



ÚDARÁS UCHTÁLA na hÉIREANN
THE ADOPTION AUTHORITY of IRELAND

The Lived Experience of Intercountry Adopted Adults in Ireland

A report on a study conducted by
The Adoption Authority of Ireland



Executive Summary

i. Background to the report

Over 5,000 people have been adopted into Ireland from other countries since intercountry adoption was first legislated for here in 1991. The vast majority were adopted prior to the introduction of the Adoption Act 2010, under which Ireland formally ratified the Hague Convention on Intercountry Adoption. Figures have reduced steadily since, to the point where there were just 25 such adoptions into Ireland in 2023. Adoption is a permanent intervention in a child's life, and intercountry adoption has added complexity in that the child is adopted by a family, often transracially, into a different country and culture. For many years intercountry adoption research focused on meta-analyses of outcomes data, looking at aspects of child development, adjustment, physical and mental health, in an effort to determine how such a significant intervention impacts the child. More recently, however, the research focus has turned to individual lived experiences, with a specific call for more research into the adult adoptee lived experience in particular (Fronek & Briggs, 2018). The aim of the present study was to investigate the lived experience of a small sample of intercountry adopted adults in Ireland. This report contains a brief introduction to the history of intercountry adoption, a short review of the Irish context and the relevant global research literature, and a detailed account of the key findings from this study, followed by discussion of same.

ii. Method and participants

Eleven participants were interviewed for this study. Participants were aged between 20 and 38 at the

time of the interview, with a mean age of 27. Nine participants described themselves as female and two as male. Four participants were from Eastern Europe, four from South East Asia (Vietnam and Thailand), and three from Asia (India and China). Each participant took part in an in-depth interview/focus group, guided by a semi-structured interview schedule with open-ended questions. The resulting interview data were analysed thematically, in accordance with the framework set out by Braun and Clarke (2021).

iii. Findings

Three themes were generated from the data, bound together with an overarching theme that the lived experience of intercountry adoption is a continuously evolving journey.

Theme 1: Adoptive parents set the tone in childhood.

Participants spoke of the benefits of having a supportive, adoption-informed immediate family. Families generally embraced communicative openness around adoption, although there were certain limits to this when it came to discussing adoption outside of the immediate family. Participants also mentioned enjoying the protective nature of the close-knit communities in which they grew up as children. This included positive early primary school experiences. Furthermore, some participants noted the benefits to them, as children, of belonging to an intercountry adoption peer support group – something which had been arranged and facilitated by their parents.

Theme 2: Adoptive identity development is an unavoidable, isolating task.

During late childhood or early adolescence, in many cases a question from others about their ethnicity prompted a crisis of identity, in which participants struggled to determine a sense of who they were as an adopted person. This often led to feelings of isolation. Participants described seeking external sources of resolution to the problem of identity development, with limited success. With nobody to relate to, some wanted to know and learn more about their birth families, culture and country. A small number of participants expressly wanted to reunite. Some also described experiencing more prolonged or profound mental health difficulties at around the same time, though while some linked these difficulties to their adopted status, others clearly asserted that they felt there was no connection. Rather than having a clear moment of resolution, participants typically eventually became comfortable with certain elements of themselves and their identities, with "Irishness" being an element of central importance to several of the eleven participants.

Theme 3: The challenge of visible difference.

A number of the eleven participants highlighted the difficulties they faced through being visibly different to their immediate families, and to the White majority population. Nearly all of the participants had experienced racism and discrimination, often due to their ethnicity. For most, this presented as micro-aggressions – "casual" comments or jokes, most often from people they knew well.

iv. Conclusion

It should be noted that this in-depth, qualitative study involved a relatively small sample of eleven participants. Qualitative research can provide nuanced, rich data around individual experience, and small sample sizes are typical of this kind of research. However, caution should be exercised around generalising the experience of this group to the wider population of over 5,000 intercountry adopted people living in Ireland today.

These findings point towards the need for more prolonged post-adoption support for adoptive parents, and targeted supports for teenagers to help them navigate the challenge of adoptive identity development. While some of these supports are already provided by Barnardos, many participants were not aware of their existence, highlighting an opportunity for increased communication and promotion of such services to the people who need them. Continuous support should be available to intercountry adopted people throughout the lifespan. The high level of discrimination, specifically micro-aggressions, experienced by participants suggests a requirement for increased adoption awareness in Irish society, particularly among schools and teachers. Furthermore, it also highlights a need for adoptive parents to promote communicative openness about adoption, including adoption sensitivity, outside of the family home among their own family and friends. Being part of a small, unique group, intercountry adopted people in Ireland can often feel isolated, and in other countries, diaspora groups have formed. The development of a peer support group in Ireland could provide a much-needed source of support, friendship and belonging for Ireland's intercountry adopted population. Furthermore, increased representation of intercountry adopted people in legislative consultations and service design would enable them to have input into and a clearer understanding of the decisions that affect them, particularly in relation to birth information and tracing. Suggestions for future research are provided.

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Foreword

Orlaith Traynor

Chair, Adoption Authority of Ireland

I am very pleased to introduce this report, conducted by the Authority's in-house research team, which considers the Lived Experience of Intercountry Adopted Adults in Ireland. This study is part of a wider programme of research commissioned/conducted by the Authority which will also explore the experiences of intercountry-adopted children and teenagers.

Intercountry adoption was first legislated for under the Adoption Act 1991. The collapse of the Romanian communist leadership in late 1989 had exposed the harsh institutional conditions in which more than 170,000 of Romanian children were living, and families around the world sought to adopt these children, including families in Ireland. The 1991 Act was established so that such adoptions could be formally processed and recognised. In the years that followed, intercountry adoption continued to increase as different sending countries came to the fore, including Russia, Vietnam, China, and Ethiopia.

Intercountry adoption as a practice is vulnerable to abuse. It involves the movement children from a position of economic, familial and social instability to one of increased security, and as such it can and does raise ethical questions. As the number of children being adopted internationally started to grow, two global Conventions came into effect in order to ensure that these questions were given due consideration. These included the UN Convention on the Rights of the Child (1989), and the Hague Convention in Respect of co-operation in intercountry adoption (1993). A key element of

both Conventions is that intercountry adoption is a measure of last resort – to be considered only if a child cannot reasonably be cared for by relatives, or at least within their own country of birth. This reiterates the key guiding principle of adoption: that it exists as a service to identify suitable families for children who need them, and not vice versa.

The Adoption Act 2010 brought a number of changes to intercountry adoption, grounding Ireland's ratification of the Hague Convention in Irish law. Since then, figures have declined, both in Ireland and around the world. In 2023, just 25 children were adopted into Ireland, compared to almost 400 children in 2008. As such, Ireland's intercountry adopted population as a cohort is ageing, and indeed the average age of this entire population reached 18 in 2025. As such, as the majority of intercountry adopted people in Ireland are now in adulthood, it is very timely to explore their experiences, so that they can tell us how we can best meet their needs.

Under the Adoption Act 2010, the AAI has a legal remit to conduct research into adoption and adoption services, and the Authority's research team was established in 2019 to address this legal obligation. It is under this remit that the present study was conducted. While the sample size was small, and generalisability to the wider intercountry adopted adult population is thus limited, it nevertheless provides us with an insight into some of the issues which may affect intercountry adopted people living in Ireland today.

It is encouraging to read that participants generally reported a positive childhood experience, with supportive parents who promoted a sense of openness when discussing adoption at home. Furthermore, the inclusion of many of the participants, from a young age, in close-knit communities provided them with a valued, increased sense of security. However, many participants described emotional challenges during late childhood and adolescence, when they began to question their identity. Furthermore, it is notable that this crisis of identity was often brought about by other people asking about their ethnicity, which prompted them to then internally query their own sense of who they were. This identity crisis took time and a lot of internal, personal work to disentangle, and there was a sense that, while it was in some way resolved over time, new, different questions continued to emerge as participants grew older. The participants suggested that support would be useful, and in many cases were not aware that such support already exists. Barnardos provide a valuable and accredited post-adoption service for intercountry adopted people, however they do not have funding to provide specific services such as therapeutic interventions or support groups for intercountry adopted people beyond the age of 23.

I believe that there exists an opportunity for stronger promotion of the supports available to intercountry adopted people and their families, alongside re-consideration of the age limits around these supports. Finally, the study found that most of the participants had experienced some form of racism or discrimination, often in the form of microaggressions either from strangers or, more commonly, from people who they knew. I find this very concerning. It highlights a need for increased awareness among the public and service providers about diversity, inclusiveness, and intercountry adoption in general. By listening, acknowledging and supporting adopted children we can help them build a stronger sense of self and belonging. We need to work together to create a world where every child can feel comfortable and thrive regardless of their adoption status or background. I wish to express my sincere gratitude to the eleven individuals who gave so generously of their time to this research project. I look forward to future research outputs focusing on the experiences of children and teenagers respectively, so that we can get a more complete picture of the intercountry adoption experience across the lifespan, and use it to help inform Ireland's policies and services in this area.

A professional portrait of Orlaith Traynor, a woman with blonde hair, wearing a blue dress and a large, circular, textured brooch. She is looking directly at the camera with a slight smile.

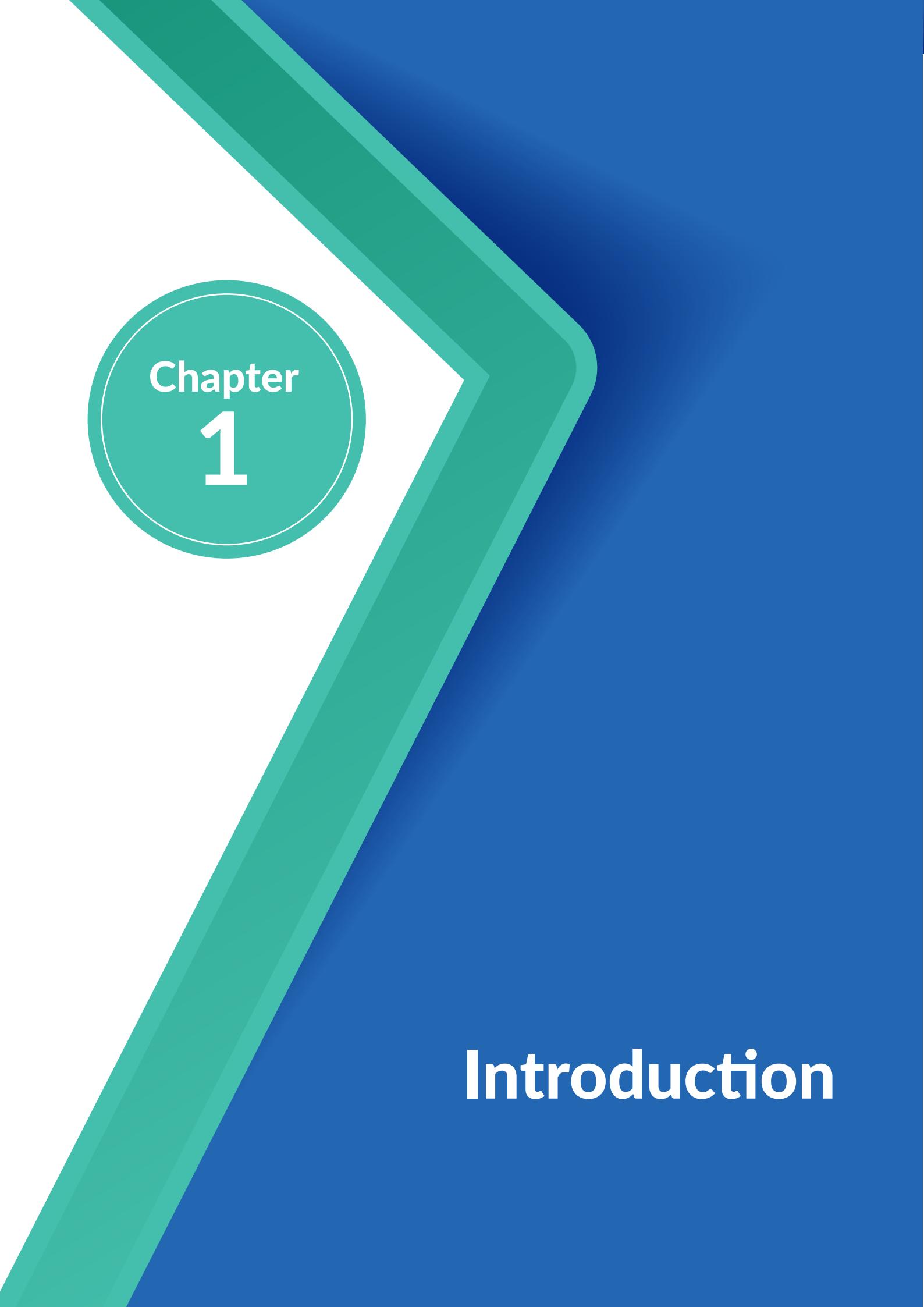
Orlaith Traynor

Orlaith Traynor

Chair, Adoption Authority of Ireland

Acknowledgements

The research team wish to extend their sincerest gratitude to the eleven participants who gave so generously of their time, sharing their thoughts and entering wholeheartedly into the research process. We also wish to note the support of the various stakeholders, including Tusla, country-specific support groups and all of the accredited bodies who shared posters about the study and provided advice at various stages along the way.



Chapter
1

Introduction

1.1 Introduction

This study was conducted directly by the Adoption Authority of Ireland's research team, led by Dr Judy Lovett with research assistants Amy Weinmann and John Regan. Across 2022 and 2023, the research team interviewed 11 intercountry-adopted adults, aged 20 – 38, about their lived experience of growing up in Ireland as intercountry-adopted individuals, with a view to creating an evidence base which could be used to inform future policy decisions. The following report outlines the findings arising from this study.

1.2 Background to this report

Since it was first provided for with the introduction of the Adoption Act (1991), intercountry adoption into Ireland and its impact on adoptees have been of considerable interest to the Irish adoption research community (e.g. Greene, et al., 2007; McCaughran & Ní Raghallaigh, 2015; O'Brien & Mitra, 2018; Shier, 2024).

Greene and colleagues' (2007) report on the experiences of intercountry adoption in Ireland has been the largest and most systematic investigation of intercountry adoption outcomes in Ireland to date. This study explored the experiences of families who adopted through intercountry adoption, with a particular focus on young children, which was reflective of the mean age of the intercountry-adopted population at the time. Eighteen years later, this group have grown up. It is therefore now timely to explore the Irish intercountry adoption experience in adulthood.

The aim of the present qualitative study was to capture the lived experiences of adults who were adopted into Ireland as children via intercountry adoption. In 2022, intercountry adopted people were initially invited to take part in focus groups, with the subsequent addition in 2023 of individual interviews as an alternative option due to low initial take up. With a series of open-ended questions in a semi-structured interview schedule, participants were asked to discuss their thoughts and feelings in relation to intercountry adoption in Ireland, and how

they made sense of their own lived experience. For further detail around the recruitment, method, and research instruments, please see the accompanying technical report.

