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Child adoption as an oppressive child protection practice: The voices of adopted adolescents in Zimbabwe

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ABSTRACT

Adoption is globally recognised as a child protection strategy, offering children without parental care a stable family environment. However, this study explores how adoption processes in Zimbabwe can perpetuate oppressive dynamics, particularly by marginalising the voices of adopted adolescents. Using anti-oppressive practice (AOP) as the theoretical framework, the study employed a social constructionist, interpretative phenomenological analysis (IPA) approach to examine the lived experiences of 19 adolescents aged 14–17 who had contested their adoptions. Data were collected through semi-structured interviews, analysed thematically using IPA principles and supported by MAXQDA software. Findings revealed that adolescents felt disempowered and excluded from the adoption process, leading to emotional distress, cultural disconnection and identity crises. They reported secrecy, lack of transparency and inadequate

support from social workers, coupled with mixed feelings of gratitude and resentment toward adoptive parents. With the currently closed adoption model prioritising children from 5 years and below, the study underscores that current adoption practices in Zimbabwe often marginalise children's voices and sever cultural ties, perpetuating oppressive dynamics. This calls for reforms emphasising transparency, inclusivity and cultural preservation. Adoption processes should empower children, respect their rights and foster open communication to promote holistic wellbeing and identity continuity.

Keywords: adolescents; adoption; child protection; cultural identity; oppression

INTRODUCTION

Globally, adoption has long been considered a crucial child protection measure, providing children without parental care with a stable and loving family environment. Legally, adoption involves the permanent transfer of parental rights from birth parents to adoptive parents, offering children a sense of belonging and security (Fisher, 2015; Whatson et al., 2024). It can strengthen community bonds by uniting previously unrelated individuals to form new familial connections. However, despite these perceived benefits, adoption is a complex institution shaped by social, cultural and economic factors, and it can also be a source of trauma, identity confusion and emotional distress for many adopted individuals. In Zimbabwe, adoption is often framed as a solution for vulnerable children, particularly in the face of poverty, economic instability and inadequate social welfare systems (Muchinako et al., 2018; Muzingili & Gunha, 2017; Taruvinga et al., 2015). Yet the voices of adopted adolescents, especially those who contest their adoptions, have been largely overlooked in both research and policy. As adoption remains a legal process that permanently alters a child's family structure, it is critical to question whether it sometimes perpetuates oppressive dynamics, stripping children of their cultural, ancestral and familial ties. This study aims to explore the phenomenological experiences of adolescents in Zimbabwe who have contested their adoptions, shedding light on how the current adoption process may, in some cases, disempower and alienate them. By examining their perspectives, this research seeks to challenge the prevailing child protection narrative and advocates for a more inclusive and empowering approach to adoption.

DISRUPTION IN CHILD ADOPTION: A SCOPING REVIEW

Adoption presents a complex and often contested global landscape, heavily influenced by cultural, legal and societal factors. In many African contexts, social norms rooted in the significance of blood ties and lineage create barriers to formal adoption (Gerrand & Stevens, 2019). Studies by Chikwe et al. (2022) and Whatson et al. (2024) highlight how kinship systems, communal child-rearing practices and the high value placed on biological relations often lead to a preference for informal adoption, which bypasses legal frameworks. This disconnect between African cultural practices and Western legal adoption models has been observed across multiple countries. In Ghana, for instance, Nachinab et al. (2019) found that family dynamics – including a reluctance

