by some members of adoptive and birth families is now ‘family time’. Some authors of the chapters in this book refer to ‘visitation’ for meetings and use the broader term ‘open adoption’ for a wider range of arrangements. These changes in terminology recognise movements in legislation and practice that have occurred in recent years. Acknowledgement has grown that post-adoption links will vary over the lifetime of the adopted child/adult and with differing lifetime events of the birth and adoptive family members. For their research on contact in adoptive families, Neil et al (2015) use the term ‘communicative openness’ (first used and summarised by Brodzinsky [2006] and more recently by Grotevant et al [2013]) when referring to the approach of adopters who have succeeded in making a range of contact arrangements work well for children with differing needs.

Although the impact on the day-to-day social and inner worlds of the adults and children involved in post-adoption contact have much in common across national boundaries, the way in which it is experienced by adults and children will also depend on the legal provisions or professional approaches to adoptions from care. For countries such as Norway and Ireland, where most adoptions from care have been by existing foster parents with whom the child has

lived for years rather than months, arrangements for family links for children in long-term foster family care are very relevant to post-adoption arrangements. The Norway chapter reports movement towards encouraging ‘open adoption’, and in New South Wales, being willing to facilitate continuing birth family links is a requirement for prospective adopters in a specialist ‘permanence’ programme (Tregeagle et al, 2014). For England, where, in recent years, most placements for adoption from care are of young children with families not previously known to them, the emphasis moves very quickly to a consideration of pre- and post-placement links between birth families and adopters, and the relational transfer of the child from the foster family to the new family. For countries that have a more ‘mixed’ system (including ‘high’ users of adoption from care, as with the US, and ‘low’ users, as with Finland), the relevant protocols, practice and research have to take account of contact with foster families as well as with adopters. For the US, where adoption by kin is fairly frequent, post-adoption contact will bring in different issues. Where post-adoption secrecy is still the prevalent model of adoption, continuing contact is unusual but can happen if persistent social workers, birth relatives, adopters and older children take steps to facilitate it.

This chapter focuses on birth family contact for children placed for adoption from care in jurisdictions in which the practice is fairly extensive and has existed for long enough for the development of a knowledge base for practice, as well as for some corresponding adaptations to legislation. As is clear from the other chapters in this volume, this is mainly the US and the UK nations, though the main focus for this chapter is England.¹ It starts with an overview of the context and growing understanding in the literature on what is now generally referred to as ‘contact’ for children in care needing placements with substitute families (sometimes referred to, especially by professionals and the children and adopters themselves, as ‘families for life’ or ‘forever families’). The term ‘contact’ is used as shorthand for a range of practices for setting up and maintaining meaningful links between members of the birth family and the child as they grow to maturity in the adoptive family.

The context and developing practice of contact within UK child placement services

There are overarching principles and understandings from child development and the social sciences (see, especially, Kirk, 1964; Brodzinski, 1987; Fahlberg, 1994) that have informed adoption practice

in general and adoptions from care in particular, and that underpin practice when deciding on and facilitating appropriate continuing links. Thoburn (1994) has summarised the broadly agreed conclusion that success when placing children in care, to which the appropriate contact arrangements for each child and family will contribute, is for the child to have a strong sense of identity and self-esteem that enables them to feel confident in making new relationships. This involves careful assessment and reassessment in order to best meet each child's needs at each stage of the journey through care, adoption and beyond.

To summarise a great deal of relevant child development and child placement research, children entering care whose long-term needs cannot be met by returning to birth parents or relatives need security, love, stability and to be 'part of a family' – what has come to be known as a 'sense of permanence' and belonging. However, they also need knowledge of their birth family and their personal and cultural history, and to be helped to come to an understanding of 'why' they needed to first leave their birth family and then become a member of another family. This involves being helped by their adopters, social workers and sometimes specialist therapists to work through and manage the distress of separation, loss and other traumas they have suffered, and (other than in exceptional circumstances) to maintain appropriate and meaningful links with adult and sibling members of their birth families. For those whose new family is of a different ethnic or cultural background, and especially if they are visibly different from their adopters, there is the additional task of integrating their birth heritage with the culture they grow up in, and for some, preserving family links will be an important part of that (Thoburn et al, 2000).