1.3 Aims and structure of this report

This study sought to explore three broad research questions:



1. What are the lived experiences of intercountry adopted people growing up in Ireland?

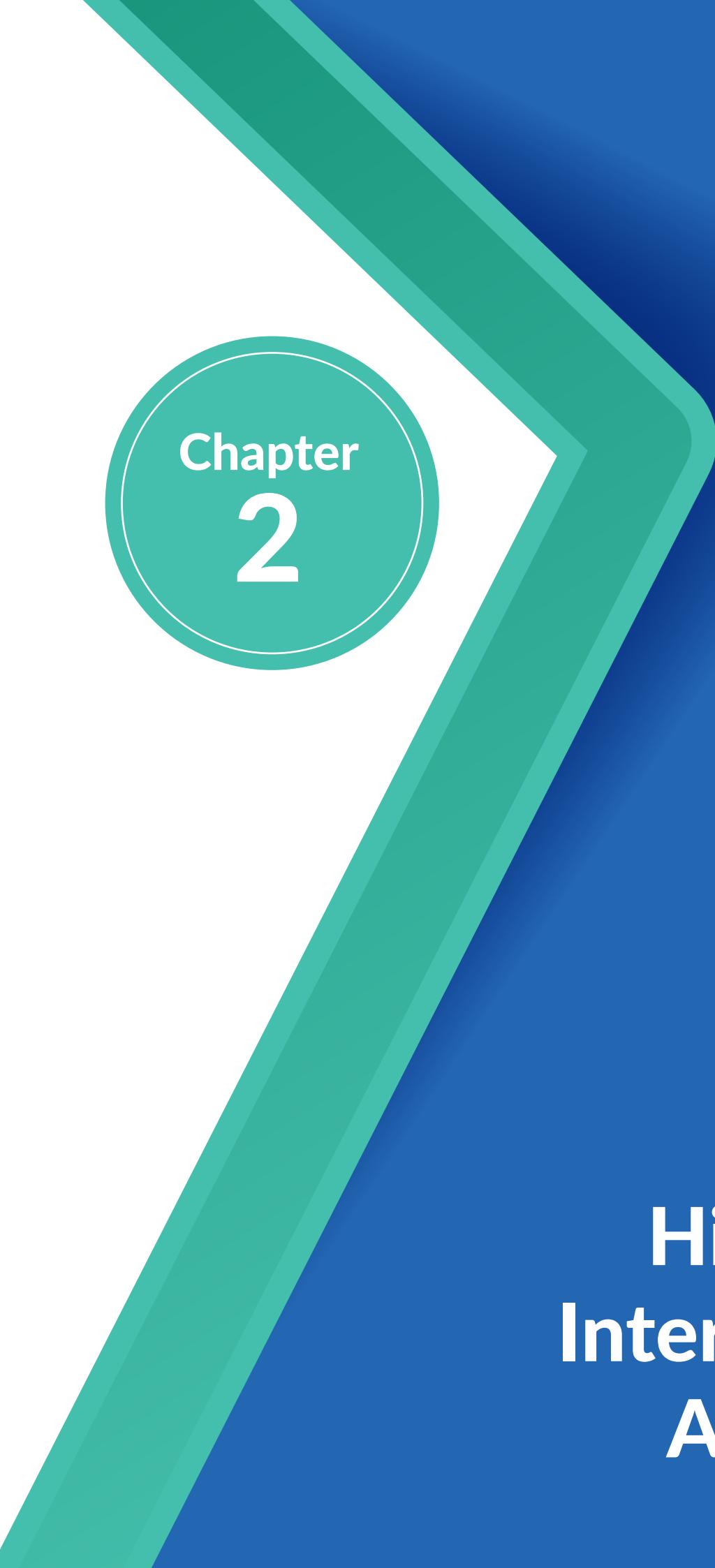


2. How do Irish intercountry-adopted adults perceive their adoptive identity?



3. What supports do intercountry adoptees need?

The following report consists of a brief introduction to the history of intercountry adoption, a short review of the Irish context and the relevant global research literature, and a detailed account of the key findings from the interviews. These findings are subsequently discussed, briefly, as they relate to the literature, and to the original research questions. Finally, a set of recommendations is presented, alongside suggestions for future research.

A large, stylized teal arrow graphic curves from the bottom left towards the top right, with a white outline.

Chapter
2

History of Intercountry Adoption

2.1 The history of intercountry adoption: a brief introduction

Intercountry adoption refers to the movement of children from their country of birth or residence across international borders for the purpose of adoption (Kane, 1993). The nature, causes of, and practices around intercountry adoptions have changed substantially since it first emerged as a notable pattern in the mid-20th Century.

Large-scale intercountry adoption typically involved children being adopted out of a situation of perceived extreme disadvantage when their parents could not care for them, and into adoptive families who were living in a more economically and socially prosperous country (Sargent, 2004; Bartholet, 2007). It effectively commenced with the adoption of children in large numbers from war-damaged countries after World War Two, the Vietnam War and the Korean War (O'Keefe, 2007; Thompson, 2004). In the decades that followed, the number of children being adopted internationally rose and fell as new global challenges emerged which reportedly left children at risk. These included the fall of the Soviet Union, the HIV-AIDS crisis in Africa, the government-imposed one-child policy in China (O'Keefe, 2007; Roby & Shaw, 2006), and various other political and natural humanitarian crises. As one author comments, "adoption is always downstream from tragedy" (Briggs, 2013, p. 7). The figures peaked globally in 2004, with over 45,000 children being internationally adopted worldwide in that one calendar year. Intercountry adoption has been in steady decline ever since, to the point where, in 2022 (the most recent global figures available) just 3,700 children were adopted internationally (Selman, 2024).

Often arising from a time of crisis, the practice of intercountry adoption raises ethical considerations. A notable example of crisis-driven and ethically questionable intercountry adoption was the 1975 "Operation Babylift" from Vietnam. It involved US soldiers and volunteers removing thousands of Vietnamese children from Vietnam, considering them to be abandoned or orphaned as a result of the war. These children were brought to the US, Australia, Canada and some European countries to be adopted. Yet a group of religion and ethics professors raised concerns that the children may not have been either abandoned or orphaned, and that it would in fact have been in their best interests for them to have remained in Vietnam (Bergquist, 2016). This marked the beginning of an important ethics and rights-oriented discussion about

intercountry adoption, which has continued to be reflected in the literature and legislation ever since. In addition to its crisis-driven nature, a key, ongoing challenge central to creating ethical intercountry adoption is that, in general, demand for children outweighs the number of children available, and this, alongside the power imbalance between impoverished sending countries and wealthy receiving countries can leave the system, and the welfare of the children and families at its centre, vulnerable to abuse (O'Brien, 2009).

2.2 Creating standards in intercountry adoption

In the late 1980s and early 1990s, two global conventions were established – the United Nations Convention on the Rights of the Child (UNCRC, 1989) and the Hague Convention on Protection of Children and Co-operation in Respect of Intercountry Adoption (1993). While the UNCRC had a broad overall child welfare remit which extended to adoption, the Hague Convention was specifically designed to address intercountry adoption. Both conventions are actively in use today and have been used to underpin further legislative instruments. Central to the Hague convention is the *subsidiarity principle*. When applied to intercountry adoption, this principle clarifies that if a child cannot be cared for by a birth parent or parents, the next best option for that child is to be raised by family or kin. If this is not possible, then the child should be placed in an alternative care arrangement within the child's state of origin. Failing this, intercountry adoption may finally be considered. As such, under the *subsidiarity principle* intercountry adoption is a *measure of last resort* – only to be availed of when all other options have been exhausted (HCCH, 2018).

The Hague Convention effectively put in place a number of safeguards for children, with signatory countries agreeing to adhere to specific principles and provisions around adoption. Its core value is to ensure that intercountry adoptions only occur with respect for the child's fundamental rights, and in the best interests of the child. This convention sets out clear procedures for intercountry adoption, prohibiting improper financial and other gain, with the aim of providing greater transparency, predictability and security for all parties involved in intercountry adoptions (HCCH, 2018). The Hague Convention procedures are considered the minimum requirements for intercountry adoption. Once these requirements have been met, signatory countries can also establish

bilateral arrangements/agreements with each other to further improve the application of the convention (HCCH, 2018). Ireland signed the Hague Convention in 1996, and grounded it in Irish legislation under the Adoption Act 2010.

2.3 Intercountry adoption: the Irish legislative context

2.3.1 The Adoption Act 1991

A couple of years after the UNCRC was established, the Adoption Act 1991 provided the first *Irish* legislative recognition of adoption orders effected outside of the Irish State (O'Halloran, 2006). With similar principles to the UNCRC, the 1991 Act was established in reaction to the sudden emerging pattern of Irish parents seeking to legally adopt children from Romania after the fall of its communist leadership in 1989. This coincided with a decline in the number of infants available for domestic adoption in Ireland. The fall of the communist leadership had exposed the very harsh living conditions of over 170,000 institutionalised children, whom people from all over the world, seeing the media coverage, subsequently sought to adopt. The number of children adopted into Ireland decreased for a few years after the initial influx of children from Romania. However, from the late 1990s up until 2010, different "sending countries" became prominent in Ireland as a result of various other global challenges. The main countries from which Irish parents adopted children during these years included Russia, China, Vietnam and Ethiopia. The background to adoptions from each of these countries, and a further breakdown of the figures involved, have been explored in previous AAI publications, all of which can be found on the AAI website¹.

2.3.2 The Adoption Act 2010

Between 1991 and 2023 (the most recent figures to date), 5082² children have been adopted into Ireland via intercountry adoption³. The vast majority of these

adoptions took place before 2010, when there was still much work to be done around the regulation of adoption in light of the global ethical concerns that had previously been raised. In Ireland, local concerns were also flagged by researchers about the intercountry adoption process on both sides: including the lack of a standardised framework for assessment practices for people seeking to adopt into Ireland from other countries (e.g. McCaughran & Sherlock, 2008; O'Brien, 2009), and a "major void" in regulating the mediation of adoptions in sending countries (O'Brien and Mitra, 2018; O'Brien, 2009). For a more detailed review of the ethical dilemmas facing social workers involved in Irish intercountry adoption at the time, see O'Brien (2009).

The Adoption Act 2010 was enacted to establish clear standards in domestic and intercountry adoption. This Act replaced all previous Irish adoption legislation. Alongside the Adoption Act 2010, Ireland's formal ratification of the Hague Convention on Intercountry Adoption as described above also brought a number of changes into how adoption was regulated and managed in Ireland. This, combined with a number of other factors, strongly impacted the intercountry adoption figures from all countries thereafter. Between 2010 and 2023, 745 such adoptions were finalised, compared to 4,337 in the 19 years between the Adoption Acts.

2.3.3 The Birth Information and Tracing Act, 2022

Since adoption was first legally provided for in 1952, Irish adopted people had no legally enshrined right to access their own birth and early life information. The challenges around this have been well documented (see Adoption Authority of Ireland, 2024 for more information). The commencement of the Birth Information and Tracing Act 2022 represented a marked change in this respect. It applies to everyone who was adopted, boarded out, nursed out, or the subject of an illegal birth registration in Ireland,

1. <https://aai.gov.ie/en/what-we-do/research/aai-research/intercountry-adoption-research-reports.html>
2. A review of the AAI's historical statistics and the implementation of a new database has allowed for more accurate reporting of figures. As such, there may be a small variance in published figures from previous years.
3. For an overview of the profile of these adoptions, see https://aai.gov.ie/images/ICA_by_parents_habitually_resident_in_Ireland_Report_111219_FINAL.pdf

For a more detailed account of the enactment of the Adoption Act 1991, and the various challenges surrounding intercountry adoption into Ireland in the years that followed, see O'Brien and Mitra (2018): https://aai.gov.ie/images/Report_2_An_Overview_of_Policy_and_Legislative_Change_in_Ireland_1952_to_2017.pdf

including Ireland's intercountry adopted population⁴. As such, it provided a route of access by adopted people to their birth information. The Act has been criticised by some activist and advocacy groups, who argue that it discriminates against adopted people due to the inclusion of an "information session" prior to the receipt of files when a parent or relevant person has recorded a preference for no contact – something which was the subject of much debate in the run up to the Act's commencement. However, while intercountry adopted people now have a right to their records under the legislation, a key challenge remains as to the quality and availability of such records and birth information in their country of origin. Since 2022, the Adoption Authority has employed a dedicated social worker to assist with intercountry adoption information and tracing. The area of birth information and tracing for intercountry adopted people is a growing topic of focus in the research community (e.g. Walton, 2012; Godon et al., 2014; Koskinen & Book, 2019).

2.4 Intercountry adoption trends

In Ireland, there are approximately eight intercountry adopted people per 10,000 people in the population. This is proportionally similar to the USA, which remains the world's largest receiving country (see Selman, 2024, for a detailed overview of global intercountry adoption figures). Since Ireland's ratification of the Hague Convention, the number of children adopted into Ireland via intercountry adoption is much reduced, to the point where in 2023 only 25 such adoptions took place (for further details, see Adoption Authority of Ireland Annual Report 2023). This sharp decline is in line with global figures, which also now stand at less than 10% of the numbers at their 2004 global peak (Selman, 2024). In short, more children now have the opportunity to remain within their family of origin.

Despite the marked decrease, intercountry adoption continues to be practiced in many countries, with the main receiving countries between 2004 and 2022 identified as the USA, Italy, Spain, France and Canada. Ireland is ranked 14th out of 25 global receiving states for which data were available across

this entire time period. The main sending countries globally between 2004 and 2022 were China, Russia, Ethiopia, Guatemala and Columbia (Selman, 2024). It is important to note that three of these programmes: China, Russia and Ethiopia – have now ceased operating. Guatemala and Columbia continue to engage in intercountry adoption in small numbers, but not with Ireland. As of 2023, Ireland's main sending countries were Vietnam and the USA (Adoption Authority of Ireland, 2023).

2.5 The Irish intercountry adopted population

The sample of 11 from the 18+ Irish intercountry adopted population who are the focus of the present study were all adopted into Ireland before 2010. While children were adopted into Ireland from 33 different countries in total between 1991 and 2010⁵, 83% of them came from just five sending countries: Russia, Vietnam, China, Ethiopia and Romania. The general backgrounds to adoptions from each of these five countries are described briefly hereunder, and summarised in Table 1. For further details, see the published AAI background reports on each country⁶. According to aggregated AAI figures, the majority of Ireland's intercountry adopted population are now aged 18 or over.

2.5.1 Russia

To date, adoptions from Russia are the largest proportion of all intercountry adoptions into Ireland, with **1,630** children adopted from Russia into Ireland between 1992 and 2014. The numbers peaked in 2004. Slightly more boys than girls were adopted into Ireland from Russia (56% male, 44% female at time of adoption). The average age at adoption into Ireland was one year and eight months. The majority of adoptions from Russia took place before the Adoption Act 2010, and most of the children would have been adopted from institutional care. Gatti (2014) described these Russian institutions as under-resourced and overcrowded, with the children often badly neglected and deprived.



4. See p. 8 of the Act: <https://www.irishstatutebook.ie/eli/2022/act/14/enacted/en/pdf>

5. https://aai.gov.ie/images/ICA_by_parents_habitually_resident_in_Ireland_Report_111219_FINAL.pdf: see table 1, page 2

6. <https://aai.gov.ie/en/what-we-do/research/aai-research/intercountry-adoption-research-reports.html>. General information around adoptions from these and other countries have also been provided in the Adoption Board and AAI annual reports, all of which are available on the AAI website.

2.5.2 Vietnam



Between 1988 and 2023, **952** children were adopted from Vietnam into Ireland, with the numbers peaking in 2008. Most of these took place before 2010, when the average age of children at adoption into Ireland was seven months old. Almost three quarters of the children were female. Adoptions into Ireland from Vietnam were temporarily suspended between 2009 and 2014 as they completely restructured their adoption system, bringing it in line with the Hague Convention (Umlauf, 2015). Since adoptions recommenced in 2014, Vietnamese and Irish authorities have worked together to monitor and ensure efficient management of intercountry adoptions.

2.5.3 Romania



In total, **807** children were adopted into Ireland from Romania between 1989 and 2003, and most of these children would have been adopted from institutional care. The average age at adoption into Ireland was one year and five months, with a roughly even split between male and female children (49% male, 51% female). Romania has since reformed its child protection system, investing in family-based care and moving away from institutionalisation. Since 2011, Romania has also strictly limited intercountry adoptions to cases meeting specific criteria.

2.5.4 China



From 1994 to 2019, **431** children were adopted from China into Ireland. Most of these children – 89% - were infant girls, and they would have been largely adopted from institutional care. This reflected the practice of abandonment of infant girls due to the ‘one-child’ family planning policy that was in place at the time (O’Halloran, 2015). The annual number of children adopted from China into Ireland peaked in 2004, slowly declining in the following years. Pre 2010, their average age at adoption was one year and three months. The last adoption from China into Ireland was in 2019. In 2020, China suspended its intercountry adoption programme during Covid-19, and ultimately ceased the practice of intercountry adoption in 2024.

2.5.5 Ethiopia



Between 2006 and 2013, **308** children were adopted from Ethiopia into Ireland, with the numbers peaking in 2010. Since the late 1990s, Ethiopia has faced a HIV/AIDS pandemic which resulted in an orphan crisis. This led to the development of NGO-run orphanages which provided institutional care to children who lost their parents to HIV/AIDS and other related illnesses (Bodja & Gleason, 2020). Most of the children adopted from Ethiopia into Ireland were likely adopted from institutions. The average age at adoption into Ireland pre-2010 was nine months old, and 57% of the children were female, 43% male. Ethiopia placed a complete ban on intercountry adoption in 2018.

Table 1: Adoptions into Ireland from main sending countries

	Romania	Russia	China	Vietnam	Ethiopia
Number of children	807	1630	431	952	308
Average age at adoption pre-2010 (in months)	17	20	15	7	9
Male: female ratio (%)	49:51	56:44	11:89	27:73	43:57
Years active	1989-2003	1992 - 2014	1994 - 2019	1988 - present	2006 - 2013
Peak year	1991	2004	2004	2008	2010

2.6 Intercountry adoption research: a brief overview

Systemic research on adoption *in general* began in the late 1950's and early 1960's, and early work explored differences in adjustment between adoptees and their non-adopted peers but focused solely on domestic adoption. The need for specific *intercountry* adoption research became apparent after the large-scale adoption of children from Romania from the late 1980s into the 1990s. These children lived in extreme deprivation, facing strong early life adversity, and some exhibited severe developmental delays when they were first adopted. This led researchers to study the impact of early experiences on development, and to investigate the existence of sensitive or critical periods for recovery from early adversity (Palacios & Brodzinsky, 2010). This research was in many ways controversial, for example the ethics around the Bucharest Early Intervention Project – in which children were randomly assigned to either receive high quality foster care or to remain in institutional care – are well-documented and discussed (e.g. Zeanah et al., 2012). Willing, Fronek and Cuthbert (2012) noted how US based models dominated the research landscape, reflecting their position as a receiving country. They recommended that research needed to focus instead on the experiences of birth families, and the global social practice of intercountry adoption, alongside a thorough examination of policy.