to sever blood ties, discrimination against adopted children and resistance to allowing adopted children to inherit – undermined the practice of formal adoption. Similarly, Marengu (2020) and Mezmur (2009) emphasise that in Zimbabwe and other African nations such as Botswana, Malawi and Zambia, there is a solid aversion to placing children in non-parentage settings, further contributing to the limited emphasis on formal adoption. Beyond Africa, cultural factors also influence adoption practices. In Iran and Nigeria, Farhangazad (2017) and Chikwe et al. (2022) found that Muslim communities exhibit a lesser inclination toward adoption because of religious beliefs, further complicating adoption processes in these regions. In the United Kingdom, Chowdhury (2021) revealed that Black adopters' fear of social exclusion acted as a barrier to adoption, demonstrating the role of racial and cultural identity in shaping adoption experiences. The challenges of identity formation are particularly acute for transracial adoptees, as seen in Marcelli et al.'s (2020) study of Asian international adoptees struggling with identity development. Similar findings were reported by Myers et al. (2020) in their study of Hong Kong adoptees, who found comfort in their Hong Kong identities during visits, but still grappled with complex identity issues. These studies collectively suggest that adoption is not only about legal processes, but is deeply intertwined with cultural and social perceptions of family, identity and belonging.

In many societies the adolescent stage marks a particularly challenging period for adopted children. Berry and Barth (1989) found that adoption disruption rates were highest among adolescents aged 15 to 18 years (26.1%), followed closely by those aged 12 to 14 (22.4%). During adolescence, children often attempt to make sense of their past, especially the parts of their stories that involve trauma or loss. Lanham (2022) notes that this process can lead to mood instability, aggressive behaviour and emotional withdrawal. The age at which a child is adopted is a critical predictor of these behaviours, as earlier placements often capture an accumulation of negative experiences that harm a child's development (Helder et al., 2014; Palacios et al., 2018). Selwyn and Lewis (2023) found that aggressive behaviours, particularly those perceived as violent, significantly increase the risks of adoption disruption. A central issue for adopted adolescents is the search for identity, particularly related to their biological roots. Whatson et al. (2024), in a systematic review, emphasised the complexity of this search, noting that adopted adolescents often feel a sense of "missing pieces" and "otherness." Macleod et al. (2021) argue for recalibrating adoption processes to allow for contact with birth families, a practice that is largely absent in Zimbabwe's closed adoption system. Coakley and Berrick (2008) and Selwyn and Lewis (2023) both highlight that adolescents may not feel comfortable discussing their origins with their adoptive parents, leaving many to internalise their reflections. The lack of reassurance and clear explanations about their birth families exacerbates feelings of isolation and confusion (Palacios et al., 2018).

While demographic characteristics such as the child's age and gender are often cited as predictors of disruption, studies suggest that the parent-child relationship is a more reliable indicator of adoption success (Barbosa-Ducharne & Marinho, 2019). One surprising finding is the role of the adoptive mother's educational level. Coakley and Berrick (2008) found that higher educational

attainment was associated with more adoption disruptions. However, more recent research complicates this view, suggesting that educational level may be a proxy for heightened parental expectations, which can strain the parent-child relationship and contribute to instability (Helder et al., 2014; Palacios et al., 2018). Denby et al. (2011) echoed this in their study of 609 adopted children in Nevada, where parental expectations were identified as a significant predictor of adoption outcomes. Rigid parenting styles also play a role in placement instability, with Barbosa-Ducharne and Marinho (2019) finding that parents with inflexible approaches were five times more likely to experience adoption disruption.

Adopted children are also at higher risk for psychopathology and maladjustment as a result of early life stress. A study by Dance et al. (2002) confirms that adopted children exhibit higher rates of externalising disorders such as ADHD, oppositional defiant disorder and conduct disorder (Ford et al., 2007; Lawrence et al., 2006). The presence of attachment disorders is also well documented, with Dozier et al. (2001) and O'Connor et al. (2000) finding that adopted children often struggle with insecure attachment and social disinhibition. These difficulties extend to academic settings, where adopted children face challenges with school adjustment, academic achievement and peer relationships (Pears et al., 2010). In Northern Ireland, McSherry et al. (2015) found that 40% of looked-after children exhibited behavioural problems, while 35% had emotional difficulties, and 21% were diagnosed with depression or anxiety. Similarly, Zito et al. (2008) reported that adopted children received prescriptions for mental health conditions at higher rates than the general population. These findings align with research showing that adopted children often experience deficits in visual memory, attention and inhibitory control (Zito et al., 2008). Emotional development deficits are also common, with adopted children performing poorly in tests of emotional understanding and theory of mind (Pears & Fisher, 2005; Pollack et al., 2010).