Those adopted from care when past infancy (whether by current foster carers or by adoptive families not previously known to them) may retain an attachment with one or more adult birth family members, as well as (in most, though not all, cases) becoming attached to their adoptive parents. In some cases, when sibling groups are adopted into the same family, there may be a difference in this respect between those joining the new family at different ages.

Moving on from overarching principles when thinking about birth family links, there are commonly held but 'unevidenced myths' that have been identified by researchers who have interviewed social workers and other practitioners (see, for example, Thoburn et al, 2000; Adams, 2012; Neil et al, 2015). These include:

- Birth family (and former foster family) contact will impede the growth of attachments when a child moves to an adoptive family.

- Contact will make it more likely that the child will wish to return to the birth family at some point.
- Contact between adopted children and siblings still living with or in contact with birth parents is likely to be unhelpful or even harmful as it is less easy for adopters to maintain their confidentiality and to control the information their child has about the birth family.
- Children past infancy who have ‘strong’ attachments to birth families will not be able to/should not be expected to form new attachments.
- Children who have a secure attachment in a planned short-term foster family will be able to ‘transfer the attachment’ with little difficulty. Although it is sometimes unavoidable, separation from and loss of a loved foster carer will always be stressful and the new parents need to be prepared for this, including, where appropriate, facilitating continuing contact with the foster carers.

An overview of the research on birth family links for children placed for adoption

The following sections summarise the lessons for policy and practice from this body of research (much of it coming directly from adoptees, birth relatives and adopters), as well as from the practice literature (see, for example, Fahlberg, 1994; Argent, 2002; Adams, 2012; for a research-based practice handbook, see also Macaskill, 2002). There is a body of research (mainly from the US) on (mainly consensual) adoption that reports on continuing birth family contact when children are placed as infants, most notably, the longitudinal study by Grotevant and colleagues (2013), which used case record data, in-depth interviews and standardised tests for different aspects of well-being to report on changing patterns of contact. The lack of post-adoption birth family contact in most ‘consensual’ adoption placements made before the 1970s is the main focus of the ‘adoption search and reunion’ studies of Howe and Feast (2000) and Triseliotis et al (2005). Much of the earlier UK research on birth family contact for children in care focuses on children in foster family care, and this is relevant to those adopted by their current foster carers (see, for example, Neil and Howe, 2004).

Among the government-commissioned research tracking child placement arrangements before and after the Children Act 1989 and the Adoption Act 2002 were studies that include information on contact for children in long-term care and adopted (Thomas, 2013). There are, however, very few longitudinal studies that specifically focus on contact arrangements at the different stages of a child’s journey through care into an adoptive family and as they grow up and into adult life. Boyle

(2017) scopes the more recent research (all published after 2004). She provides a content analysis of 11 publications that meet the standards for inclusion, identifying ‘attachment’, ‘separation and loss’ and ‘identity’ as key themes. Numbers of children in these studies range from two to 87 and they refer to seven separate research studies, four of which include long-term foster placements as well as adoption.

The larger number of UK studies of adoption from care usually combine case record data with anonymised case examples and direct quotes from birth relatives, children and adopters. Some include whether or not there is family contact as a variable that may be associated with positive or less positive outcomes. Fratter et al (1991) have ‘contact’ as a variable when reporting on 1,165 children placed from care with adoptive or permanent foster families, and Thoburn et al (2000) used quantitative and qualitative data to follow up 297 of those of minority ethnic heritage when they were between the ages of 17 and 25.

Fratter (1996) and Smith and Logan (2004) report on the views of adopters and birth parents who made arrangements for direct post-adoption contact, and, most recently, Neil et al (2015) report on a 16-year follow-up study of varying contact arrangements for children placed for adoption, most of whom were aged under two at the time of placement. The longitudinal study of Selwyn et al (2014) includes some children entering care and placed with adopters when past infancy. The longer pre-placement experience of traumatic events of some, often together with a mixture of positive and negative memories of birth relatives, in part, explains some differences in these two studies with respect to the benefits and stresses of contact. Older-placed children, for example, are reported to show more distress before and after face-to-face meetings than tends to be the case with younger-placed children who have not formed an attachment with the birth relative they are meeting.