More recently, researchers have moved away from the study of outcomes and focused on the underlying factors and processes involved in the experience of adoption, looking at aspects of communication within the family, adoption disclosure, identity development and feelings about birth family. The lived experience of adult adoptees had been consistently highlighted as an area which needs more research (e.g. Palacios & Brodzinsky, 2010, Fronek & Briggs, 2018). Previous adoption research was predominantly conducted by non-adoptee academics. However, this is changing, and in recent years there has been a clear increase in adoptee-led research (McGinnis et al., 2019; Laybourn, 2024). This had been predicted by Willing and her colleagues (2012) as an important trajectory for adoption research to take. This research often highlights the lived experience of adoption, moving away from the previous outcomes-based model, which some critics felt pathologised adoptees. The insider status of adoptee scholars offers the unique opportunity to develop new theory and practice

More recently, researchers have moved away from the study of outcomes and focused on the underlying factors and processes involved in the experience of adoption, looking at aspects of communication within the family, adoption disclosure, identity development and feelings about birth family.

models for understanding the experience of adoption across the lifespan (McGinnis et al., 2019).

Critical adoption studies has in recent years gained traction as an approach to the study of adoption. This perspective takes a broad lens to critically consider adoption from multiple angles (for a detailed explanation, see article by Homans et al., 2018, which seeks to define it). Critical adoption studies advocates do not deny that adoption may in some ways be a positive intervention for the adopted person. Instead, they argue that, they argue that rather than focussing on outcomes, adoption needs to be considered from a different perspective. A critical adoption studies focus considers adoption's impact on the child to be just one element of a much bigger picture. Proponents of critical adoption studies believe that the wider cultural, political and social environment in which adoptions take place, alongside the multiple power imbalances therein, must be given much more consideration, weight and interrogation. Critical adoption studies is grounded in the concept that adoption is extremely complex and requires broader questioning around whether/why adoption is necessary, how decisions around adoptions are made and by whom. It focuses on the systems around adoption and the multiple parties involved, with the overall aim of exploring whether or not adoption is a morally justifiable intervention (Homans et al., 2018).

2.6.1 Experiences of adoption

According to ter Meulen and her colleagues (2019), the early lives of intercountry adoptees are generally marked by at least one, but often more, negative experiences, such as trauma, neglect, separation and loss of birth family and culture. Previous research has suggested that a child's age at adoption can have an impact on their adoption outcomes (Howe, 1997; Howe et al., 2001; Hawk & McCall, 2010; Dekker et al., 2017), with earlier adoption associated with more favourable outcomes in general.

Once they are adopted, the literature suggests that the majority of intercountry adopted children can demonstrate substantial catch-up in physical, cognitive and emotional development, in spite of this early adversity (Juffer & van IJzendoorn, 2016). A recent study conducted in the Netherlands found that adult intercountry adoptees were on average *more* satisfied with their lives than the wider Dutch population. Specifically, positive feelings among participants about their relinquishment and adoption were associated with higher levels of life satisfaction. In this study, most adoptees felt positively about their adoption and became more satisfied with their adoptive status as they got older (ter Meulen et al., 2019). Notwithstanding these positive outcomes for intercountry adopted people, it is also important to note the specific challenges they can face around psychological adjustment, physical health, identity, discrimination, adoptive parenting and adoption support.

2.6.2 Psychological adjustment

There is evidence to suggest that most intercountry adoptees are well adjusted, with similar self-esteem to non-adopted children (Juffer & van IJzendoorn,

2007; Juffer & van IJzendoorn, 2005), showing less behavioural problems and fewer referrals to mental health services than domestic adoptees (Juffer & van IJzendoorn, 2005). However, a recent meta-analysis by Corral and colleagues (2021) found that adult adoptees display higher rates of psychological maladjustment compared to non-adopted adults. Angry emotions, psychotic symptoms and drug abuse were the outcomes significantly influenced by adoptive status, and as demonstrated in other studies, intercountry adopted people appear to be over-represented in psychiatric care settings (e.g. Barroso et al., 2017; Juffer & van IJzendoorn, 2005).

Corral and colleagues also highlighted specific adoptee characteristics which have a higher risk of psychological maladjustment. For example, adoptees who were not in a romantic relationship appeared to present with more psychological difficulties than those who were in a romantic relationship, suggesting the presence of attachment difficulties in adulthood. The author recommends that practitioners and clinicians should be aware of the outcomes influenced by adoptive status, in order to provide better support to adoptees and their families across the lifespan (Corral et al., 2021).

2.6.3 Physical health

Many intercountry adopted children live in institutions such as orphanages before adoption (Juffer & van IJzendoorn, 2016), and indeed this has likely been the case for the Irish adult intercountry adopted population. Children living in institutions can face various challenges such as limited medical care, increased exposure to infections, poor nutrition and growth, lack of stimulation for cognitive development and emotional and physical neglect (Miller 2012). On adoption, children can present with a number

A recent study conducted in the Netherlands found that adult intercountry adoptees were on average more satisfied with their lives than the wider Dutch population. Specifically, positive feelings among participants about their relinquishment and adoption were associated with higher levels of life satisfaction.

of physical challenges, some of which are linked to adverse pre-adoptive circumstances. Studies have stressed the importance of intercountry adoptees receiving a specialised medical evaluation at adoption, and regular follow-up to identify and treat health issues, where possible (e.g. Miller 2012). In line with the aforementioned critical adoption studies perspective, however, some authors have raised concerns around how adopted children's physical health information is treated, considered and used in the adoption process. For example, Van Wichelen (2014) has expressed strong concern around adoption being justified on the basis of it being a positive health intervention for children. Prospective adoptive parents are routinely asked about adopting a child with a disability, for example, and invited to indicate what level of disability/illness severity they feel they could cope with in an adopted child. Van Wichelen (2014) cautions that this system places children at varying degrees of "adoptability", and that the value being placed on health commodifies adoptable children and can distract stakeholders from the wider political and cultural issues at play.

2.6.4 Identity development

Identity development typically involves addressing questions such as "Who am I?", "How do others view me?", "Where do I fit in?" and "How do I feel about myself?" (Brodzinsky & Palacios, 2023). For adopted people, it also concerns how the adoptee constructs meaning about their adoption (Grotevant et al., 2000). Grotevant and his colleagues (2000) outlined three "adoptive identity" development contexts; intrapsychic (i.e. affective and cognitive processes involved in constructing adoptive identity), relationships *within* the family, and connections *outside* of the family (i.e. to culture, community, neighbourhood and friends).

This illustrates the complexity of adoptive identity development, and its sensitivity to context. There is strong evidence within the literature that intercountry adoption, specifically, can impact the identity development of adoptees (Cloonan et al., 2023; Branco & Cloonan, 2022; Baden et al., 2013). In intercountry adoption, and in particular transracial adoption, *ethnic and racial identity* can become entwined with adoptive identity (Beaupre et

al., 2015). *Ethnic and racial identity* has been defined as "a multidimensional, psychological construct that reflects the beliefs and attitudes that individuals have about their ethnic-racial group memberships, as well as the processes by which these beliefs and attitudes develop over time" (Umaña-Taylor et al., 2014, p.23). Cloonan et al. (2023) found that experiences of racism impacted Columbian intercountry adoptees' ethnic identity development and led to internal conflict around their identity. The participants revealed that messages about their Latinx⁷ background and their appearance led them to develop a "chameleon" approach, where the adoptees would embrace their Latinx or White identity depending on the people around them and the context. In reality, however, they did not feel like they fully identified with either their Latinx or White identity. Having a strong sense of one's ethnic identity has been positively associated with adoptee wellbeing (Lee et al., 2010). Therefore, researchers have suggested that adoptive parents should support adoptees' ethnic identity development by fostering a sense of belonging and pride in their birth culture (Cloonan et al., 2023; Marcelli et al., 2020; Manzi et al., 2014).

A number of publications consider the lived experiences of intercountry adopted people through a "diaspora" lens (Kim et al., 2021; Lee, 2006; Hübinette, 2004). With its origins in the immigration experience literature, diaspora is composed of three core elements: dispersion, homeland orientation and boundary maintenance. Dispersion can be viewed as the dispersion of people across space, which can be forced or traumatic. Homeland orientation describes the attachment to a homeland, which is a source of value, loyalty and identity. Finally, boundary maintenance involves the preservation of a distinctive identity which, in turn, enables a distinctive community, held together by an active solidarity and social relationships. These relationships cross state boundaries and link diaspora members in different states to a single 'transnational community' (Brubaker, 2005). Among the intercountry adopted population, the concept of diaspora relates to their feelings about their country of origin and connecting with other people who have been adopted from there. As such their link to the country, its culture and their experience of intercountry adoption become a shared, connecting experience.

7. Latinx, the term used by the authors of the paper, is a gender neutral term which replaces the gender-specific Latina/Latino.

Identity development typically involves addressing questions such as "Who am I?", "How do others view me?", "Where do I fit in?" and "How do I feel about myself?" (Brodzinsky & Palacios, 2023). For adopted people, it also concerns how the adoptee constructs meaning about their adoption (Grotevant et al., 2000).

Kim and Lee (2020) recently examined identity from a critical adoption studies perspective. They found that Korean adoptees in the USA approached identity development in a number of different ways, "most of which were not, inherently, pathological" (p. 130). While ethnic-racial identity was important to them, it was just one of a number of facets of identity development to this adopted cohort.

2.6.5 Racism and discrimination in intercountry adoption

Adoption in Ireland has previously been associated with stigma, and while this has reportedly abated over time, for some it is still present to a certain extent (AAI, 2024). Adoption-related stigma has been described as the judgemental, biased attitudes toward adoption and issues related to adoption (Baden, 2016). Within this context, researchers have recently started exploring the area of adoption-related "micro-aggressions": common insults, slights or indignities from other people that communicate criticisms or judgements about relinquishing care of a child and adoption in general (Baden, 2016). While they can be intentional or unintentional, micro-aggressions have been described as the "manifestations of adoption-related stigma" (Baden, 2016, p.5). In the case of transracial adoption, adopted people can also face the additional challenge of racial micro-aggressions (Baden et al., 2023; White

et al 2022). Such micro-aggressions communicate derogatory, hostile or negative racial insults or slights towards a person or group who are a different ethnicity (Sue et al., 2007).

In a recent qualitative study by White et al. (2022) on the experiences of intercountry and transracial adoptees, all of the participants had experienced both adoption micro-aggressions and racial micro-aggressions within and outside their families. This high prevalence of micro-aggressions towards intercountry, transracially adopted people is consistent with other studies (Baden et al., 2023). Zhang and colleagues (2019), found that 54% of their sample of five to nine year old children adopted from China experienced micro-aggressions, indicating that this is a difficulty faced from a young age. Therefore, it is important for practitioners, clinicians and researchers to increase their understanding of the intercountry adoption experience in order to provide efficient support (White et al., 2022). Furthermore, the literature suggests that transracial adoptive parents, with support from post adoption services, need to acknowledge and prepare their transracially adopted children to potentially experience discrimination and micro-aggressions based on their physical appearance or adoptive identity (Cloonan et al., 2023; Baden et al., 2023; Baden, 2016).

2.6.6 Adoptive parenting

Adoptive parents can play a central and instrumental role in how the child thinks and feels about themselves, and their adopted status. Their approach to adoption and to adoptive parenting can also influence the child's developmental trajectory (Grotevant & Lo, 2017). In the 1980s, Kirk developed a theory about adoptive parenting called "Shared Fate" (1984). This theory was based around what he saw as the inherent difference between adoptive parenting and biological parenting.

Adoptive parents have often gone through a number of difficulties prior to the adoption, including possible infertility/baby loss, the resultant grieving process, and the challenges of a rigorous adoption assessment process. Adoptive parenting is thus different from biological parenting in a number of ways, and this is central to Kirk's theory. One pivotal difference is that there is typically a period of uncertainty when the child is living with the adoptive parents, but the adoptive order has not yet been signed. During this time, there is a risk that the child could be removed

from the adoptive parents. This lack of knowledge about the security and nature of the future relationship is not present in a biological parent-child relationship. Thus, these factors - the pre-adoptive history, and the pre-adoption order uncertainty - set adoptive parents apart from biological parents from the outset. The adopted child also has a number of pre-adoptive challenges to contend with. These include, but are not limited to, early adversity and a loss of an attachment bond with one or more primary caregivers. For the intercountry adopted child, there is also a loss of birth culture and birth country (Lo & Cashen, 2020).

Kirk (1984) posits that these challenges for adopted children and their adoptive parents can either be *acknowledged* or *rejected* as the family moves forward once the adoption order has been signed. This is a decision that adoptive parents make from the outset – they effectively choose how their family is going to deal with the topic of adoption. The “rejection of differences” approach by parents occurs when they decide that, conceptually, there is no difference between themselves and a biological family. This can create an atmosphere of secrecy and stigma for the child, the negative effects of which have been well documented (e.g. Rosenberg & Groze, 1997). Under the “acknowledgement of differences” approach, a more open environment is created within the family. This environment is more developmentally beneficial to the child, and to the family as a whole.

Although developed at a more societally conservative time, Kirk’s theory is strengthened by its similarity to other tested and recommended modern parenting approaches which have recently gained pace. These favour very similar reflective and considered responses from parents and have been linked to stronger attachment security in children (Lo & Cashen, 2020).

2.6.6.1: Communicative Openness

While “acknowledgement of differences” is an ongoing philosophy throughout the adoptive family life, one way in which this type of parenting can be demonstrated and measured in a family is through “communicative openness” (Brodzinsky, 2006), which was derived from Kirk’s (1984) work. Communicative openness is understood as a dynamic process involving communication within the adoptive family about adoption issues, which evolves across the

family lifespan. Rather than being a simple exchange of information between adoptive parents and their children, communicative openness is an interactive family process involving emotions and deep meanings attached to the adoption itself (Santona et al., 2022; Gorla et al., 2023).

Effective communication about adoption is an important factor for adoptive families (Brodzinsky, 2006; Santona et al., 2022). It has been associated with fewer behavioural problems (Brodzinsky, 2006; Aramburu Alegret et al., 2018), greater self-esteem (Brodzinsky, 2006) and more positive adoptive identities in adopted people (Le Mare & Audet, 2011). While there is consensus in the literature that communicative openness is beneficial, adoptive parents can often find this process challenging (Jones & Hackett, 2007). Choosing when to begin communicative openness can be difficult (Barbosa-Ducharne & Soares, 2016). Jones and Hackett (2007) found that adoptive parents often face the dilemma of not wanting to disclose too much information too soon, while simultaneously not wanting to be viewed as withholding information and wanting to provide their child with positive yet honest accounts of their adoption. Sharing information about the child’s early life can be difficult, as it naturally includes the child’s experience of loss around their birth family and country (Santona et al., 2022). It is recommended that information and support about communicative openness are provided to adoptive parents both before and after the adoption takes place (Jones & Hackett, 2007; Aramburu Alegret et al., 2018).

A key element of communicative openness is *adoption disclosure* – how and when the adoptive parents tell the child that he or she is adopted. A study conducted by Wydra et al. (2012) investigated adult adoptees’ experiences of adoption disclosure. They found that adoptees who experienced open communication and early adoption disclosure had positive feelings related to learning about their adoption. Conversely, adoptees who were unhappy with their adoption disclosure reported that their adoptive parents had withheld information and were uncomfortable discussing adoption, and therefore expressed their preference, in general, for early adoption disclosure. Similarly, Langenhoven and Greeff (2022) found that early adoption disclosure and communicative openness within adoptive families is important to adult adoptees.

2.6.7 Adoption support

As outlined above, intercountry adoptees can face a number of specific challenges. Therefore, there is a critical need for comprehensive pre-adoption preparation for parents (Brodzinsky, 2008; Lee et al., 2018) alongside the provision of long-term, well-developed post-adoption support services (Sánchez-Sandoval et al., 2020; Lee et al., 2020). Adoption is a lifelong process that can affect adoptees in different ways as they grow up (Ahn, 2020; Sánchez-Sandoval et al., 2020). While families require a high degree of support from adoption support services immediately after the adoption, it is important to note that post-adoption services are also needed at significant developmental points in the adopted person's life. These include starting school, becoming a teenager and becoming an adult. In addition to providing these services, it is also important to ensure that the families are aware of them, and that they are accessible to all (Dhami et al., 2007).