The closed adoption model, which restricts access to birth records and contact with biological families, creates additional challenges for identity formation. In contrast, open adoption models, which promote communication with birth families, have been shown to improve the wellbeing of adopted adolescents. Egan et al. (2022) argue that open adoptions allow adoptees to reconcile their biological and environmental heritage, leading to healthier emotional outcomes. In Portugal, Barbosa-Ducharne and Marinho (2019) found that adopted adolescents often reflect on the similarities and differences between themselves and their adoptive families. This process is complicated by the lack of access to their genetic history. Thus, adoption can perpetuate oppressive dynamics and reinforce power imbalances. Lanham (2022) argues that current adoption practices often stigmatise and marginalise birth parents, overlooking the social, economic and systemic factors that contribute to their inability to provide care. This is particularly evident in Western adoption models, where the emphasis on assimilating children into new families and cultures can erase their cultural heritage and sever connections with their birth communities (Nombebe & Boshoff, 2024). In France, for example, Miller et al. (2020) found that adopted adolescents faced additional stigma and microaggressions, particularly in terms of family belonging and adoption identity. In Norway, Liodden and Leirvik (2024) found that despite being raised in predominantly

white families, transracial adoptees experienced high levels of misrecognition and racism, complicating their sense of identity. Selwyn and Lewis (2023), in a study of 9,316 looked-after children in England and Wales, found that children from minority backgrounds who were disconnected from their biological families reported higher levels of dissatisfaction. These findings support the growing call for post-adoption birth family contact, which has been shown to foster healthy identity formation and create a new kinship network involving both adoptive and birth families (Macleod et al., 2021; Neil et al., 2011).

In Zimbabwe, adoption is considered the fifth alternative care option, only pursued after biological family, extended family, community and foster care have failed to provide adequate care (Muzingili & Chikoko, 2019). This hierarchical approach reflects the broader cultural resistance to adoption as a permanent solution, further complicating the experiences of adopted adolescents (Gozho et al., 2024; Muzingili & Chikoko, 2019). As Briggs (2013) argues, the current global adoption system perpetuates a neo-colonial narrative that prioritises Western models of family and parenting, often at the expense of local, dynamic practices. This calls for decolonising adoption practices, particularly in African contexts, to better align with the cultural and social realities of the regions involved (Gozho et al., 2024; Karandana Lekamlage, 2024).

THEORETICAL FRAMEWORK

Anti-oppressive practice (AOP) in social work was chosen as the theoretical framework for this study because adoption in Zimbabwe is exclusively handled by social workers registered under the Social Workers Act 27:21 (Government of Zimbabwe, 2001). This institutionalisation of adoption processes places significant power in the hands of social workers (Featherstone et al., 2018; Marengu, 2020), who are responsible for decisions that permanently impact the lives of children. However, social workers work with the judiciary that plays a vital role in the child adoption process by ensuring that all legal requirements are met and that the adoption serves the best interests of the child. Through the Children's Court or High Court, it reviews social welfare reports, assesses the suitability of adoptive parents, and grants the final adoption order, thereby legally transferring parental rights. Given this context, AOP is particularly relevant as it addresses the power imbalances in social work practices (Strier & Binyamin, 2014), especially in child protection and adoption processes. AOP emphasises recognising and dismantling oppressive structures in social work, advocating for empowering service users and ensuring their voices are heard in decisions affecting their lives. In the context of adoption, where children's voices are often marginalised, AOP offers a framework to challenge these dynamics and promote a more equitable and participatory approach. The five key characteristics of anti-oppressive practice – recognising oppression, empowering clients, challenging oppressive structures, practicing self-reflection, and working in partnership (Anis & Turtiainen, 2021) – are crucial in explaining how adoption can become oppressive and how these dynamics can be addressed to produce positive outcomes in child protection.

