



Guidance on Overweight Adopters

1. Introduction

Adopt North East is committed to the equal treatment and consideration of all potential adopters. An applicant adopter will not be ruled out as an adopter because they are overweight. However, where an applicant adopter is overweight, Adopt North East will work sensitively to come to an informed and considered decision as to whether the applicant's weight impacts their suitability to become an adopter. This will be based on an assessment of the issue. The purpose of this Guidance is to support a practitioner in assessing the impact of an adopter's weight on their potential suitability.

This Guidance draws on the work of CoramBAAF, in particular their work *Evaluating Obesity in Substitute Carers* by Mary Mather and Karen Lehner (2010).

2. Three Guiding Principles informing assessment of overweight applicants

In *Evaluating Obesity in Substitute Carers* three essential guiding principles were proposed in dealing with health issues of applicants. The Agency applies these three principles in assessing applicant adopters who are overweight.

- a) The welfare of the child is paramount
- b) Parenting capacities are more important than perfect health
- c) Honesty and openness in dealing with applicants are essential

3. Applying the Guiding Principles in Assessment

The welfare of the child is paramount

Adopt North East will always place the welfare of children at the forefront of its work. It acknowledges in its practice of assessment of overweight applicant adopters research by Public Health England that '*when both adoptive parents are overweight, the likelihood of an adopted child being overweight is between 10% and 20% higher than when they are not*' (Health Matters 2017). In assessment, the Agency will therefore take into account research that obesity increases the risk of children and adults developing a range of health issues. The Agency is committed to achieving for children the best possible outcomes.

Parenting capacities are more important than perfect health

The Agency acknowledges that every applicant is unique and, accordingly, that every applicant deserves a holistic and comprehensive assessment of their individual circumstances. Accordingly, the Agency states as follows:

- Being overweight and/or obese is increasingly common in society in general and therefore is increasingly prevalent in adults applying to become adopters and it is not a bar to approval as an adopter
- Adopt North East will always assess an applicant's suitability not only to meet the current needs of a child, but the applicant's ability to be able to care for an adopted child throughout their childhood and into young adulthood
- Being overweight – a person with a higher Body Mass Index (BMI) than 25.0 – will not preclude an applicant from being approved as an adopter by the Agency
- For all applicants, whatever their BMI, assessment by the Agency will include exploring an applicant's understanding of a healthy lifestyle, including how they plan to incorporate a healthy diet and appropriate physical exercise into the life of a child/ children in their care
- If an applicant is overweight (BMI of more than 25.0) or obese (BMI of more than 30.0), then, as with any other health risk factor, the Agency will make the applicant aware at the earliest opportunity of the potential impact of the issue on suitability, providing where appropriate, advice to the applicant to consider actions to reduce the risk

Honesty and openness in dealing with applicants are essential

The Agency has no cap on the BMI of an applicant deemed acceptable for approval. However, the higher the BMI, the greater the need by the Agency to ensure that weight of an applicant does not affect their ability to meet the reasonably expected needs of an adopted child. The Agency assessment will therefore take into account the extent that an applicant is overweight:

I. BMI 25-30: Overweight

As BMI is a measure which does not take into account body composition, some applicants within this category may be fit and healthy.

If an applicant's weight is noted to be increasing over time, it is important that an assessing Social Worker emphasise the need for healthy lifestyles and the increased risks associated with becoming increasingly overweight.

II. BMI 30-40: Obese

Applicants who have a BMI between 30.0 and 40.0 should be advised by the Agency to visit their GP to discuss their weight and the management of other identified risk

factors. The GP is likely to take additional measurements including waist and waist-to-hip ratio to help to identify applicants who are at risk of obesity-related complications. Other risks factors such as high blood pressure, high cholesterol, and diabetes are likely to be assessed.

The Agency will include in their assessment the degree to which the applicant has acknowledged and accepted that they are obese, what their understanding is of how their obesity might affect a child in their care and what action they have taken or are proposing to take to address it.

III. BMI >40: Morbidly Obese

Research has identified obesity at this level as a very serious health problem for the applicant (NICE 2006). Applicants within this group are at high risk of significant morbidity and early mortality which may impact on their ability to care for a child. The Agency should from the earliest opportunity explore the implications of morbid obesity upon the application to become an adopter.

Applicants should be referred to their GP by the Agency for ongoing assessment and management of morbid obesity.

Consideration may need to be given by the Agency as to whether the applicant should defer their assessment whilst they address their weight and access support and opportunities to make changes.

4. Evidence to be gathered during Social Worker Assessment of Overweight Applicants

Suggested questions and areas for consideration for Social Workers conducting assessments of applicants who are identified as being overweight, obese or morbidly obese.

Knowledge and Understanding

- What does the applicant understand about the causes of being overweight or obese and how these causes contribute to ill-health?
- In the circumstances of the applicant, what factors or combination of factors do they think have caused them to be overweight?
- What does the applicant understand by a healthy diet for their family?
- Are other family members overweight or obese?
- In the case of Foster Carers applying to become adopters, have previous children placed with them gained excessive weight?

Attitudes

- What is the applicant's attitude to physical exercise currently?

- What was their attitude in the past?
- Does the applicant plan to lose weight?
- Has the applicant tried to lose weight in the past? What happened?
- How would the applicant support a child in their care who is overweight and needs help and support to lose weight?

Behaviours

- What is the applicant currently doing in order to live a healthy lifestyle (in terms of dietary intake and physical activity)? Has this changed over time? Since when? What has been the result?
- Is the applicant able to provide a child with daily physical activity? How would they do that?
- What is the applicant's capacity to engage in physical activity? What physical activity do they currently do (include walking to work as well as more formal physical activity e.g. going to gym)? How often?
- Do they become breathless climbing a flight of stairs?
- Could they run after a young child who is running towards a road?
- Does the applicant have the time and/or resources to successfully lose weight?
- Are they receiving support? From whom (partner, family, friends, GP, practice nurse, staff at gym, slimming organisation such as Weight Watchers)?

Outcomes

- How much weight has the applicant lost?
- Over what period of time?
- How have they achieved this?
- Could this be continued when a child is placed with them?

5. Coming to a Recommendation following Assessment

A Social Work assessment should include information and analysis of the applicant's understanding of the risks of being overweight to themselves and also to a child in their care.

It should include an analysis of the applicant's motivation and attitude to change, informed by evidence of any actions that they have taken or plan to take to address the issue. Evidence of a reduction in weight by an applicant during the course of assessment would be strongly persuasive of a motivation to change.

Where one or both of applicant couple is overweight, the assessment must include a consideration of the impact of the couple dynamic on the motivation and abilities of both partners to address the issue.

Consideration by the Social Worker will need to be given to accessing advice from the Medical Advisor to the Agency, including obtaining a Q-risk score which can inform the impact of issues of weight on cardiovascular health and life-expectancy.

Health issues that may contribute to an applicant being overweight should always be discussed with the Medical Advisor.

6. Decision making about Applicant Suitability

The final decision about the suitability of an applicant will be made by the Agency Decision Maker following a recommendation from Panel. In order for Panel to come to an informed and considered recommendation, the Prospective Adopter Report must include:

- Factors in the applicant's history which may have contributed to the applicant's weight gain
- Attitudes of the applicant to living a healthy lifestyle
- Motivation of the applicant to make changes to their lifestyle
- What the applicant has done with respect to weight management
- What advice has been given by the GP and what level of engagement with the advice has been evidenced
- Any resistance by an applicant to make the necessary changes to their own lifestyle
- Any documented weight loss including the timeframe of the loss and its sustainability.
- The applicants understanding of the implications of their weight for a child placed in their care