2.6.8 Intercountry adoption research in Ireland

While the area of intercountry adoption research in Ireland is relatively small, there have been a number of important publications which have provided a much-needed evidence base around the early outcomes and physical health of the Irish intercountry adopted population and alongside, more recently, a detailed exploration of the use of social media and technology in reunion, intercountry adoptive parent experiences.

Greene and colleagues' (2007) report is the largest and most in-depth investigation into the outcomes of intercountry adoption in Ireland to date. This mixed methods study involved a literature review of intercountry adoption policies, practices and outcomes and interviews with 180 adoptive families (including adopted children and adoptive parents). It also gathered the perspectives of young adult adoptees, support group committee members, teachers and social workers working in the area of intercountry adoption. The authors noted the diversity in background among their participants, commenting that it was difficult to generalise about Irish intercountry adoption, as the backgrounds for each person were unique, and the adoptive parents' interactions with the intercountry adoption process varied widely. This study found that the younger participants were generally doing well post-adoption, though about a quarter were exhibiting more long-term challenges. Nineteen young adults were also

interviewed for Greene and colleagues' (2007) study. They largely saw adoption as a positive experience, however they spoke of a number of challenges. A key issue was feeling different from others and needing to resolve this feeling over time. When they spoke about adoption outside of the family, they limited the amount of information they disclosed. The young adults spoke of difficult experiences of racism and discrimination, with 74% having experienced some form of racism in their lives. They had also experienced discrimination, both for being adopted and for their ethnic difference, with challenges including being offered low-paid jobs, being singled out by security guards, and other people pointing out their visible differences from the majority White Irish population. In terms of identity, they felt strongly that they were Irish, and while they were curious about their birth country, and wanted to know more about their birth families, this appeared to be more from a position of interest and sympathy than seeking connection to a homeland. It is notable that, when this study was conducted, Ireland had only recently become more ethnically diverse due to a marked increase in immigration, compared to its relatively ethnically homogenous society of previous decades. Participants generally enjoyed belonging to post-adoption peer support groups, where such groups existed, but did not feel a meaningful connection to non-adopted, immigrant populations from their countries of birth (Greene et al., 2007).

O'Shea and colleagues (2016) conducted a study examining Irish General Practitioners' (GP) experience of treating intercountry adopted children. They found that 26% of the intercountry adopted children presenting to GPs had some form of social, emotional or mental health related difficulty. When a child was older than six months at adoption, they were more likely to have mid-to-long term difficulties which required a specialist service. Approximately 18% of the children had been referred to such a specialist service, and referral for assessment was significantly related to age at adoption. The highest referral rates were for children who were over two years of age at the time of adoption. These findings are particularly important, as the overall age at adoption into Ireland has increased after the Adoption Act 2010. This is largely due to the increased documentation and processes put in place as a result of Ireland's ratification of the Hague convention. While this should mean more confidence in the adoption process, one challenge is that the children are older when they are adopted,

To date, a small number of research studies have provided an important platform for understanding intercountry adoption in Ireland.

and depending on the quality of pre-adoptive care, this can be a disadvantage in terms of their later development.

More recently, Shier (2024) conducted a study illustrating the central role of social media and technology in reunion in intercountry adoption. The data were gathered through semi-structured interviews with twelve intercountry adoptees who had contact with their birth families using social media and technology. This study found that social media and technology has provided adoptees with a “safe space” for “normalised” contact with birth families, which facilitated identity construction. This type of contact increased the pace of birth family contact, however, which led to challenges around boundaries, leaving some adopted people open to uncontrolled or unwanted contact from birth family members. Some participants felt that the fast pace and ease of access led to them feeling obliged to be in contact or feeling guilty for not interacting. However, the fact that contact was taking place online rather than in-person created a distance and a boundary that participants found helpful. The potential mediator and facilitator role of birth siblings during contact with birth parents was also highlighted in Shier’s study. Birth siblings appeared to have greater digital literacy than birth parents, which enabled them to better engage with contact through social media and technology. The relationship between adopted people and their birth siblings also faced less complex emotional challenges, such as feelings of loss, anger and rejection. This represented a shift from previous adoption reunion practice where social workers and birth parents were the gatekeepers to contact with birth siblings and contact with birth parents was on a one-to-one basis, preceding sibling contact. It is notable, however, that participants felt that social media and technology did not replace the need for in-person contact with their birth family. These findings suggest that social workers need to be aware of the role of social media and technology in reunion and

develop their skills and knowledge in this area (Shier, 2024).

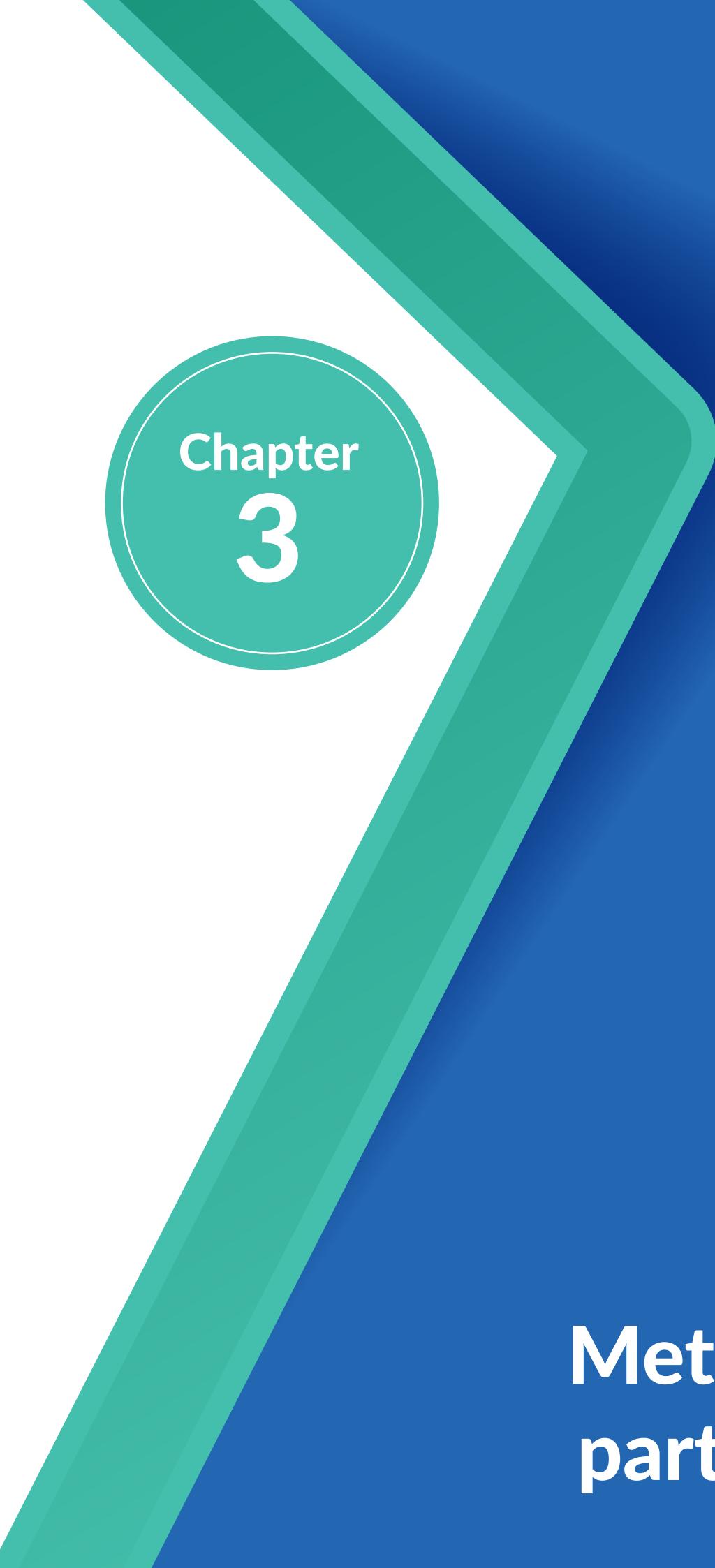
A recent thesis considered the experience of intercountry adoption from Irish adoptive parents’ perspectives (McDonald, 2023). McDonald found that the intercountry adoption process was emotionally nuanced and complex for parents, with positive and negative experiences along the way. She identified a gap in post-adoption support services, with a need for more targeted, specialised adoption support. A key finding, however, was the strength of support parents received from other adoptive parents via peer support groups, which they credited with helping them navigate the intercountry adoption journey.

2.7 Conclusion

Intercountry adoption in Ireland was first legislated for in 1991. In the years that followed, over 5,000 children have been adopted into Ireland via its intercountry adoption programme. The vast majority of these were adopted prior to 2010, with the numbers in steep decline ever since. The practice of intercountry adoption can have serious legal, ethical and familial implications due to the inherent power imbalance between the sending and receiving parties, and efforts have been made globally to improve standards and protect the children at its centre.

From a research perspective, adoption can be looked at a number of ways. The international research literature has described the challenges intercountry adopted people may face, including recovery from early adversity, attachment and adjustment issues and the possibility of some longer-term challenges. More recently, the focus has shifted from large scale outcomes-based research towards individual lived experience, with adoptee-led research slowly coming to the fore, and shifting the balance away from the adoption-as-pathology model. Critical adoption studies extends this approach to consider, in depth, the wider structures, systems and processes in place around adoption.

To date, a small number of research studies have provided an important platform for understanding intercountry adoption in Ireland. The aim of the present study is to provide an evidence base, as the majority of Ireland’s intercountry adopted population shifts towards adulthood, for the development of future services to support Ireland’s intercountry adopted community.

A large, stylized teal arrow graphic curves from the bottom left towards the top right, composed of several overlapping curved bands.

Chapter 3

Method and participants

3.1 Method

The following contains a very brief summary of how this study was conducted. A detailed account of the method, including recruitment, sampling and development of the research instruments is outlined in the accompanying technical report.

The aim of this study was to explore the lived experiences of people adopted into Ireland via intercountry adoption, focusing on the experiences of growing up in Ireland as an intercountry adopted person, key challenges, relationships, transitions and supports. A qualitative methodology was selected, to allow for in-depth, nuanced exploration of specific topics. The study was grounded in a social constructionist approach, which posits that people construct meaning about phenomena such as adoption from a dynamic interaction with the world in which they live, and the current environments surrounding them (Burr, 2017). A semi-structured interview schedule was created, grounded in the literature and designed to explore the following research questions:

1. What are the lived experiences of intercountry adoptees growing up in Ireland?
2. How do Irish intercountry-adopted adults perceive their adoptive identity?
3. What supports do Irish intercountry adopted people need?

All participants received a topic guide in advance, so that they had a sense of the areas which the interviews would explore. The overall interview was underpinned by ecological systems theory (Bronfenbrenner, 2000) which posits that people develop and operate at the core of nested systems, such as their family, friends, schools, workplaces, the wider society and culture in which they live, and the historical and political system in place at the time.

3.2 Recruitment

Recruitment was slow and challenging. Eleven participants took part in this study between December 2022 and November 2023. Two took part in a focus group, and the other 9 took part in individual interviews. All focus groups and interviews

were conducted online, and most included two moderators – the research officer and research assistant. Four interviews were conducted by the research officer only.

3.3 Participant Profile

Participants were aged between 20 and 38 at the time of the interview, with a mean age of 27. They had been adopted into Ireland at between 6 weeks and 3 years of age. Geographically, two lived in the south of Ireland, one in the west, and eight in the east. Nine described themselves as female and two as male. Their countries of origin included Romania, Vietnam, India, China, Belarus and Thailand. For de-identification purposes, they have been grouped in Table 2, below:

Table 2: Participant countries of origin

Country of Origin	Number of participants
Eastern Europe (Romania and Belarus)	4
South East Asia (Vietnam and Thailand)	4
Asia (India and China)	3
Total:	11

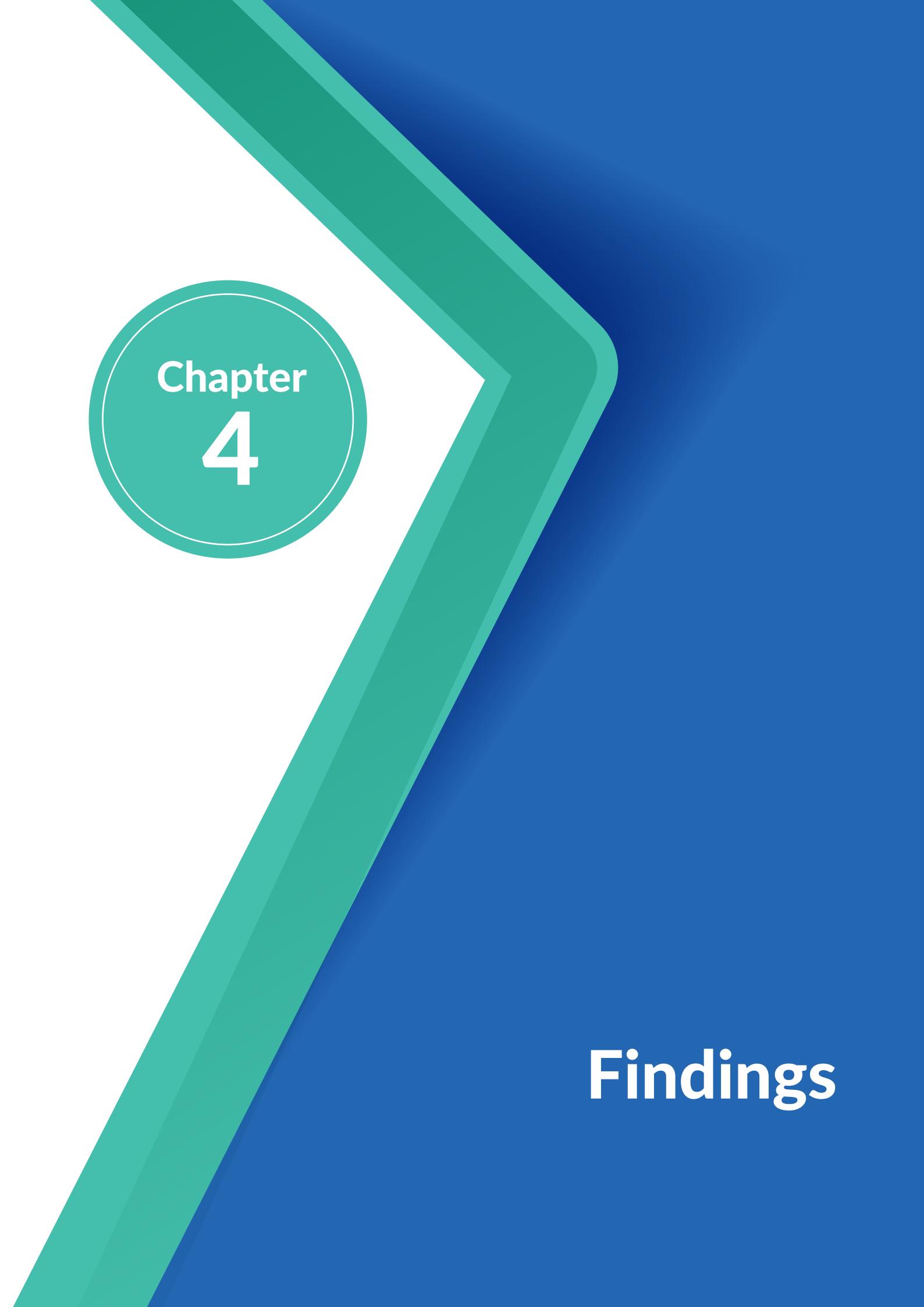
As the present study focused on the 18+ population, and recruitment commenced in 2022, it can be concluded that all participants recruited into the present study were born in 2004 or earlier and adopted no later than 2006 (likely much earlier). As such, they represent adoptions from before the landmark 2010 Act, as Ireland approached its intercountry adoption figures peak in 2008. The vast majority of people adopted into Ireland during these years were adopted from 5 countries: Russia, Vietnam, Romania, Ethiopia and China. While there is no published aggregate data on their pre-adoptive experiences, most were likely adopted from institutional care. The average age at adoption of all children adopted from these countries depended on the country of origin, with the youngest average age at adoption, by country, coming from Vietnam

(average 7 months old at adoption), and the oldest from Romania (average 1 year and 8 months at time of adoption). This broad pattern was reflected in the individual-level demographic data collected in the present study.