AOP calls on social workers to understand how systemic oppression operates, particularly in the adoption process, where children may be disconnected from their cultural, familial and ancestral roots. In Zimbabwe, where adoption often follows Western legal models that conflict with local kinship systems (Marengu, 2020), this disconnect can perpetuate oppression by undermining the child's identity and ties to their birth family. Recognising this form of cultural erasure is the first step toward creating an adoption process that respects the child's heritage and identity. Central to AOP is empowering service users (Strier & Binyamin, 2014) – in this case, adopted children – by actively involving them in decisions about their lives. Adoption in Zimbabwe often overlooks the voices of children, treating them as passive recipients of care rather than active participants. AOP advocates for giving children a platform to express their wishes and concerns, ensuring their perspectives are taken into account in adoption decisions. This can prevent the disempowerment and alienation that many adopted adolescents experience, particularly those who feel disconnected from their biological families.

AOP requires social workers to challenge the systems perpetuating oppression (Anis & Turtiainen, 2021). In Zimbabwe, adoption policies often reflect a hierarchical child protection framework that places adoption as a second-last resort, just before institutionalisation. This approach may stigmatise adoption and create additional barriers for children to feel fully integrated into their adoptive families. AOP encourages social workers to critique these policies and advocate for more inclusive adoption practices, such as allowing for post-adoption contact with birth families, which research shows can improve adopted children's emotional wellbeing and identity formation. However, achieving complete transparency, inclusivity and cultural preservation may be challenging in the case of abandoned children unless the biological parents or ancestral connection is established. Despite this, social workers must self-reflect to examine how their biases, cultural perspectives and professional authority influence their decisions in adoption cases. In Zimbabwe, social workers may unconsciously perpetuate oppressive practices by adhering to adoption models that prioritise assimilation into adoptive families over maintaining connections to a child's heritage. By reflecting on their positions of power and privilege, social workers can become more attuned to the needs of adopted children and avoid reinforcing oppressive dynamics. AOP promotes working in partnership with clients (Fairbairn & Strega, 2015), ensuring that children and their families are included in the decision-making process. In the adoption context, this means involving biological families, adoptive families and adopted children in open discussions about the child's future rather than imposing decisions unilaterally. This collaborative approach can mitigate feelings of alienation among adopted adolescents and foster a sense of belonging that integrates both their adoptive and biological identities.

METHOD

Design

The research question, which seeks to investigate the lived experiences of adopted adolescents in Zimbabwe, necessitated a social constructionist, grounded interpretative phenomenological

analysis (IPA) approach. This methodological framework was chosen to explore how participants construct meaning around the adoption process and its impact on their wellbeing. Rooted in phenomenology and hermeneutics, IPA allows for deep engagement with the participants' subjective experiences, making it ideal for this study. Adopting a social constructionist lens emphasises how the broader cultural, social and familial contexts shape these adolescents' experiences. This aligns with anti-oppressive practice (AOP) principles by ensuring that the adolescents' narratives are prioritised and not overshadowed by pre-existing power structures or assumptions about their experiences. Data collection was inherently fluid, flexible and conversational, allowing for the empowerment of participants by giving them control over the narrative, which is a key characteristic of AOP. This approach aligned with the study's focus on adolescents who contested their adoption outcomes, ensuring their voices were central. The grounded nature of the study allowed theory-building to emerge inductively from the data, ensuring that the adolescents' perspectives remained at the forefront of analysis, which reflects AOP's commitment to incorporating service users' voices and promoting partnerships between researchers and participants.