Contact arrangements at the different stages of adoption from care

As noted in [Chapter 2](#) in this volume, in England, there was a shift in age at placement for adoption between the 1980s, when ‘hard-to-place’ specialist agencies placed children across the age groups from residential and foster care with adoptive and ‘permanent’ foster families, and the present time, when the majority join their adoptive families when under the age of three (Fratter et al, 1991; Selwyn et al, 2014; Neil et al, 2015, 2018). Over this period, in line with legislation and statutory

guidance, requirements for a 'permanence plan' for all children in care have strengthened and have to include a section on birth family links in the short and longer term. Depending on the year of placement, from the mid-1990s onwards, between 80 per cent and 90 per cent of children adopted from care in England had a plan for some form of contact (mostly indirect) with at least one adult birth family member.

There is very little research specifically exploring contact during the early period of care and the move to an adoptive family. An area that has been touched on concerns very young children during care proceedings, where researchers have explored a tension regarding contact: on the one hand, not pre-empting the court decision and therefore having contact arrangements that allow infants to maintain and (for those removed at birth) make attachments so that return can be facilitated if it becomes the preferred plan; and, on the other hand, the likely negative impact on the infant of the disruption of routines necessitated by frequent meetings with birth relatives. Researchers reporting on a 'concurrent planning' service report the views of a small number of prospective adopters and birth parents on what makes birth family contact during this period more or less stressful (Monck et al, 2003; Kenrick, 2009). Schofield and Simmonds (2011) draw on this research to identify questions about the impact of contact on the infant's development that need to be considered and the importance of allowing for change in contact arrangements and frequency during court proceedings.

The majority of the studies referred to earlier provide data and insights from the 'adoptive kinship network'² after the decision for adoption has been made. Some specifically report on the views of birth relatives and adoption workers, while most include information on the views of adopters and adoptees as children and young adults.

Neil and colleagues (2015) report on a 16-year follow-up study of different contact arrangements for children placed mainly under the age of two. The start of the study coincided with a period when some adoption agencies specifically sought adopters who were interested in facilitating direct contact with a parent or adult relative, so the sample of adoptive families allowed for a consideration of both direct meetings (mostly once a year but sometimes more frequent) and 'indirect' contact. In some cases, the adopted child shares in an age-appropriate way in these indirect exchanges (which are usually moderated by a specialist adoption worker), but in others, anything received from the birth family is 'saved' for the child to see 'when old enough'. Some adopters in the 'indirect contact' group met a birth parent before or shortly after placement and, over time, arrangements

changed, some direct contact becoming indirect and stopping, and some indirect arrangements moving to direct contact between adopters, birth relatives and the child, or just between the older child and birth relatives. Contrary to the research evidence that well-managed, agreed, direct contact is usually less problematic for all concerned than 'letter-box' contact, in recent years, face-to-face contact has become less frequent and 'letter-box contact' has become the norm, even for older-placed children.

These researchers also report that, over the past ten years or so, some adoptive children have begun to have contact with birth family members via social media. These reconnections are often driven by unmet needs of adoptees and birth parents to know about each other; however, this often sudden, and covert and unsupported contact can sometimes lead to difficulties for young people. Virtual or online contact may also be used by adults and young people just to gather information, or it may be a welcomed 'add-on' to existing face-to-face contact plans – allowing less formal and more frequent contact to take place, and making contact over large geographical distances more possible. Comments in the professional journals and social media indicate that online methods for retaining or re-establishing links are prompting professionals and adoptive parents to consider that a closed adoption cannot be guaranteed, and that the best way to avoid 'out of the blue' contact is to maintain open communication that meets adopted young people's needs. Research into the recent widespread use of digital technology to keep children in care in touch with birth family during the 'lockdown' necessitated by the COVID-19 pandemic suggests that digitally mediated contact could be a useful option for some adopted children to stay connected with members of their birth families (Neil et al, 2020).