3.4 Data Analysis

All focus groups/interviews were audio recorded and transcribed by a member of the research team. The transcripts were subsequently analysed thematically, using the process set out by Braun and Clarke (2021). Two researchers took part in this process, discussing and agreeing final themes. These themes are presented in the next chapter. Due to the de-identification process, some details have been changed to maintain participant confidentiality.





Chapter
4

Findings

4.1 Findings overview

The thematic analysis generated three main themes, bound together with an overarching theme that the lived experience of intercountry adoption is a continuously evolving journey. These themes are summarised in Table 3, below:

Table 3: Summary of themes and sub-themes

Overarching Theme:

The lived experience of intercountry adoption is a continuously evolving journey



Adoptive parents set the tone in childhood

Sub-themes

- The benefits of having a supportive, adoption-informed immediate family
- Enjoying the protective nature of close-knit communities



Adoptive identity development is an unavoidable, isolating task

Sub-themes

- Internal crisis: who am I? Who am I not?
- Seeking external sources of resolution



The challenge of visible difference

Sub-themes

- Experiencing racism and discrimination: its forms and perpetrators
- Responding to racism and discrimination: personal reactions, coping mechanisms and strategies

4.2 Theme 1: Adoptive parents set the tone in childhood



The participants largely described happy childhoods in which they felt loved, cared for and considered. It was clear from the interviews that participants' early lived experience of intercountry adoption in childhood was grounded in, and strongly influenced by, the decisions of their adoptive parents. Through these decisions, adoptive parents set the tone for how the participants felt and thought about their adoption in the early years. This included practical decisions such as how many children to have (where such a decision was possible/applicable, and then whether through biological or adoptive family formation), where to live, who to involve in their child's life, and where to send their children to school. It also included more theoretical or philosophical decisions such as how to communicatively handle the topic of adoption within and outside of the family unit. This theme and its sub-themes are summarised in table 4, below:

Table 4: Theme 1

Theme 1: adoptive parents set the tone in childhood	
<i>Early positive lived experience is grounded in, and strongly influenced by, the decisions of adoptive parents</i>	
Sub-theme 1: The benefits of having a supportive, adoption-informed immediate family	Experiences of communicative openness, and its limits
	Dealing with early adoption-related challenges
Sub-theme 2: The protective nature of close-knit communities	Positive primary school and early life experiences
	Connecting with other ICA families

The majority of participants expressly stated that their parent(s)⁸ had been extremely considerate of their adoptive status in childhood, and took steps to support their early emotional development. Many participants directly referenced specific examples of their parents providing emotional support, and

credited them with providing a firm early foundation for their *understanding* of adoption, and their normative or positive overall sense of what it meant to be an adopted child. In cases where the adopted person had been raised by two parents, they generally spoke about the support provided by both parents interchangeably, suggesting that their parents had a unified approach.

4.2.1 Sub-theme 1: The benefits of having a supportive, adoption-informed immediate family

4.2.1.1 Experiences of communicative openness

The overwhelming sense from most participants was that their parents had been *communicatively open* about adoption within the family unit, which, they felt, led to them accepting their adopted status and rarely questioning or considering it in much detail in childhood. As one participant reported:

“It was never, like, a big secret, it was never something like to be ashamed of, it was always [...] fairly open, we could ask or talk about it any time we wanted to.”

These references to an open communication style, as set by the parents, were scattered throughout the interview transcripts, but were typically first introduced by interviewees with stories of early adoption disclosure. Most participants said that they had “*always known*” about being adopted, having been told about it by their parents from a very young age. As they described it, their adoption had never been treated as a secret, or something taboo, within their own immediate families, whether by parents or by siblings. Within that unit, everyone understood what adoption “meant”, and it was very much normalised. The following example was typical of how many participants described it:

“I always kind of knew I was, there was never a moment when I was told...it was just kind of natural.”

8. 3 of the 11 participants had been raised by their adoptive mother only in one-parent families. Where the term “parents” is used from this point on, it refers to one or both parents.

In one case, where a participant and her sibling had not known they were adopted until late childhood, it is notable that she commented on how sensitively she felt it had been dealt with by her parents at the moment of disclosure. Although early adoption disclosure was the norm within this sample, this particular participant felt that her parents had chosen to tell her and her sibling that they were adopted when they believed the time was right. In other words, she felt that her parents had made a decision based on her and her sibling's best interests:

“They weren’t hiding a big secret, it was just, now was the right time to kind of bring it up.”

Further to normalising adoption as a method of family formation through an open communication style, some participants described their families actively *celebrating* the day they were adopted every year throughout childhood, similar to a birthday. Extended family members were often involved, and they celebrated with a meal or an outing. In this way, parents were continuing their open communication style, through celebrating adoption in a public way. While, for some, these celebrations continued beyond childhood, in other cases they petered out once the participant reached adulthood, or when the family went through a difficult personal time.

Some participants also described the protective advantages, as a child, of either having or being an adopted sibling. In these cases, both the parental decision (where possible/applicable) to adopt more than one child, alongside the open communication style used at home, seemed to create another element of support for the adopted child. In one example, a participant mentioned how, from her perspective as a child, she felt that her adopted brother could not ask questions about his adoption in childhood, so she asked them on his behalf:

“He just went “radio silence” on it [...] whereas I was loud enough for both of us. I actually asked more questions about him than he asked about himself.”

In another example, a participant felt that the considerable age gap between herself and her older sister was helpful to her in making sense of her own adoption:

“She kind of learned about her adoption a little bit quicker than I did, so she could understand and, you know, kind of pass that information down onto me and [...] keep me calm if I was ever getting a bit flustered about it.”

4.2.1.2 The limits of communicative openness

In general, the immediate family consisting of parents and siblings (where applicable) was considered to be protective, safe and loving. Participants felt that they received good emotional support and a clear blueprint for dealing with adoption from their families in childhood via their parents' open communication style.

A number of participants reflected on how, in early childhood, their parents appear to have relayed this communicative openness about adoption beyond the immediate family to the extended family. In some cases, participants received specific, clear support in childhood from their extended family members. This included knowing that extended family members had helped with the logistics of the intercountry adoption itself, or that they were available for extra emotional support, outside of their immediate family:

“I suppose that I was just very lucky that family-wise I had such a good support network. When I say family I mean my extended family. That even if I was having a difficult situation at home, I could go to an auntie, I could go to a grandparent, you know? [...] what I needed, I got from my family.”

However, it is important to note that supportive extended families were not a universal experience, and in fact, in some cases, the behaviour and comments of extended family members seemed

to betray an element of discrimination, or a lack of understanding or awareness about adoption. This is discussed in more detail in themes two and three.

Furthermore, in a minority of cases, although there was open communication at *home*, participants were encouraged by their parents to be more cautious when discussing their adoption *outside* of the protected family space in childhood. Participants felt that this originated with the parental intention of protecting them as adopted children, to ensure that they did not receive incorrect or inaccurate information about adoption from uninformed sources.

4.2.1.3 Dealing with early adoption-related challenges

A number of participants specifically mentioned the thoughtful way in which their parents dealt with early psychological-emotional difficulties, which they attributed to their pre-adoptive environments. In one case, a participant described being terrified of certain noises and sights as a young child, soon after her adoption, and worrying that her adoptive mother was going to leave her. As she grew up, she continued to need a lot of emotional support, which she felt her mother provided for as long as she needed.

In the following case, another participant described how her mother helped her to make sense of her own self-soothing behaviours. It is notable that in both this and the above case, the (now adult) participants felt that their mother had met their needs, either through providing sensitive support as in the case above, or through explaining the participant's behaviour to her through a trauma-informed lens:

"I'm very independent, very good on my own [...] I think it's fascinating because I spent the first 2 and a half years on my own, pretty much. So, if you go back to that it makes a lot of sense - that I probably just got very good at looking after myself in a sense. Like my mum said "you had your own strategies for self-soothing when I met [...] you obviously had taught yourself certain things on how to look after yourself as a baby, that you were doing a lot of this, and that's obviously soothing."

4.2.2 Sub-theme 2: The protective nature of close-knit communities

Participants generally described having a strong sense of belonging to their communities as children. A number of participants specifically used the term "close-knit" to describe the communities in which they grew up. This included their neighbourhoods, friends, small local schools and in particular, immersion in the Irish language and culture. There was a sense of not having to explain their visible ethnicity to others within their communities in childhood because, for most, their peers had "always known" that they were adopted. In other words, it had been normalised. As one participant commented about beginning primary school:

"I've grown up in like a small community [...] everybody knows everybody, so I was already kind of integrated in a sense. So when I went into the local school, it's not like, you know, it wasn't so much of a surprise for anyone [...] they knew who I was."

For another participant, her local friends who had "always known" about her adoption could hypothetically defend her against any possible negativity or discrimination from others as a child. Again, she attributed this to knowledge and familiarity of her adopted status within her community:

"It was such a close-knit community, if somebody said anything like, everybody would know if they said something, and everybody would be kinda like "why would you say that, that's like really...", cos I-I'd a lot of friends, my [sibling] had a lot of friends, and then like everybody was kinda related in some sort of way, so they never really disrespected us or said anything."

It is notable that, in particular, immersion in the Irish language and culture in school provided a vital sense of belonging and identity for many participants in childhood. Five of the eleven participants mentioned either going to Irish speaking schools, living in Irish

speaking families, or having a strong connection with the Irish language and various other aspects of Irish culture. Being fluent in Irish gave them a clear sense of alignment with and belongingness in Ireland. One participant described himself as “110% Irish”, due to his fluency and love of the country itself. Another spoke about having a connection to a Gaeltacht⁹:

“My teachers were from the Gaeltacht so my [family] knew them, I knew them, you know? It was a close-knit community. Em, even, with friendships, it was fine. It was just like a normal, any childhood growing up which was great. I loved my primary school.”

This concept of family members being involved or known in the community seemed to help participants' sense of belonging.

In addition to helping them settle into the core elements of their communities – their neighbourhoods and schools - a number of participants mentioned their parents fostering a connection to other Irish families who had adopted from the same country of origin. In some cases these connections were informal, with adoptive parents keeping in touch and occasionally meeting up as families. In other cases, they were more formalised, country-specific, structured peer support groups. In these cases, the participants described occasionally attending events with other children who had been adopted into Ireland and their adoptive families. It is notable that, for many, they did not recall being expressly told why they belonged to the group, or how it specifically benefitted their families. They simply went to the events with their parents as children and enjoyed the connections they made. As one participant mentioned:

“My parents were part of an association [...] and we would have went to these events like Easter, Christmas to see Santa, there's discos, there's scavenger hunts, there's all this kind of stuff. And in hindsight when you look back you're like “Oh yeah, there's a lot of tanned children there (laughs) and very Irish looking parents” but you never questioned that growing up [...] my parents I think involved us without actually having that raw conversation with us...So, they did expose us in a way, but we didn't get told why.”

Groups such as this one were noted by some participants as being useful – they provided fun events and interactions, particularly during early and middle childhood. When participants grew older however, they either stopped attending the groups, or the groups themselves stopped running events. In a couple of cases, the participants transitioned beyond the groups into personally maintaining the resultant relationships and friendships, keeping in touch with other Irish intercountry adoptees via group messages on an instant messaging smartphone app, for example. In other cases participants were happy that the group had been a part of their childhood that they enjoyed at the time, but they did not specifically need to maintain those relationships into adulthood. One participant found that he didn't really connect with the groups, but had a close friend who had also been adopted via intercountry adoption and felt this was all he needed.

All of the experiences outlined above - communicative openness, thought-out disclosure processes, celebration days and immersion in close-knit communities, including structured peer groups – could be perceived as intentional interventions by the adoptive parents to help support the adopted child. Furthermore, information and training about how to handle adoption is part of the Irish assessment and preparation process. Yet participants did

9. A Gaeltacht refers to a small community in Ireland where Irish, not English, is still the primary spoken language:

<https://udaras.ie/en/our-language-the-gaeltacht/the-gaeltacht/>

not have specific knowledge or examples of their parent(s) having been trained or educated in how to handle the topic of adoption at home - availing of books, social workers or support services, for example. While participants felt that their positive experience of adoption as a child was rooted in how their parents dealt with the topic of adoption at home, there was a clear sense that they did not feel a need to look behind their parents' approach, to find out where this approach came from or why it had been chosen. Furthermore, when directly asked about it, participants felt that their parents *lacked* specific support for how to deal with adoption in the early years, particularly when things became more challenging:

"I went through this period after that where I was like "I need to know all the information that I can". I think, em, like I'm not going to lie, there was a huge amount of struggle. A huge amount of struggle. And, a lack of support for, I think us as a family at that time."

Another participant spoke of the specific support needs of young families:

"I would have imagined the emphasis should be maybe placed upon the parents to give them the right tools of how to speak with the children because there's only so much you can verbalise. Or to [...] help parents explain to children that these resources are available."

In general, the vast majority of participants reported that their parents had been their first port of call for adoption-related support in the early years. For the most part, parents had reportedly demonstrated well thought-out ways of supporting their adopted children's needs, setting a narrative

and communicative openness around adoption for the participant. Participants appreciated and remembered this when reflecting upon it in adulthood. However, once the participants moved into late childhood and early adolescence, this early support, alongside all of the elements positively connected with it, began to lose its effectiveness.

4.3 Theme 2: adoptive identity development is an unavoidable, isolating task



The second theme generated from the data analysis was that *adoptive identity development is an unavoidable, isolating task* (Theme 2). When reflecting on growing up, through late childhood and early adolescence, participants described experiencing what a number of them referred to specifically as an "identity crisis"¹⁰. This theme about identity development contained two sub-themes: the first concerned the experience of an *internal crisis*, and the second concerned participants seeking *external sources of resolution to this crisis*. These are summarised in Table 5, below.

Table 5: Theme 2

Theme 2: adoptive identity development: an unavoidable, isolating task

Sub-theme 1: Experiencing an internal identity crisis	Questions around ethnicity prompt a wider crisis of identity <i>Who am I?</i>
Sub-theme 2: Seeking external sources of resolution to the internal crisis	<i>Who am I not?</i> Mental health difficulties Curiosity about birth culture, family, country Connecting with other intercountry adoptees online

10. In psychology, "identity crisis" refers to a distinct stage of human development, as described by psychologist Erik Erikson in 1970. A number of participants used this specific term to refer to their own struggles with adoptive and ethnic identity, so it is used here in that context, to be true to their descriptions.

4.3.1 Sub-theme 1: Experiencing an internal identity crisis

4.3.1.1 Questions around ethnicity prompt a wider crisis of identity

The vast majority of participants interviewed described experiencing a pronounced internal “identity crisis”. This generally began in late childhood or early adolescence, and continued, for many, into emerging adulthood – early to mid-twenties. In many cases, this identity crisis was precipitated by questions about participants’ ethnicity. These questions came from themselves or from others and were either prompted by their changing physical appearance or simply by being exposed to a wider peer group through the transition to secondary school. This ethnic identity crisis was a personal and isolating experience, often not discussed with others. It then led to a wider questioning by participants about their adoptive identity in general, reaching beyond ethnicity, to making sense of who they were as an adopted person overall. The “identity crisis” was typically defined by participants as a difficult, unexpected and isolating experience which went on for a number of years and was not easily resolved. Participants described it as a “roller coaster” of emotions, with heightened anxiety, not feeling that they could legitimately call themselves Irish anymore and personally questioning who they were and how to define themselves. As one participant noted:

“Growing up is already hard enough and then you throw in this and it’s like “Woah! What’s going on? This is a mess!”

4.3.1.2 Who am I?

For most, the identity crisis began with a questioning of their ethnic identity – being challenged on whether or not they were Irish. This typically happened in late childhood or early adolescence, often prompted by observations, from self or others, about their physical appearance and how they differed, visibly, from their family or their classmates. Participants found it upsetting when others questioned their “Irishness”. One participant commented on how the physical changes she went through during the onset of puberty led to her looking “more Romanian – darker”, and this raised questions for herself and for others as she started to look less like her adoptive family than

she had in childhood. For other participants who were transracially adopted, the change from primary to secondary school led to a new group of peers who did not “always know” about their adoptive status as their primary school friends had, and, similarly, this caused new questions at school:

“When I was in secondary, it was vocalised to me whether or not they perceived me to be Irish or not... And that was, that really caused [...] a conflict in myself.”

For another participant, the visit to her country of origin prompted a crisis of identity:

“I first noticed it I guess very clearly was when we went to [birth country] in [year] [...] I felt very alone. Because I looked like the people, but I couldn’t speak the language, and I had a lot of the people speaking to me in [language] and I just couldn’t answer [...] when I came back I remember I said that to my Mum that I felt like I didn’t really belong anywhere [...] She took that really badly, which is understandable because, you know, obviously kids come out with anything, but obviously this was very different, because I didn’t feel that was home”.