Participants

The study focused on adopted adolescents aged 14 to 17 who had contested the adoption process and its outcomes through the Department of Social Development. These were adolescents adopted in Zimbabwe, not intercountry or international adoptions. It offered a unique perspective on the adoption experience. In Zimbabwe, many children are made available for adoption if they have been abandoned or orphaned, and no relative is considered fit and proper to care for/foster the child. When it comes to abandoned children, so often they never know their ancestors or cultural heritage, and this exacerbates the identity challenges they face. This is worsened by closed adoption model commonly practised in Zimbabwe, where an adopted child does not get access to biological parents or ancestral connection. These adolescents were adopted between the age of 0 to 5 years. In this study, the Department provided access to adolescents who had explicitly requested a reversal of their legally irreversible adoptions, underscoring their dissatisfaction with the process. This approach reflects AOP's emphasis on empowerment, as it prioritises the voices of those most affected by the adoption process – the adolescents themselves. The research team collaborated with the Department to establish inclusion criteria: adolescents within the specified age range, deemed cognitively mature enough to engage thoughtfully with the research question.

Purposive sampling was employed to select participants, consistent with IPA's idiographic commitment to small and homogeneous samples (Charlick et al., 2016). This allows for the empowerment of participants by ensuring that their voices are central to the study findings. The study began by approaching the adoptive parents of 34 adolescents, with 19 parents consenting to their adolescents' participation. The final sample was comprised of 19 adolescents, with 13 males and 6 females aged between 14 and 17 years. This purposive sample was appropriate, as the study specifically targeted those adolescents who had contested their adoption, ensuring they had relevant lived experiences to share. This approach enabled the research to delve deeply into the

adolescents' subjective experiences, while maintaining a manageable sample size for in-depth qualitative analysis, ensuring transparent partnerships between the researchers and participants.

Data collection

Data were collected using a semi-structured interview style, grounded in the interpretative phenomenological analysis (IPA) framework, which emphasises a flexible and conversational approach. Semi-structured interviews allowed researchers to explore the lived experiences of adopted adolescents, while maintaining space for participants to express themselves freely. This approach is rooted in AOP's commitment to empowerment, allowing participants to control the flow of conversation and share their narratives without being confined by a rigid line of questioning. The open-ended nature of the questions was designed to encourage rich, detailed responses, with prompts like, "Can you tell me more about your experiences?" helping to elicit a 'spill' of information. This approach enabled researchers to engage in active follow-up, probing naturally as new themes emerged during the discussion, thus avoiding the rigidity of a predetermined list of questions. In achieving excellence in interpretive phenomenology during the data-collection process, Nizza et al. (2021) encourage researchers to use quality markers such as constructing a compelling, unfolding narrative and developing a vigorous experiential and/or existential account. The flexibility of the interview process aligns with the AOP principle of working in partnership with participants, ensuring that their voices are central in shaping the research outcomes.

Interviews were conducted in the Department of Social Development offices, a neutral and secure setting where adoptive parents would not be present. This reflects AOP's emphasis on creating safe spaces where participants feel empowered to speak freely without the influence of power dynamics from their adoptive parents. Adolescents were invited to come at their convenience, removing any pressure or external influences. Interviews were held in a closed office environment, free from interruptions, providing a safe space for open conversation. Participants were assured that their responses would remain confidential and not be shared with their adoptive parents, which helped build rapport and trust, key elements in anti-oppressive practice. This transparency and respect for the participants' autonomy is critical for ensuring that the research process does not perpetuate the oppressive dynamics the study seeks to explore. All participants agreed to audio recording; video recording was not chosen to preserve comfort and anonymity.

The interviews lasted between 47 and 68 minutes, depending on the depth of the discussion, and were digitally recorded for later transcription and analysis. In line with ethical practices, bias was managed by probing only when necessary to guide extreme deviations back to the topic, while allowing participants to share their stories. This reflects AOP's commitment to self-reflection on the part of the researchers, ensuring that their biases and assumptions do not influence the participants' narratives. Adolescents were compensated with transport money after the interviews to ensure participation without creating expectations of financial incentives, thereby minimising social desirability bias. This practice respects the dignity and agency of the participants, aligning

with AOP's emphasis on empowering service users rather than treating them as passive subjects in the research process.

