

INTERCOUNTRY ADOPTION AND THE RIGHT TO KNOW ORIGINS: ISSUES RELATED TO MENTAL HEALTH AND HOLISTIC DEVELOPMENT

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EXPERIENCE BASED ON ANALYSIS OF CHALLENGES AND GOOD PRACTICES

- UN CRC and other international treaties – good “compass” for effective implementation
- Experience of changes in health, social welfare and educational sectors in the sub-region of Central and Eastern Europe (CEE)
- Comparative analysis of challenges and good practices between different regions and sub-regions (experience from membership in the CRC, 2007-2011)
- Elaborating on right to health: thematic reports of the UN Special Rapporteur (early childhood, adolescence, mental health), 2014-2020
- Analysis of child and adolescent mental health policies and services globally and regionally

Basic principles

- Human rights are indivisible and interrelated. There is no hierarchy of human rights, including of human rights of the child
- Right to health cannot be effectively exercised if other human rights are violated. Selective approach to human rights has its heavy price
- CRC art 6: right to life, survival and **(holistic) development**
- Right to child's identity should be protected. Right to know one's origins, connected to the right to identity and to personal development. This right includes the right to access information that would make it possible to trace one's roots, to know the circumstances of one's birth and to have access to certainty of parental filiation.
- All forms of violence against children are harmful to (mental) health and healthy holistic development. This includes ACEs (adverse childhood experiences) and toxic stress

Lessons from other challenges

- Each innovation, when applied in practice, has two sides - pro et contra. This is why „compass“ is needed. Human rights based approach. Child rights approach (based on CRC).
- Role of family/parents. Paradox. Family is of crucial importance. However, largest number of violations of child rights happens in families.
- „Traditional family values“ concept - threatens to healthy development of the child.
- Lessons learned from massive institutionalization of children in Eastern Europe. Abandonment and relinquishment
- Lessons learned from using „baby boxes“

Intercountry adoption: risks and safeguards

- There are good guidelines with regard to safeguards for child-friendly adoption process
- In real life rights of children to identity are violated very often. This may have harmful impact to mental health and (emotional, social, cultural) development.
- Intercountry adoption increases the risks with regard to children's identity
- Secrecy vs openness. Hiding the truth has its price
- The question is not just – whether to inform the child. The question is – how to do this.
- Human rights based approach and good management are needed. Especially this is crucial when adults are facing facts of secrecy or illegal adoption in their childhood.

Experience from European countries in transition (CEE region, 1990-2020)

- Many children in residential care, including baby homes
- These children were considered to be “social orphans”, although majority had at least one alive parent
- They were placed in “baby homes for children with developmental disorders” which meant that they all had to be diagnosed as having some form of impaired development
- These facilities belonged to the healthcare system; the idea was that all children there are sick and need treatment. Staff was predominantly medical (doctors, nurses).
- Local families who wished to adopt (with condition that baby will be healthy) were informed by management of the baby homes, that all children are disabled.
- Families coming from abroad (USA, Italy, etc.), were happy to adopt such children and thus to save them from effects of institutional care
- With changes and reforms, in 2015-2017 numbers of national adoptions in Lithuania finally exceeded numbers of international adoptions
- Another important cultural issue - deeply-entrenched thinking that is it better for the child after national adoption not to know her origins

Modern understanding of (right to) mental health and healthy holistic development

- Good mental health is not (just) about absence of mental disorder. This is more about healthy (emotional, social, cultural) development
- After four decades of dominance of the biomedical paradigm – importance of relationships and social determinants is raised, including role of childhood events to health and well-being through entire life span
- Early childhood and adolescence are crucial. Child is a rights holder – from birth!
- Supportive and enabling environments (free from violence, ACEs, insecurity) in all settings, starting from family
- Adolescence: Evolving capacities. Protect but not overprotect.
- Self-esteem. Process of search of identity, autonomy, trust and the way to control your own life
- Quality of relationships – should be based on mutual trust and respect. This is why secrecy and anonymity may be detrimental to mental health.

Possible effects from modification of child's identity through ICA

- Impact of absent information on physical health
- Early childhood: attachment issues after ICA. Cultural identity
- Impact of absent information on health/development (identity, relationships, personal development)
- Many adopted persons believe that access to their origins is a fundamental aspect of their identity building. Interesting parallels with ART related issues
- Special role of adoptive parents
- Motivations to undertake a search for origins are many and may arise and change in different times in life
- Finding out that your adoption included illicit practices, or that information on your origins is not available – detrimental effects to mental health
- Knowing one's origins competes with the entitlement of birth parents to remain anonymous, or where information does not exist. In such cases professional support will be needed
- **Conclusion: safeguards are needed to ensure that all rights of children are protected during ICA process. These safeguards should be based on full realization of the human rights of the child.**