In response to these challenges, a number of participants mentioned feeling that they needed to choose between considering themselves to be from their country of birth or from Ireland – that there was an objective “right” or “wrong” answer to their crisis, which they were struggling to define. Many participants felt very strongly about their Irish ethnicity and were upset and confused when this was questioned. Yet others felt differently, as the following example illustrates:

“I rejected being Irish, but then I also rejected being [from country of origin] and that’s when the identity crisis came in”.

In trying to establish their identity, participants started to notice and note the differences between themselves and their non-adopted friends. In some cases, participants mentioned the impact of not having birth and early life information, which they felt set them apart from the non-adopted community. Specific information such as knowing their birth family composition, what their parents looked like, and their medical history were all ways in which they felt their non-adopted peers had an advantage, in defining themselves, that they did not have. This further compounded their identity struggles. As one person stated:

“People who have their biological parents around [...] without knowing it they actually have a template for where their future is going to be like, appearance-wise or looks-wise”.

Beyond physical traits and ethnicity, a small number of participants mentioned struggling with who they were as a person at this time – whether they were morally “good” or “bad” people - based on the limited knowledge they had of their birth family. This was particularly pronounced when they had negative information, such as a criminal history of a birth relative or similar.

Overall, the identity crisis, as participants described it, was seen as isolating. In general, the participants felt that the majority non-adopted, racially homogenous community, including their adoptive parents and their friends, had a different set of experiences to them, and could not relate to their feelings. For some, this meant keeping their feelings to themselves. As one person stated:

“I don’t think I ever had a conversation with anyone to be like, “look I’m really struggling with this”, do you know what I mean? [...] or even to my parents, “this is what’s wrong”.

4.3.2 Sub-theme 2: Seeking external sources of resolution

Participants typically sought *external sources of resolution* to this internal crisis. For the most part, when they reached out to their parents for support, they felt that they received the help they needed. A number of participants remarked on how their parents put them in contact with other sources of information, or people with whom they felt they might have something in common. One participant mentioned how her mother had specifically suggested she join a peer support group at a later age, in order to help make sense of her identity:

“My Mum had found this group and said that it might be a good help because as I said when I was 17, 18, I kind of was like, again, questioning kind of [...] where I came from [...] she was like, ‘it’s gonna, it will help you be able to talk to people that are very similarly minded as yourself’”.

However, beyond parents, those who chose to reach out to their community or friends found the support offered from these sources to be of limited value, even when well-intentioned. With a lack of anyone to identify with, for some participants there was an increase in curiosity about their birth culture, family and country. A number mentioned finding support through connecting with other intercountry-adopted individuals, either in person or online.

4.3.2.1 Who am I not?

Compounding the sense of isolation from this crisis of identity, participants attempted but struggled to relate fully to various groups with whom there might have been an overlapping experience, such as adopted siblings, domestically adopted people, or the migrant population in Ireland.

Having an *intercountry adopted sibling*, though supportive in many ways, was not automatically a protective factor in dealing with an identity crisis. In some cases, as illustrated in Theme 1, participants had been close to their adopted siblings, and had found this helpful when processing their feelings about adoption as a child. However, as teenagers

they generally did not discuss their new thoughts on identity with their siblings in any great depth. Some participants felt that their siblings had a very different intercountry adoption experience, and so they did not try to raise the issue of identity with them due to the risk of not finding common ground. This is perhaps illustrative of the dissipating strength of the adoptive narrative set by parents in the early years – by adolescence, many participants reported starting to embark on a new way of thinking about their adoption, and they felt there was little option but to go through this emotional, developmental experience alone.

Siblings aside, most participants did not generally find their non-adopted friends to be a useful form of emotional support either, though there were some exceptions. One participant described how she rarely spoke to her friends about her internal struggle with identity development, having previously attempted to raise the matter and finding them largely unresponsive:

“I just don’t really talk about it too much with them, or if I do, they understand that’s my situation but maybe they just lack an interest in it, I don’t know... maybe it doesn’t resonate with them, it’s not their own experience, probably more difficult to, like, empathise with it.”

Despite not identifying with the non-adopted community, participants did not identify with the domestically adopted community in Ireland either. In general, participants felt that while there might be some similarities, for the most part the intercountry adoption experience was unique, and very different to the domestic adoption experience. One participant mentioned how the transracial element of intercountry adoption generally meant that there was less secrecy than domestic adoption, as intercountry adoption was more visibly obvious. Alongside Ireland’s history of secrecy about domestic adoption, this further separated these two distinct groups of Irish adoptees:

“Obviously if they were White they wouldn’t know [they were adopted] and there was [...] a chain around it back in the day in Ireland, it was very hush-hush, no one would talk about it”

Furthermore, the following participant described how she didn’t feel that there was a support group space open to her, as an intercountry adopted person:

“The Irish centric adoption groups are related to survivors [...] which is great for them, and I’m glad they have their own space but, are we allowed in there? No, probably not. And, the new adoption and tracing bill¹¹, it wasn’t really clear if that’s for us or not”.

A number of participants mentioned how increasing diversity in their environments did not necessarily help them with their own identity struggles. In fact, in some cases, moving from a relatively homogenous to a more ethnically diverse environment such as secondary school, third level education or from a rural to urban area, brought an additional and unexpected identity challenge. Suddenly they had a new group to feel different from, and a new reminder of their own unique circumstances, despite the increased diversity. The following participant described his continued identity struggles when moving to third level. He felt that the international students were confused because while he looked ethnically different, he was Irish. Furthermore, he was doing a course specific to Irish culture, and this was another way in which he felt they were unable to relate to him or make sense of his situation. This led him to then become more confused about his own identity:

11. Here, the participant was referring to the proposed Birth Information and Tracing Bill, which was enacted as the Birth Information and Tracing Act in October 2022 (prior to the participant’s interview).

"But the problem was, with the international students - and we have various different people and races and everything - is that I still wasn't...I'm not an international student. So I still can't fully relate to these people [...] there was something that I just couldn't find, which was made a bit more confusing because I was doing [course specific to Irish culture] [...] then they also couldn't relate to what I was doing, so, you know, my identity was pulled in many different places there too".

In many cases, as discussed in Theme 1, participants had been introduced to other Irish intercountry adoptees by their parents in childhood. For the most part, these relationships dissipated over time, however a number of participants spoke about how important the continuing relationships were to them. While they did not describe discussing identity specifically, for some participants this group provided solace and a sense of connectedness, no matter what the topics of discussion were. There was a sense that being an intercountry adopted person was unique, and so there was a feeling of belonging to this group. As one participant said:

"I would know these kids that are also adopted from [birth country] [...] I feel like to this day we still have that bond – we're the same all the way around - we're Irish through and through, but we also have this shared connection in [birth country] and being adopted from there which I think is really nice as a very, kind of, intangible thing to have".

4.3.2.2 Mental health difficulties

A number of participants also mentioned starting to experience more pronounced mental health difficulties in their teens, alongside this identity crisis. However, it is notable that, despite the concurrent timing, participant responses were polarised regarding whether or not they attributed these mental health difficulties to their new conflicted thoughts and feelings about their identity, or to their adoption. In the following case, for example,

the participant was very clear in his assertion that he did not believe his difficulties were related to his adoption:

"I had a very poor quality 10 years of my life from 16 to 26. I attribute that to my mental health being in absolute rag order. But I wouldn't attribute that to being adopted".

However, in contrast, the following participant clearly connected her mental health challenges to not being able to make sense of her feelings around her adoption:

"Just feeling really guilty that you were alive [...] just carrying that as ten, eleven, twelve... most of my teenage years I carried that 100%. I really, really struggled with being here [...] also feeling like I've lost even more than I've felt like I've lost [...] without even knowing what I've lost, or who I lost [...] definitely an inward struggle [...] it was really, really, really tough. Really tough".

This pattern arose with a number of participants, where they were quick to assert whether or not they felt that any mental health issues they had experienced while they struggled with their identity were as a result of their adoption. There was a sense from some participants that they did not want people – particularly health professionals – to assume that any mental health challenges they faced were as a result of their adoption. This is something a minority had experienced when interacting with health professionals. They therefore sought to explicitly challenge this potential assumption where possible.

4.3.2.3 Curiosity about birth family, country and culture

The vast majority of participants described wanting to have more birth and early life information: information about themselves, their family, country and culture of origin. For the most part, they felt that more information would help them further deepen and broaden their sense of identity. However, many were resigned to the fact that they might

never have such information, due to a lack of access or availability, or from hearing stories of others struggling to get such information. They and their parents attempted to source information through various routes, which differed in outcome.

Many participants who struggled to define their ethnic identity in their teens eventually seemed to reach some form of resolution as the years passed. Most participants seemed to embrace specific aspects of their Irish and/or birth cultural identity to a level that felt personally appropriate and comfortable. One participant, who felt very strongly about Ireland and her own Irishness, spoke about the benefits to her identity development of being in a country-specific peer group and visiting her country of birth:

“I have a very positive outlook of [birth country] specifically as a place [...] where children are adopted from because of this exposure, either it being in Ireland where there were events for families and children to meet up [...] or this event where they essentially bring you [to birth country] and they make you feel, you know like, connected to where you came from, not just, not just the country that you were adopted to.”

It is notable that, for many participants, information was generally prioritised over either a reunion or a relationship with birth relatives. Three participants had met their birth family, and a further three either expressed an interest in having contact with their birth family, or had begun the process of contacting them. The remaining four did not express an interest in contact or reunion. While some had a certain level of information – forms, photographs or names, many had very little. Participants reported relying on a number of scattered sources when attempting to commence a search for birth relatives. Examples included advice from non-adopted friends about whether or not to search, for example, or adoptive parents pro-actively looking into the option on their adopted teen’s behalf, which in some ways altered their agency in the search process. Rather than going to state agencies or accredited bodies, participants typically went to informal sources for support, often located online. These sources were sometimes

unreliable, with people either not hearing back and needing to follow up, or receiving mixed information. In many cases, the adoptive parent was the liaison who received and assimilated the information first, before passing it on to the adopted teen.

There was a sense, for some, that a reunion was something they might get around to in future, but for now it was not urgent – it remained in the back of their mind, as the following comments from two participants illustrate:

“I’m just at peace with, you know, thinking about them and hoping they’re okay but at the same time not being very active in going to physically search for them”.

“To be honest, I think about it more inquisitively in relation to myself. I would say the biggest thing I think about is not so much about, like, the individuals, but how much it reflects on me, growing up”.

So, for some participants, the reunion or relationship were typically not integral to identity development, but the information was. This affected them in a range of ways. Some described being preoccupied with wanting to know more, while others felt that it would help, but were resigned to the fact that it was going to be difficult to find. A number of participants wanted to know basic, factual information such as what their birth relatives looked like, and how their birth family was composed – whether they had brothers, sisters etc. They wanted to know if there was a physical resemblance. While there was a sense of curiosity about that level of information, lack of access to medical information – in other words – health identity – reached beyond basic curiosity to be a particular concern. Many participants had health worries which they felt could not be resolved without knowing their birth family’s medical history. There was a gap in their knowledge which meant that they could not provide information to healthcare professionals when required, as the following illustrates:

"it's a bit annoying how I don't have the family history of medical stuff like cos every now and again if you're in the hospital they're like "oh do you, does your family have a history of x y and z?" and I'm just like "I don't know".

One participant described having to explain to healthcare providers why such information was not available – and said that this was often greeted with either surprise or disbelief, leaving her struggling for a way to explain it.

A number of participants expressed a sense of resignation towards finding out more information, or reuniting with birth family members, feeling that it was impossible or very unlikely. Three of the eleven participants had reunited with their birth family. The relationships they now had with their birth relatives were continuing to change and develop post-reunion. Participants commented on various positive and challenging aspects of the new relationships. In two cases, participants expressed concern about themselves and/or their adoptive parents being asked for sums of money by birth relatives either before or after the reunion had taken place. This led to the breakdown of the adoptee-birth relative relationship in one case. In the second case, the participant maintained contact with one birth parent, but ceased contact with the other.

When a relationship did develop with a birth parent, participants generally felt sympathetic and sad for them and the challenging circumstances of their lives, many of which involved extreme poverty or family/relationship breakdown. It seemed that forging this relationship enabled the participant to better understand and consolidate their own identity. Many relied on their adoptive parents for support at this time.

4.3.2.4 Connecting with other intercountry adoptees online

A small number of participants described connecting with other intercountry adopted people online. For some, this involved connecting with strangers, while for others it involved creating an online space

for a pre-existing group of intercountry adopted acquaintances, as described in Theme 1. The online world felt like a safe space, away from daily life, where they could explore different aspects of their intercountry adoptive identities and feel comfortable doing so, as the following participant explains:

"I would find it easier to do with strangers actually, em, who have been adopted. A lot of people on Twitter are also Asian adoptees and, eh, I find it much more comfortable to do it, because there is a connection there I feel".

4.3.2.5: Resolving the identity crisis

For the most part, participants did not highlight a clear moment in time when they felt that they had resolved their identity crisis. The challenge of defining identity continued for a number of years, typically well into their 20s. It seemed that, through considering it in depth, working through various internal questions and testing out different elements of adoptive identity, they eventually reached a place where they had a clearer understanding of who they were, and who they were not, as outlined above. This helped them to carve out a sense of self, which they continued to build on and flesh out as they moved through various key adult transitions, such as leaving college, finding a career, and (in a minority of cases) having children:

"I wouldn't define myself as an adopted person if that makes sense? I wouldn't, I really wouldn't".

"I kind of identify as a citizen of the world now...in university, when I heard that phrase, that's when I said "That's me".

There was a sense from participants that identity development was a continuously evolving journey,

however. Over time and almost through trial and error – testing out different ways of being before either assimilating or rejecting them - they became comfortable with certain elements of themselves. They felt this was down to hard emotional work, and a number of them specifically referenced using tools such as psychotherapy and counselling to help them make sense of it.

4.4 Theme 3: the challenge of visible difference

The visible difference some participants felt from their adoptive parents or families had a very strong impact on their lived experience as an adopted person, and the analysis suggests that it underpinned many of the difficulties and challenges they faced. Within their own immediate families, they felt that they were treated as “same”. However, visible differences such as skin and hair colour and other physical traits more typical of their country of origin served as a constant reminder to others of their adoptive status. This sometimes led to comments and questions which were particularly striking when they came from unexpected and previously trusted sources, such as extended family members or people the participants had known for a long time.

Most participants described *experiencing racism and discrimination* (sub-theme 1) as a result of their visible ethnicity. This presented as either “micro-aggressions” – seemingly casual comments or jokes – or more abject examples of direct, intentionally hurtful racism. Participants also described *how those experiences impacted them personally* (sub-theme 2). Many chose to share their adoptive status with caution, and developed strategies for dealing with these challenges when they arose. A number described wondering whether people would be physically or romantically attracted to them, given their visible difference.

Table 6: Theme 3

Theme 3: the challenge of visible difference	
Sub-theme 1: Experiencing racism and discrimination	Micro-aggressions and their sources
Sub-theme 2: Responding to external threats	Personal reactions, coping mechanisms and strategies



4.4.1 Sub-theme 1: Experiencing racism and discrimination

Nearly all of the participants described specific experiences of racism and discrimination. These were particularly pronounced during secondary school.

For many, this racism took the form of “micro-aggressions” – seemingly casual jokes or comments about the participant based on their adoptive status, which participants felt were driven by their visible ethnic difference. It is notable that, rather than coming from strangers, the micro-aggressions participants described most often came from extended family members, family friends or classmates. Participants varied in whether or not they felt these comments were intended to be hurtful. Participants also varied in whether or not they said they felt hurt by such comments, although it should be noted that even when they didn’t say they felt hurt, they still remembered the comments in enough detail to mention them in the interview. In the following example of a micro-aggression, the participant as a teenager was planning a trip, with her parents, back to her country of origin, when her relatives made “jokes” about it:

“Some of the family were kind of weird about it. They kind of just like “Oh you’re sending her back? You don’t want her anymore? Are you going to bring back another baby?”

Similarly, another participant felt that a female relative was, as she described it, “a bit racist”:

“She doesn’t really have anything to do with me and my child, but she’s really involved in my brother’s life... and she really, it seems like she cares more about my brother than she does me. And she once made this comment “oh, you know, you wear too much makeup. In Ireland, we don’t do this, the Irish don’t do this”. As if I wasn’t Irish”.