Data analysis

The data were analysed using the interpretative phenomenological analysis (IPA) approach, which prioritises understanding how individuals make sense of their personal and social experiences (Pietkiewicz & Smith, 2014). IPA emphasises the double hermeneutic process, where researchers interpret participants' lived experiences to make sense of their realities (Nizza et al., 2021). This method was highly appropriate for exploring the complex and deeply personal experiences of adopted adolescents in Zimbabwe, as it allows for a nuanced analysis of how they understand and navigate the adoption process.

MAXQDA software was employed to assist in analysing transcribed data, providing a structured yet flexible coding and theme identification environment. While the researchers remained active data interpreters, software helped mitigate personal biases by standardising the coding process. This ensured that the analysis was both systematic and rigorous. The initial analysis phase involved open coding, identifying themes based on recurring patterns in the adolescents' narratives. Through this process, ten preliminary themes emerged: (1) Lack of voice in the adoption process; (2) Cultural and ancestry disconnect; (3) Desire for biological family connection; (4) Trauma and emotional distress; (5) Stigmatisation and social exclusion; (6) Lack of disclosure and openness; (7) Spiritual and identity crises; (8) Powerlessness and loss of autonomy; (9) Gratitude mixed with resentment; and (10) Inadequate support from social workers.

To ensure the robustness of the findings, researchers cross-checked the accuracy of verbatim quotes supporting each theme. While the software is important in data analysis, for IPA, Nizza et al. (2021) encourage researchers in data analysis to use two of four markers, such as the close analytical reading of participants' words, attending to convergence and divergence. Thus, all authors read the initial transcripts and discussed preliminary themes derived from MAXQDA. This allowed for the refinement of themes into superordinate categories, merging similar themes to enhance clarity and depth in the analysis. For example, "Lack of voice in the adoption process" and "Powerlessness and loss of autonomy" were combined into the broader theme; Lack of agency and voice in the adoption process. Similarly, themes related to cultural disconnect and identity crises were grouped under Cultural, Ancestry and Identity Disconnect. This process resulted in the final set of superordinate themes: (1) Lack of agency and voice in the adoption process; (2) Cultural, ancestry, and identity disconnect; (3) Emotional and psychological distress; (4) Lack of openness and transparency in the adoption process; and (5) Complex feelings toward adoptive parents. This iterative and reflexive approach ensured that the final themes were grounded in the participants' lived experiences, providing a rich, in-depth understanding of the impact of the adoption process on the wellbeing of adolescents in Zimbabwe.

To ensure the credibility and trustworthiness of the findings, data verification was employed through debriefing sessions with five social workers who had directly handled contested adoption

cases. These professionals provided valuable insights and feedback, helping to align the research findings with the realities of the adoption process from a practitioner's perspective. Additionally, 13 adolescents involved in the study participated in member-matching sessions, where the preliminary findings were shared with them to ensure that their experiences were accurately represented. This transparency and participant validation process helped confirm that the results genuinely reflected the adolescents' lived experiences.

Protection of human subjects

Given the sensitive nature of the study, extensive data-protection safeguards were implemented to ensure the confidentiality and safety of all participants. Ethical approval was granted by the National Association of Social Workers Zimbabwe Research Committee, with approval number NASWZ-075/2024. All data were fully anonymised to protect the adolescents' identities, and no personal names or identifiable information were used during the interviews. Participants were referred to only as s/he to further reduce the risk of identification. Despite authors acknowledging the importance of demographic data in IPA studies, specific age, gender, location and years in adoption were not included based on ethical recommendations from the Department of Social Development. No electronic records linking the collated data to personal information were retained, and all digital files were securely stored on password-protected computers. Consent and assent was obtained from both adoptive parents and adolescents, with verbal consent and assent reaffirmed at the start of each interview. Participants were reminded of their right to withdraw from study without consequences.