A growing source of information comes from 'experts by experience' in the form of reports both from post-adoption or parent advocacy groups and on social media. One recent example is the 'Two Good Mums' series of podcasts, in which a birth parent and an adoptive parent talk of the moves they made from the trauma of loss through compulsory removal into care and the sadness of involuntary childlessness, to the rewards of their present regular emails and annual family meetings.³ Another adoptive parent blogger and post-adoption counsellor (Mummy Tiger Blogs, 2018), along with her adopted daughter, advocates for more flexible contact arrangements and away from formulaic practices based on age of the child and reason for care rather than individual circumstances: 'Last weekend I left my children with the woman courts decided couldn't care for them and

social workers had said was too volatile for me to meet' (Twitter@mummytiger1, 18 November 2018). For others, the experience was more stressful, as with the following adoptive mother interviewed by Neil et al (2015: 97) who kept up with the infrequent family meetings she had committed herself to at the start of the process:

you're spending time with people that you don't really know all that well. You have this odd link with them that's not based on friendship or family or background or anything. ... And then there's also, it's just another reminder that she's not 100% yours. So, I have to cope with that.

What do we know about how contact arrangements impact on outcomes in the longer term?

Researchers use a wide range of outcome measures, which makes it difficult to compare what different studies have to say about the impact of contact arrangements on satisfaction with adoption and child well-being outcomes. Outcome measures that are used differently according to research method are:

- the placement lasts/disrupts (though duration of follow-up varies) (Expressed more positively: did the adoptive family become the child's 'family for life'?);
- Physical and psychological well-being (treatment aims achieved), including resilience, self-efficacy and self-esteem;
- educational/employment aims achieved;
- making satisfactory relationships as an adult;
- awareness of and comfort with personal, ethnic and cultural identity as an adopted person; and
- satisfaction of child/young person, birth parents and adopters with their adoptive family experience and with placement practice.

The last two of these specifically require a consideration of any ongoing birth family links.

The research, especially on placements that have disrupted or come under severe stress, points to the conclusion that the wrong match (with respect to legal arrangements but especially to the matching of adopters' needs, wishes and motivations with the child's needs) cannot be 'mended' by even high-quality practice and services; it can only be 'patched up'. Adopters and adopted young people have argued that the child's need for the maintenance of meaningful links should be

more central to the matching process and detailed placement plans than it usually is (see, for example, the ‘blogs’ referred to earlier; see also Featherstone et al, 2018).

As noted elsewhere in this volume, numbers adopted from care in England have increased but the proportion placed beyond infancy has decreased and there has been a decline in the numbers who have ongoing post-placement direct contact. Recent longitudinal research has found no statistically significant link between the type of contact arrangements and placement stability or other well-being outcomes. However, along with US researchers, Neil et al (2015) report that the characteristic of ‘communicative openness’ was more likely to be found among the adopters of children in the ‘more successful outcome’ group, and that this characteristic was more likely when there was some direct contact with at least one adult birth family member. These researchers and others who have directly sought the views of children in adoptive families (Thomas et al, 1999; Thoburn et al, 2000; Smith and Logan, 2004; McSherry and Fargas Malet, 2018) report that those who do have contact with a birth relative are generally broadly content with their contact arrangements. Of those who were not content, rather more wanted more frequent than less frequent contact, and with more rather than fewer family members.

From their detailed conversations with young adoptees as they grew up, Neil et al (2015) concluded that:

- satisfaction with contact varied within all types of openness, being associated with contact quality and stability more than type or frequency;
- dissatisfaction was often associated with gaps in or unexplained cessation of contact, and this was most likely with ‘letter-box’ than with ‘direct’ contact; and
- most saw some benefits in having contact and argued that the option should be there (‘Even if the contact is only brief ... I think social workers should ensure that the option of staying in contact is always left open’ [Neil et al, 2015: 255]).

For whom and why is contact important and what are the risks of inappropriate or badly managed contact?