In the above case, the participant described feeling discriminated against. However, she illustrated the discrimination with a comment that could be

termed as a micro-aggression – a seemingly casual observation, dressed as advice, but which included criticism, generalisation and othering. Some participants spoke of negative experiences with teachers in primary school:

“One of the [teachers] used to call me the little [country of origin] girl. She used to pat me on the head, very patronising. It was more the [teachers] actually than the class, em, cause they would have just seen, I looked different to everyone in the class. As soon as I started to get a bit tanned they’d be making comments about it. Em, “[name] you tell us this from your experience” it would be the [teachers] a lot of the time, because they didn’t understand it probably”.

The above participant’s final sentence here, that the teachers “didn’t understand” adoption, serves to suggest that, while hurt, she felt the teachers weren’t being intentionally hurtful, and were instead coming from a place of ignorance or lack of education about adoption. Another participant explained experiencing similar micro-aggressions when he was in primary school, describing the jokes of his classmates as “casual and innocent racism almost, and it wasn’t done maliciously”. Yet, in secondary school, others felt that they were the target of more malicious overt racism, as the following illustrates:

“I hated secondary school [...] some of the teachers treated me very poorly, which I thought was racially motivated [...] it eventually got to a situation where [...] the teacher threatened to leave if I didn’t, if I wasn’t forced to leave”.

In addition to teachers, some participants described how their secondary school classmates made assumptions on the basis of their visible difference. One assumption was that the adopted person would have knowledge of or be able to talk about the culture or history of their country of origin. These participants felt stereotyped in different ways. In one case, a participant, who had been adopted from South-East Asia, spoke at length about what she

termed the “Asian wave” – a trend that developed, among teenagers in her school, favouring Asian women’s physical traits, and Asian culture. As she described it:

“I think something people don’t talk about as racism is the fetishisation [...] I got a lot of weird questions about my skin tone, about like “How can I become as dark as you?” [...] “Oh you’re so exotic looking” and “you’re Asian and your eyes are so narrow” and I was like “Oh, that is a racial comment, don’t say that to me” [...] they wanted me to teach them Korean, and once again, I’m not Korean, stop telling me that [...] and, Japanese, and once again, I’m not Japanese [...] in history class, learning about the Vietnamese war [...] whenever we learned about some atrocity one side did or the other side did, they’d look at me and go

“Did you know that? Did you know about that?”

“I don’t know, I wasn’t there! I wasn’t in 1975!”

[...] a lot of assumptions are just very harmful and while I wouldn’t say its malicious, like uh, intended to be malicious, it’s not okay to say to someone”.

Another participant, described a very similar experience whereby her new partner’s parents and friends had made comments and “jokes” about his preference for dating “Asian” women.

While it is clear from the above examples that discrimination came from all age groups – children, teenagers and adults - a number of participants commented particularly on observations from older generations which they felt were discriminatory. One participant mentioned how her parents’ friends sometimes “praised” her parents, in her presence, for adopting her. The result was that she felt there was an element of sacrifice, on her parents’ part, to her adoption story. Another participant said “the older they are, the more likely they are to ask” about her ethnicity, with older strangers questioning her name, and asking about her origins.

4.4.2 Sub-theme 2: responding to external threats

Many participants had developed strategies and tools over time for dealing with racism and discrimination. These strategies varied in their nature and in their desired outcome. For most, it was pro-active, and involved waiting until they got to know people better before sharing their adopted status. This was a way of managing the reactions and the possible level of discrimination or questioning they might have to face when they did disclose the information. The following strategy was typical of a number of participants:

“I don’t actually tell people I’m adopted when I meet them... I like to make them figure it out themselves [laughs] because talking about adoption is a bit, feels to me, like oversharing”.

Another strategy participants proactively used to thwart possible discrimination was to find ways to demonstrate their “Irishness”. As one participant mentioned: *“feeling you have to prove yourself a little bit”*. A number of participants mentioned doing this; using their knowledge of the Irish language or interest in the Irish culture as proof to others and to themselves that they were as Irish as their non-adopted Irish peers. One participant described how he made a clear decision to do this after someone questioned his Irishness:

“I felt like I needed to make ways for myself to [...] be able to convey that I was Irish [...] I would make my accent a bit stronger or I just would completely, oh completely ignore the [birth country] side of me and only emphasise like the-the Irish”.

While the participants above chose to strengthen perceived, typically Irish traits in the face of discrimination, others used different strategies. One participant described actively pushing people away from her emotionally before they could possibly reject her. She felt that she had done this purposely to protect herself:

“I remember in secondary school. I’d just create something... I don’t know like a lie or something. Just create something that would eventually end with them not liking me or choosing not to spend time with me because I have hurt them in some inadvertent way”.

A number of participants – male and female – described feeling that being visibly transracially adopted had affected their romantic relationships, and so, similarly, they developed strategies to deal with this. In some cases, participants described feeling worried that their non-adopted peers wouldn’t find them attractive because they looked different. Again, similar to the participant above, some others specifically chose not to risk being romantically rejected, by withdrawing themselves from social situations where this might happen. As one participant mentioned:

“I didn’t feel [White] Irish people were attracted to me [...] so I felt that I was ugly, and, like, I didn’t go to my school debs [graduation ball]”.

Another participant likened what she termed her “personal insecurity” about her attractiveness to people being insecure about their weight or a skin condition. As a strategic response to this personal concern, one participant mentioned deliberately seeking out partners with similar skin tones or ethnicity to her own, and placing this “matching” ahead, in importance, of whether or not they were actually compatible as partners. This then led, she felt, to difficulties in those relationships. In other cases, participants felt that perhaps something about their adoption had stopped them from actively pursuing romantic relationships in particular, as the following participant explained:

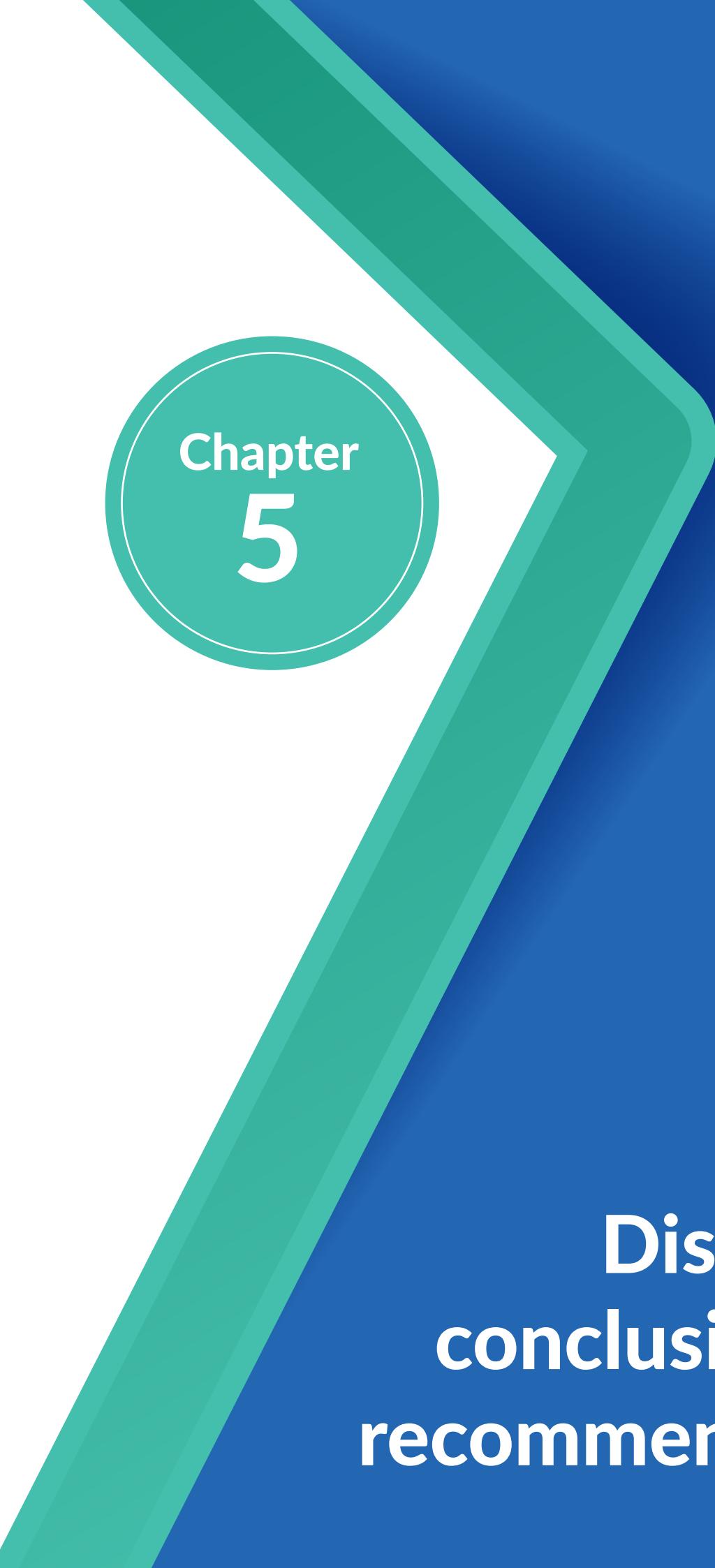
"I love my friends and my relationships- I've the same friends I've always had [...] in romantic relationships it's entirely different. I've no sense of that in my romantic relationships. I'm single. I'm in my 30's. [...] I've no issue in expressing love, or feeling love, when it comes to family and friends but it hasn't translated so much into that area of my life".

A small number of participants specifically mentioned how much they had been emotionally impacted by the assault and murder, by two teenage boys, of an intercountry adopted teenage girl, Ana Kriégel, in Ireland in 2018, and the media coverage that followed. This was a clear moment when they felt that someone very similar to them had been attacked, and that they needed support to unpack their feelings around it. One participant felt very isolated in her feelings about the case, feeling that nobody could relate to how upset she was, and feeling unjustified in her strong reaction – like she did not have a right to be upset. However, in another case, upon hearing the news, a participant reached out to a group of other intercountry adoptees she'd met through a country-specific peer support organisation. They arranged to meet up and hold a vigil to remember Ana Kriégel – a process she found cathartic and helpful. This is a stark example of how intercountry adoptees can feel isolated without a strong community to connect with, and how such a connection can help.

The vast majority of participants had experienced racism and discrimination based on their visible difference. Rather than coming from strangers, this racism and discrimination typically came from people they knew – extended family members, teachers, classmates and family friends, and often took the form of micro-aggressions. Coping strategies developed by participants included waiting before disclosing their adoptive status, emphasising typically Irish traits, and caution in forming relationships.

4.5 Conclusion

The analysis of the raw interview data generated three main themes, bound together with the overarching theme that the lived experience of intercountry adoption is a continuously evolving journey. Adoptive parents set the tone in childhood (theme 1), through establishing a communication style, a well thought out, early adoption disclosure, and through setting their child up with a supportive community. As the child reaches late childhood and early adulthood, however, they start to experience questions in relation to their adoptive identity (theme 2). There was a sense from participants that adoptive identity development was an unavoidable, isolating task. It was often precipitated by questions from others about their ethnicity, prompting an internal crisis in which the participants struggled to establish who they were, versus who they were not. Being visibly different (theme 3) to the majority population in Ireland continued to be a challenge regardless of identity development, with participants experiencing racism and discrimination, often in the form of micro-aggressions from people that they knew well. In response, they had a number of coping mechanisms and strategies, such as withholding information about themselves, or being reticent about forging new relationships. These findings will be discussed in the next chapter.

A large, stylized teal arrow graphic curves from the bottom left towards the top right, with a lighter teal shadow on its right side.

Chapter 5

Discussion, conclusions and recommendations

5.1 Discussion of findings

The lived experience of adult intercountry adopted people has consistently been highlighted as an area requiring more research (e.g. Palacios & Brodzinsky, 2010, Fronek & Briggs, 2018). This study set out to explore the lived experience of intercountry adoption among adults in Ireland. Eleven participants were interviewed by the AAI's research team. The participants – nine female and two male - were aged between 19 and 38 years old at the time of interview, with a mean age of 27. Together they represented six countries of origin: Vietnam, Thailand, China, Romania, Belarus and India.

The overarching theme generated from the data was that the lived experience of intercountry adoption is a continuously evolving journey. As the mean age of the participants was 27, these findings capture their experiences at a relatively early point in adulthood. Given the overarching theme, it is likely that their experiences and views about intercountry adoption will continue to change over time. The findings presented in Chapter 4 will be explored hereunder briefly as they relate to the literature presented in Chapter 2.

5.1.1 The benefits of having a supportive, adoption-informed immediate family

The benefits of communicative openness in the adoptive family have been well documented, and include fewer behavioural problems, greater self-esteem and more positive adoptive identities among adopted people (Brodzinsky, 2006; Santona et al., 2022, Aramburu Alegret et al., 2018, Le Mare & Audet, 2011). Furthermore, adult adoptees value early adoption disclosure (Langenhoven & Greeff, 2022; Wydra et al., 2012). However, communicative openness and adoption disclosure can be challenging for adoptive parents to implement (Jones & Hackett, 2007). In 2007, Greene and colleagues found that Irish young adults had generally had a positive intercountry adoption experience, and this was reflected in the present study's findings. Participants described a loving, supportive start to their adoptive life in Ireland, with communicative openness around adoption in the immediate family and, for the majority, early adoption disclosure. This fits with an "acknowledgement of differences" approach (Kirk, 1984). It suggests that the adoptive parents were

adoption-informed and had given thought to how to handle the topic of adoption with openness within the family home. It is notable that participants were not specifically aware of their parents having availed of particular support or education around this, yet the fact that parents chose to embrace adoption in this way suggests that they likely had a level of knowledge around the benefits of open communication.

It is interesting to note, however, that this communicative openness did not automatically extend beyond the immediate family. Participants described certain limitations to communicative openness, such as limiting how much they said about their adoption outside of their family, or who they discussed it with. This suggests that the communicatively open style embraced by the family was somewhat conditional – safe to be discussed in the family home, but requiring some editing or censoring in the external world. Furthermore, a number of participants mentioned receiving micro-aggressions from extended family members and friends of their parents. This suggests that, while parents might have encouraged communicative openness among their friends and family, these other adults in the adopted child's life felt free to discuss the adoption but may not have fully understood the potential sensitivities at play. The many challenges for participants in fielding negative comments from others suggest that it would be beneficial for adoptive parents to inform adults in the adopted child's world about how to handle the topic of adoption sensitively. Taking a wider lens, increased adoption awareness within Irish society in general, particularly around language and communication, would provide an additional layer of support to adopted people and their families.

A number of studies have focused on the outcomes for children adopted from institutional care. For the most part, while they may have some initial difficulties, children can recover from early adversity, often displaying rapid "catch-up" (Juffer & van IJzendoorn, 2016). Some participants in the present study described behaviours consistent with attachment difficulties in childhood, such as clinginess, separation anxiety and avoidant behaviours. This is not surprising given the combination of likely early institutionalisation and relatively late age at adoption of the study's

Participants described facing an internal struggle that was not easily rectified, but that they nevertheless sought to address, often through interacting with external sources

participants. However, it is notable that, in many cases, participants' parents had worked through these difficulties with them, providing support and explaining the feelings and behaviours. In a few cases, participants described having more challenging mental health difficulties in their late teens and early adulthood. It is interesting to note that in some cases participants attributed these difficulties to their adoption, and in other cases they very clearly wanted to demonstrate that there was no link between the two. Some participants had been frustrated by health professionals focusing in on their adoption as an explanation for their challenges. This suggests a need for training of health professionals, both in how to handle the topic of adoption sensitively, and in the types of challenges which may or may not be influenced by difficult pre-adoptive environments. Some participants felt that they needed to inform and educate health professionals about adoption and the challenges that came with it (such as lack of medical history), but also that they needed to set boundaries around people using their adoptive status as a catch-all for any difficulties which they, themselves, felt were largely unconnected. This echoes the findings of some adopted researchers, who speak about the importance of de-pathologising adoption (e.g. McGinnis et al., 2019).

There is a dearth of available literature on the importance of community to intercountry adopted people. A key finding from this study was how much the participants valued close-knit, relatively homogeneous communities. In a number of cases, their parents or other relatives were well-known and well networked in their communities, and this helped the adopted children to settle in. Most participants had felt comfortable and safe in their communities, neighbourhoods and primary schools, with a number going to Irish speaking schools, or living in Irish

speaking families. This group had a grounding in the Irish language which was a very useful and valued proof of their "Irishness" when they dealt with later challenges of identity. In many ways, the beneficial nature of a close-knit community seems counter-intuitive. It could be posited that a larger, more diverse environment would render intercountry adopted people less likely to receive negative comments/discrimination on the basis of their visible ethnicity. It is possible that this finding was connected to the developmental stage that this particular cohort were describing, with close-knit communities being helpful at a certain point in their lives. Intercountry adopted people's needs may change as they go through the process of identity development, which could mean that sometimes, close-knit communities are helpful, while at other stages, they might benefit from more diversity in their environments.