FINDINGS

In this section, findings are presented within the IPA framework, ensuring that the researchers immerse themselves in search of adolescents' meaning in their responses with regard to adoption. As indicated below, the researchers ensure that data presentation and interpretation align with the four markers suggested by Nizza et al. (2021) for achieving excellence in interpretive phenomenology analysis: (1) constructing a compelling, unfolding narrative; (2) developing a vigorous experiential and/or existential account; (3) close analytical reading of participants' words; and (4) attending to convergence and divergence.

Lack of agency and voice in the adoption process

Adopted adolescents expressed frustration at having no say in the adoption process, which was finalised when they were too young to consent or understand. They felt their voices were ignored entirely, even as they got older and could form opinions. The irreversible nature of adoption exacerbated their feelings of powerlessness, leaving them with no opportunity to challenge or change their situation. Many believed that the decision-making process favoured the interests of adoptive parents and social workers rather than taking into account their preferences and desires. The above observation is evident from the following existential account of one adolescent, who noted that:

> *I didn't even know I was adopted until I was older, and by then, it was too late. I had no choice in the matter, and now I must live with this for the rest of my life. I wish someone had asked me how I felt.*

This verbatim comment reflects the adolescent's profound sense of loss and disempowerment, which stems from the delayed revelation of their adoption status. The phrase "*too late*" highlights how adolescents feel trapped in a reality they could not engage with or influence. The use of "*no choice*" underscores the helplessness they experienced, as the decision was made for them without their input. The wish that "*someone had asked me how I felt*" reveals a longing for validation and emotional engagement. The above verbatim quote reflects a deep frustration with the lack of agency and the emotional burden of forced acceptance, which other adolescents shared. In showing how adoption resulted in feelings of being disconnected from adolescents' own life decisions, the following part of another adolescent's expression confirms the above observation:

> *No one ever told me what was happening. They just decided for me when I was too young to understand. Now, it feels like I'm stuck in a situation I didn't choose…*

Like other adolescents who expressed similar views, the above verbatim quote reveals the adolescent's experience of confusion and exclusion, where important life decisions were made without their awareness or understanding. The phrase "*No one ever told me*" indicates a complete absence of communication, which leads to a feeling of being disregarded. The word "*stuck*" powerfully conveys the sense of entrapment in an irreversible situation they had no control over. The adolescent's reflection that they "*didn't choose*" emphasises the absence of autonomy, deepening their sense of powerlessness.

Reflecting on adolescents' lived experiences showed that the experience of being adopted without their participation ultimately reflects the emotional consequence of being denied a role in critical decisions about their own lives. Such emotional impact can be phenomenologically conveyed through the expression by one adolescent:

> *It's hard to accept something so big when you don't have any say in it. I should have been part of the decision, but instead, I was just handed over like a package.*

This statement portrays the adolescent's struggle with the enormity of the adoption decision, which was made without their consent. For example, a close analytic reading of "It's *hard to accept*" reflects the emotional difficulty of coming to terms with an experience that feels imposed. The comparison to being "*handed over like a package*" conveys a sense of objectification, where the adolescent feels dehumanised as if they were a possession rather than a person with thoughts and feelings. Using "*should have been part of the decision*" highlights the adolescent's belief in their right to have been included in such a significant life event. Like feedback from other adolescents, the verbatim comment above underscores the adolescents' feelings of alienation and the

dehumanising nature of exclusion from decisions about their own lives. Reflecting on the importance of earlier clarity on their background, one adolescent expressed that:

> *If they had asked me what I wanted, things might have been different. I think kids*[1]*, even if they're small, should have someone explain what's happening to them. We should have a say, even if it's just asking how we feel about it. It would have made me feel more in control of my life.*

Here, the adolescent reflects on the missed opportunity for engagement, believing that being consulted could have altered their overall experience. Interpretively, the phrase "*maybe things would have been different*" suggests the adolescent feels that the lack of communication led to a negative outcome that could have been avoided. The statement *"kids, even if they're small, should have someone explain*" highlights the importance of respectful communication, regardless of the child's age, and underscores the need for transparency. The desire to "*feel more in control of my own life*" points to the deep emotional need for autonomy, even in early childhood. This verbatim comment reveals the adolescent's belief that inclusion and explanation would have given them a sense of agency, reducing feelings of helplessness and confusion.