The evidence about possible harms is sparse, and conclusions are mainly about direct contact and mainly drawn from case analyses of very small numbers (see, for example, Howe and Steele, 2004). This tends to be mainly about pre-placement contact since direct

post-adoption contact for very young children is unusual, and tends to mainly concern slightly older children who have had more extensive experience of abuse or rejection. Authors writing from a psychological or child psychiatry perspective argue that even young children may be re-traumatised on seeing the parent they associate with harm, or that a child's sense of safety and trust in the new family may be impaired. Some researchers, including Selwyn et al (2014), report cases when parental contact has contributed to destabilising a placement (especially in adolescence and when social media is used by a birth relative or teenager to renew or increase contact without the knowledge of the adoptive parents).

The research and practice texts have more to say about the potential benefits of appropriate and well-managed contact, and note that benefits may be gained when links are maintained with some family members (often grandparents and siblings) and not others. From the range of studies and research syntheses from across continents that are drawn upon here, the potential benefits of seeking to maintain appropriate meaningful links with the birth family, if ways of doing so can be safely arranged, for the child and young adult are as follows:

- it helps the child and young adult to have a clearer sense of genetic and cultural identity (contact with family members can be especially important to a sense of ethnic and cultural identity if the adopters are of a different ethnicity);
- it helps the developing child and young adult to have an understanding of and be comfortable with their identity as an adopted person;
- it can contribute to higher self-esteem in the young person and adult;
- for some who have knowledge of a parent and of the parent's difficulties, it helps to stop them worrying that the parents are coming to harm, and also any siblings they are aware of who are still with the parent;
- when carefully managed, it can reduce the risk of the placement breaking down (before or after the adoption order) and the child returning to care;
- for children placed past infancy (including young children for whom birth family ties improved during the period of temporary foster care), it can offer continuity of relationships and can help overcome the grief associated with separation and loss;
- it may provide a contingency plan if a placement does not work out (there are examples, especially for children with disabilities, when a birth family member has stepped in to provide 'short break' care for the adoptive family); and

- by retaining links that can possibly come into their own as the child goes through adult life, there is an increased chance that the adopted person will have at least one ‘family for life’ (this applies especially to maintaining sibling links).

The potential benefits for adopters (see Thoburn et al, 2000; Jones and Hackett, 2007; Neil, 2010; Neil et al, 2015, Featherstone et al, 2018) are as follows:

- it gives them a more rounded picture and fuller understanding of the birth family;
- it helps them to communicate with their child and to adapt how they do so as the child’s understanding changes;
- it helps them both early on and as their love for the child deepens to manage anxieties (‘For me, a mother popping up out of the blue would feel very threatening. ... I don’t have that threat because we already have that relationship with her’ [Neil et al, 2015: 84]); and
- it can bring them closer to their child (‘I think it actually makes them feel more part of our family. ... Every contact we come away feeling more secure really ... more certain that they need us as parents and that they are our children’ [Neil et al, 2010: 162]).

The potential benefits for birth family members

The members of the ‘adoptive kinship network’ who speak most appreciatively to researchers about their experience of appropriate continuing links are birth parents and relatives (Neil et al, 2010). In England, placement practice and judicial decision-making over the past ten years or so follows the ‘formula’ that has grown from custom and practice. Contact is discussed (as required in the legislation) and the decision is taken that there will be no direct contact, but there will be agency-monitored ‘letter-box’ contact. This practice results in very few birth relatives being asked if they would like to retain direct contact, even when they have been important parts of the child’s life before and during care. Some birth parents are too distressed or emotionally low to respond to the (infrequent) invitation of a social worker to discuss possible contact arrangements. Often, the assumption is made by social workers and matching panels, even for older children with fairly positive existing links, that an initial reaction of birth parents to the decision that their child will not return to them is a once-and-forever response, and no attempt is made to help them through their anger or distress and reach an arrangement that can benefit their child

and themselves. The predominant response made to researchers by birth parents and relatives having any form of sustained contact, though especially planned and facilitated meetings, is gratitude that this allows them to ‘still be a mum [dad or grandparent]’ even though not able to be a full-time parent. Researchers cite birth relatives who find actual meetings or even sensitively written letters to be sources of comfort that their child is loved and cared for (Featherstone et al, 2018). The other response is that having regular updates frees them from ‘thinking the worst’ – they want to know, though do not need details, if not all is well. For some, the opportunity to ‘still be a mum’ has meant that they decided against having other children.