5.1.2 Adoptive identity development

In developing adoptive identity, the adopted person constructs meaning around their adoption. This occurs within three development contexts: intrapsychic (their own affective and cognitive processes), relationships within the family, and connections outside of the family (Grotevant et al., 2000). Intercountry adoption is particularly challenging for the development of adoptive identity, with ethnic and racial identity adding an extra layer of complexity to the task (e.g. Beaupre et al., 2015). Greene and colleagues (2007) found that participants often felt "different", and this is broadly comparable to the present study's findings about identity.

The participants in this study spoke at length about the challenges they faced in identity development, and the findings very much mapped on Grotevant's contexts outlined above, with some extra nuance. Regularly referring to it as an "identity crisis", participants described feeling anxious and isolated, wondering how to define themselves ethnically, and attempting to align themselves with either Irish culture or their culture of birth. For a number of participants, questions about ethnic identity from either themselves or others appeared to kick-start an internal crisis, prompting a wider questioning about their adoptive identity. As such, the two were not so much entwined (Beaupre et al., 2015), but rather one precipitated the other. Participants described facing an internal struggle that was not easily rectified, but that they nevertheless sought to address, often through interacting with external sources - the

“connections outside of the family” context to which Grotevant refers. Participants spoke about seeking support with their identity development from parents, family and friends. However, it was clear that identity development was a very private experience. While most participants did not seem to openly discuss their feelings at length with any of these parties, they compared themselves to their family and friends, looking for similarities and differences, and finding themselves unique, and isolated. The development of adoptive identity continued for a number of years, and while participants felt more confident in who they were having worked through it, they stopped short of claiming it was complete. A number continued to struggle with relationships and questions. It seemed that the development of their adoptive identity was an ongoing journey.

Greene and colleagues (2007), reported that Irish intercountry adopted young adults had found country specific peer support groups to be a positive influence in their lives, though not all countries had such groups, and not all parents were members of such groups. The present study’s findings were similar in some ways. Many participants had been introduced to country-specific peer support groups as children, and in most cases these relationships fell away, or the groups stopped providing opportunities to meet up as the children grew older. If there was a supported way for older teenagers to transition from these (parent-established and parent-led) groups to something more independent and run by adoptees for adoptees, this could be a source of peer support and information to the Irish intercountry adopted population.

One key challenge for participants in the present study was a lack of anyone to identify with. Some participants had intercountry adopted siblings, but for the most part these sibling relationships did not help with identity development, which was seen as a very isolating task. A number of the participants mentioned knowing small groups of other intercountry adopted people, whom they had been introduced to in childhood, either by their parents or via country specific peer support groups. When these relationships transitioned to adulthood, they provided a form of support which participants relied on to varying degrees. Two participants specifically mentioned the Ana Kriégel murder case. One of the participants felt extremely isolated in her distress over the case, while, in contrast, the other reached out to her small support network of

other intercountry adopted people, whom she had met via a country specific peer support group, and together they found comfort in their common sense of loss and upset. In the USA, which has the largest number of intercountry adopted people in the world, intercountry adopted people have begun to come together in formal and informal groups, prompting researchers to describe them as a “diaspora” – a term normally used for a migrant population in another country (e.g. Kim et al., 2021; Hübinette, 2004). From these findings, it seems that some of the Irish participants had small networks which provided a level of emotional support similar to these diaspora groups. The development of larger, either informal or formalised groups for intercountry adopted adults to connect with each other could be beneficial in a number of ways. The experiences described by participants in relation to adoptive identity included a sense of isolation and struggling to define oneself. The struggle went on for a number of years and was difficult for many to resolve. Having a diaspora to connect with and share these experiences could provide a source of comfort and connectedness which appears to be very much absent in the Irish intercountry adopted community. Furthermore, it might provide a sense of ownership around the intercountry adoption experience.

The issue of birth information and tracing was raised by a number of participants, with nearly all participants saying that they would like more information about their origins. The salience of that information to their identity, and the type and level of information sought, varied among participants. For many, the need for information took precedence over the desire for a reunion or relationship. Furthermore, the quality and nature of relationships post-reunion varied in the small number of participants who had reunited with a birth relative. It is possible that information, which by its nature is set, one-way and not dynamic, is seen as helpful and somewhat safe. A relationship, which requires input on both sides and creates a dynamic, is possibly seen as somewhat riskier at certain stages of the participants’ adoptive identity development. This is a complex area, and given the small number of participants in the present study, the disparate findings around this issue point to the need for further, targeted research with a larger sample.

5.1.3 Dealing with racism and discrimination

Adoption-related stigma has been described as the judgemental, biased attitudes about adoption, and

about issues related to adoption (Baden, 2016), and micro-aggressions have been described as the “manifestation of adoption-related stigma” (Baden, 2016, p.5). Greene and colleagues (2007) reported that 74% of their Irish young adult participants had dealt with racism or discrimination. A number of studies have reported a high prevalence of micro-aggressions towards intercountry, transracially adopted people (e.g. Baden et al., 2023), and there is evidence to suggest that it starts at a young age (Zhang et al., 2019).

The majority of the participants were adopted from Asia and South East Asia, with four adopted from Eastern Europe. Almost all of the sample in the present study had experienced some form of racism and discrimination – a marked increase from Greene and colleagues’ study (2007). This is consistent with other studies (e.g. Baden et al, 2023). Where the present study’s findings also differ from Greene and colleagues’ (2007) study is that, for the most part, racism and discrimination reported among the present sample were in the form of micro-aggressions – casual jibes and comments – and they usually came from someone the adopted person knew well – a friend of the family, relative or classmate. It is possible that familiarity led to a false sense of security, where the micro-aggressor felt they could make a joke or comment at the participants’ expense. By contrast, Greene and colleagues’ participants reported more examples of abject racism and prejudice. This may reflect the maturation of Ireland’s more multi-cultural society.

It was interesting to note that some participants defended micro-aggressions. In these cases, while they remembered the comments, and how hurt they felt, they still often believed that the micro-aggressions had not been intended to cause hurt, but rather had come from a place of ignorance or lack of understanding about the sensitivities involved. This points to a need for more broad education of the general public about adoption and its nuances. In families where there was communicative openness and sensitivity around adoption, it is notable that this still did not protect the adopted person from hurtful comments by relatives and family friends. This is an example of the limits of communicative openness, as described in the findings. Adoptive parents may not have extended the same culture of communicative openness to their family or friends, and yet those adults had access to their adopted children, and felt at liberty to make jokes about them. Support

for adoptive parents in how to prepare their wider networks for, in turn, supporting their adopted child might help ameliorate this challenge.

In other cases, the racism and discrimination were more pronounced, and participants found this difficult to deal with. A number of participants described experiencing racism and discrimination in secondary school. Again, there is an opportunity for education of teachers and students in how to handle adoption in the classroom. Based on age, it is estimated that there are currently approximately 1300 intercountry adopted people in Irish secondary schools. A brief programme of education around how to handle the topic of adoption in the classroom could be a useful way to ameliorate some of these racist and discriminatory behaviours which have the capacity to cause so much hurt.

5.2 Strengths and limitations of the present study

The present study contained a number of limitations. It was conducted directly by the Adoption Authority of Ireland’s research team. Adoption in Ireland has a history of secrecy, and in recent years there has been negative media coverage around domestic adoption and the institutions or structures historically associated with it. There may exist a similarly negative public perception of state agencies such as the Adoption Authority of Ireland (AAI) which were associated with adoption. We cannot rule out the fact that potential participants may have been put off by this, and that participation might have increased had the study been conducted by an independent or university-based research team.

Recruitment was slow and very challenging, yielding a relatively small sample size of 11. As such, the final participants were not representative of the overall profile of intercountry adopted people in Ireland. The study was advertised widely through service providers including AAI staff, Tusla, Barnardos Post-Adoption support service, HHAMA, the Department of Children, Equality, Disability, Integration and Youth, the Adoption Research Network of Ireland, the civil service research managers network mailing list, country-specific peer support groups, other key contacts of the AAI and online forums such as Facebook groups. Stakeholders were encouraged to share the poster and display it in waiting rooms and common areas etc. However, uptake was still extremely low, with the recruitment of one

participant per calendar month over the duration of nearly a year. It is notable that, while one in three Irish intercountry adoptees came from Russia, no participants in the present sample had been adopted from this country. There were also no participants of Ethiopian origin, despite Ethiopia being a sending country of note some time ago.

Having heard anecdotally about an over-representation of intercountry adopted people in social and homeless services, posters were also sent via post and email to the main contacts in these supports, however this yielded no additional participants. Therefore, we cannot ascertain that the participants who took part were representative of the Irish intercountry adopted population as a whole. It is likely that the more disenfranchised members of this population either did not hear about the study or chose not to take part. There is also a gender bias in the participant profile, with nine female and only two male participants, a pattern which has previously been reported as a key challenge in qualitative research (Affleck & Macdonald, 2013).

There has been a recent focus on the importance of adoption researchers clarifying their positionality, and in this case the members of the research team differed from the participant group in that the team were non-adopted and of White Irish ethnicity. This may have prompted some caution on the part of the participants in sharing their stories. However, it should be noted that there was no evidence of this, with participants enthusiastically engaging with the process.

There was a small level of variation within how the study was conducted, and it is possible that this impacted the findings to a certain extent. One focus group was held, with two participants. After this, the decision was taken to switch to individual interviews. While this yielded a higher uptake, the change means that the data collected from the (interactive, dynamic) focus group may differ from that collected via the (less interactive) interview. In addition, some participants were interviewed by a team of two researchers. However, due to a staffing issue, participants who took part later in the year were only interviewed by one researcher. This may have impacted the type and direction of the questions asked, as in a dual interviewing process the interviewers have more time to consider and respond to the direction of the interview.

The present study also contains a number of strengths. It provides new findings in an area which has been largely under-researched, both in Ireland and globally. These findings may be used to directly inform policy about intercountry adoption, which would be beneficial to the Irish intercountry adopted community and their families. A number of participants said that they enjoyed taking part, and overall the process increased engagement and positive affect towards the Adoption Authority of Ireland. All participants opted in to hearing more about AAI research, to receiving a copy of the final report, and to being contacted about research in the future. Participants had the space, in their interviews, to ask questions about available support or birth information and tracing, and in a number of cases participants were referred on to other AAI services.

5.3 Conclusions and recommendations: revisiting the research questions



1. What are the lived experiences of intercountry adopted individuals growing up in Ireland?

Among this group of eleven participants, it was clear that adoptive parents set the tone for a positive start to their Irish intercountry adoption experience, with a number of supports in place which, according to the literature, are beneficial to the adopted child. These include an open communication style, early adoption disclosure, and sensitive, responsive adoptive parenting. As they reached late childhood and early adolescence, however, challenges began to emerge. In their teens, participants described how questions from either themselves or from others about their ethnicity prompted a struggle with establishing a wider sense of their own identity.

Many described this as an “identity crisis”, and this will be covered in further detail in Question 2, below. Nearly all of the participants described dealing with racism and discrimination at different levels. The most common type described were “micro-aggressions” – jokes or casual comments, seen as being either intentional or unintentional. Furthermore, for the most part these micro-aggressions typically came from people the participant knew quite well – friends in their wider social circle, or extended family members. As such they were seen as hurtful, unexpected, and surprising.



2. How do Irish intercountry-adopted adults perceive their adoptive identity?

The development of adoptive identity was seen as a challenging, isolating and unavoidable task. A number of participants explicitly referred to it as an “identity crisis”. Having worked through this, as adults, participants were able to reflect on their journey to forming adoptive identity, and, for the most part, they had reached some level of resolution around their ethnicity and sense of self. However, there was a general sense among participants that they were still learning, and still fleshing out aspects of their adoptive identity, of which ethnic identity was just one element. Identity development was therefore an ongoing, multidimensional personal experience which required work and thought. For the most part, participants felt very strongly that they were Irish, and this was particularly true of those who went to Irish speaking schools, or spoke Irish at home. It seemed that having a connection to the Irish language helped to solidify their sense of self, and to clearly establish “Irishness” as a core tenet of their identity.



3. What supports do intercountry adoptees need?

A number of state-accredited support services already exist for the Irish intercountry adopted population, such as Barnardos Post-Adoption Service and the Adoption Authority of Ireland’s dedicated intercountry adoption social worker, alongside other informal Facebook and peer support groups. However, it seems that many participants were unaware of the existence of the state-accredited supports, or of how they could access them. By the end of 2024, just under 50% of Ireland’s intercountry-adopted population were under 18, and just over 50% over 18. The participants in this study ranged up to age 38. As the Irish intercountry adopted population moves along the lifespan, targeted, specific supports should be made available across a wider age range, and should be clearly and purposefully advertised so that intercountry adopted people are aware of what they can avail of. Barnardos Post-Adoption Service provides a valuable resource, funded by Tusla, the Child and Family Agency, donations from clients, and training income. They provide a therapeutic service for intercountry adopted children and young adults

and their families, alongside group work and group support. However, as it currently stands, Barnardos do not have funding to provide specific supports for intercountry adopted adults over the age of 23. Such adults can contact Barnardos for once-off support via their helpline/email advisory service and can attend the Barnardos groups for adopted adults. Adapting the service offered by Barnardos to ensure it meets the needs of intercountry adopted people aged over 23 is an important consideration.

The participants in this study highlighted critical times in their lives and developmental journeys when it is clear that certain types of support could be beneficial. Supporting adopted people around the complex process of identity development, starting in their late childhood and early teens, could help them navigate what, for many, felt like an unexpected and isolating developmental task. Furthermore, through pre-emptively educating intercountry adopted children and their parents on what to expect as they reach adolescence, such emotional challenges could be anticipated and prepared for.

Having the ability to connect with a diaspora, or a group of intercountry adopted people could help ameliorate the feelings of isolation, and support the development of a positive adoptive identity. Participants clearly asserted the need for targeted, long-term supports for adoptive parents in how to guide their children through the various challenges they mentioned experiencing. A number mentioned the support their parents received either from extended family members or from friends who had also adopted children from outside of Ireland. Consideration should be given to how best to support adoptive parents for as long as they feel they need support. This could take the form of providing online resources, or more tailored training and advice for parents depending on their specific requirements. Research with adoptive parents would provide a useful evidence base for the development of such resources.

A number of participants spoke of the importance of psychotherapy or counselling to help them deal with various challenges, particularly in their teenage years. While they found such supports very valuable, it is notable that there is no accreditation for such professionals to become specialised in adoption support. Some participants were concerned and frustrated that health professionals tended to blame their difficulties on their adoption, when the

participants strongly felt this was not the case. This provided support for the growing adoptee-researcher perspective which suggests a move away from the more traditional adoption-as-pathology model of research. Targeted training and accreditation for counsellors, and psychotherapists in this area might help to ameliorate this issue, while at the same time ensuring that professionals are well versed in some of the personal difficulties that intercountry adoption may raise.

A number of the challenges participants faced, such as micro-aggressions and questions about their ethnicity – could potentially be improved with education around adoption and its sensitivities. While the Irish intercountry adopted population is relatively small, proportionally it is the same as the intercountry adopted population in the USA, which is the biggest receiving country in the world. Therefore, the likelihood of a person living in Ireland encountering an intercountry adopted person in daily life is relatively high. Consideration should therefore be given to providing education to teachers, health professionals and the general public in how to handle the topic of adoption sensitively. This fits with an equality, diversity and inclusiveness approach.

While the area of intercountry adoption information and tracing is undoubtedly complex, this study found that there exist a number of misperceptions, or inaccurate information around the availability or accessibility of information. Furthermore, although the interviews for this study took place shortly after a large advertising campaign about the new Birth Information and Tracing Act (2022), participants seemed largely unaware that it existed, and those who knew about it did not know if it applied to them. Further advertising and simple information targeted specifically at the intercountry adopted population would be extremely beneficial, alongside more representation of the intercountry adopted community in consultations on legislation. Intercountry adopted people could also benefit from a diaspora, or a community with which to connect. One key finding was the sense of isolation that many intercountry adopted people feel. Having an intercountry adopted peer group for adults to link in with could provide a much needed sense of connectedness and belonging to the Irish intercountry adopted population. Suggestions for future research are provided below.

Suggestions for future research into Intercountry Adoption in Ireland:

Research into the information and tracing needs and experiences of Irish intercountry adopted people.

Exploratory research into the experiences of intercountry adoptive parents.

In-depth research into the lived experience of intercountry adopted children and teenagers.

A study of Irish healthcare professionals, mental health practitioners and teachers to assess training needs in relation to adoption sensitivity and awareness.

Continued research into the lived experience of intercountry adopted adults in Ireland as they progress through the lifespan, including the experience of becoming a parent.

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Notes

Notes



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