The importance of pre- and post-placement services that support contact arrangements

The qualitative research studies are rich with ideas from children, young adults, birth relatives, adopters, social workers and foster carers about how to make, maintain or change arrangements for maintaining appropriate links. Researchers emphasise that the benefits of contact are less likely to be achieved if the support of trusted professionals (and often for birth parents and kinship carers, practical services and help with transport) is not there at the start and at times of change. Neil et al (2015) found that many contact arrangements petered out without explanation to the other party to the arrangements: a third of the young people in their study had lost the (mostly indirect) contact they started off with by the time they were in their mid-teens. This was most often because of adopters not seeing the benefits for their family as a whole but also because some birth parents dropped out of sight, as well as the unreliability, cumbersome nature and lack of sensitivity of the agency’s letter-box service. Contact with parents was less likely to be maintained than contact with grandparents and siblings (sometimes unavoidably because a parent had died). However, there was some increase in contact for some in adolescence (often unknown to their adoptive parents) via social media.

The characteristics of services that achieve successful contact are discussed by Neil and Howe (2004), who advocate a ‘transactional model’ for thinking about contact. Researchers and practitioners conclude that successful contact arrangements are most likely to be achieved and endure when adopters and birth relatives can establish a positive, or at least neutral, relationship. However, birth relatives can be helped by sensitive social work to become more accepting of the adoption, and continuing monitoring can pick up on the fact that

early hostility has turned into acceptance, making appropriate contact possible (Neil et al, 2010).

Contact arrangements should start to be discussed among placement team members and with parents as soon as adoption becomes a serious possibility. Local authorities that routinely set up family meetings have an advantage in this respect as this is a forum for seeking the views of birth parents and close relatives whose children may be placed for adoption. The way in which this discussion is approached can make a big difference. Too often, it is put as ‘our policy on contact is ...’ or, slightly better, ‘What contact would you be seeking?’, though more appropriate would be ‘What role might you be able to play in your child’s life as they settle into a new family?’ and ‘What sort of arrangements for staying in touch will work best for you/will you be able to manage to keep up with?’. A meeting between the likely foster or adoptive family and the parent(s), relatives or carers of siblings placed elsewhere who will be part of contact arrangements can be particularly helpful around the time of the ‘matching’ decision (Cossar and Neil, 2013). The timing of such a meeting will vary and it should not be combined with a contact meeting with the child or between siblings. Also, a plea from birth relatives, especially as some form of contact is maintained or happens later with most children placed from adoption, is that there should be an end to the inappropriate and hurtful language and practice of ‘goodbye visits’. Many agencies, for example, use the language of ‘a family meeting to wish you well as you move to your new family’.

Conclusion

The most important determinant of good outcomes is the quality of the child’s experience in the adoptive family and the match between the needs and wishes of the child and the skills, hopes and expectations of the adopters. *However*, skilled and informed care planning and the quality of social work practice with children, foster carers, adopters and birth relatives will make a difference in maximising the potential of any placement to give children and young people the start in life they need. Arrangements for maintaining appropriate links with birth family members are just one component, though likely to be an important one. There is no formula that works in all cases and no slide rule on frequency at different ages, but it is important to know that most children who have been asked for their views want more contact with a larger number of family members than is actually arranged for them. Care is needed to identify the small minority of children, especially

among those who have been severely maltreated or cruelly rejected, who are likely to be harmed by some forms of contact with some (and occasionally all) members of the birth family. However, overall, the research supports a presumption of some form of contact that results in meaningful links with some (though not necessarily all) members of the birth family. For England, there is clear evidence to support a move from standardised decisions about continuing links based on a child's age and the preferences of potential adopters, to one based on the needs and particular circumstances and relationships of each child.

Notes

- ¹ Adoption practice in the four UK nations has many similarities but also differences (Featherstone et al, 2018).
- ² This term is used by the Grotevant et al team in the US (Grotevant et al, 2013).
- ³ See: www.twogoodmums.co.uk

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