Cultural, ancestry and identity disconnect

Close analytical reading of adolescents' existential accounts of adoption shows that they struggled with a deep sense of cultural and ancestral disconnection, feeling alienated from their adoptive families because of differences in language, traditions and spiritual beliefs. Many felt an urgent need to reconnect with their biological roots, expressing that their identity was incomplete without knowledge of their ancestry. Experiential accounts from adolescents show that disconnect often led to a crisis of belonging, as they felt caught between two cultures – one they were born into but knew little about, and another they were raised in but could not fully relate to. One adolescent gave the following recount:

> *I grew up in a family that doesn't even have the same language as my birth family. I don't know their customs, beliefs, or anything about my ancestors. It feels like I don't know who I am.*

This statement reveals the adolescent's deep sense of cultural alienation and identity confusion. The phrase "doesn't *even have the same language*" signifies a fundamental disconnect between the adoptive family and the adolescent's birth culture, amplifying the feeling of being cut off from their origins. The lack of knowledge about "*customs, beliefs, or ancestors"* further exacerbates this sense of dislocation, contributing to a fractured identity. Analytically reading the final expression, "*it feels like I don't know who I am*," illustrates the profound identity crisis caused by this cultural erasure, as the adolescent struggles to form a coherent sense of self without the cultural and

[1] The word “kid” is not used in Zimbabwe’s child protection system, despite adolescents using it.

ancestral ties that typically provide grounding. In a similar interpretation of their circumstances, one adolescent noted that:

> *I don't feel connected to the family that adopted me, and I don't feel connected to my real family either. It's like I'm stuck somewhere in the middle, not belonging to either side.*

This comment highlights an adolescent's experience of emotional liminality, feeling disconnected from both their adoptive and biological families. The phrase "*I don't feel connected*" underscores their emotional and relational distance from both groups, pointing to an internal struggle for belonging. The image of being "*stuck somewhere in the middle*" evokes a sense of entrapment in a no-man's land, a place of identity confusion where there is no clear allegiance or cultural home. The adolescent's statement reflects a broader experience of ambivalence and isolation, further deepening their feelings of not fitting into their adopted familial or cultural context.

Reading convergencies in responses, the findings capture the emotional toll on adolescents of living between two worlds, but not fully belonging to either. The account reflects the above observation:

> *I wish they had let me keep some connection to my real family or at least my culture. It would have been better if they tried to teach me about where I'm from. Even if I couldn't live with my birth parents, I could still learn about my roots. That would have helped me feel like I didn't lose everything.*

This statement reflects a longing for cultural continuity and identity preservation. The adolescent's wish to have kept "*some connection*" to their "*real family or at least [their] culture*" suggests a deep need for grounding in their cultural heritage, even if they could not be physically present with their birth family. The phrase "*it would have been better if they made an effort*" indicates a disappointment with the lack of engagement from the adoptive family and social workers in fostering this connection, suggesting that the adolescent feels deprived of an essential part of their identity. The reflection "*helped me feel like I didn't lose everything*" underscores the sense of profound loss the adolescent feels, not just of family but of cultural knowledge and roots. Overall, this verbatim comment reflects the adolescent's belief that even symbolic or educational links to their heritage could have mitigated their identity crisis. Interpreting existential and experiential accounts show that even adoptive parents did not do enough to manage the situation as indicated below:

> *I want to know more about where I come from. My adoptive family doesn't understand why it's important to me, but it's part of who I am. Without that, I feel incomplete.*

Here the adolescent expresses a strong desire for knowledge about their origins, reflecting a deep need for self-understanding. The phrase "*my adoptive family doesn't understand*" highlights a disconnect between the adolescent's personal need for cultural and familial knowledge, and the adoptive family's failure to recognise the significance of this desire. The statement "It's *part of who I am*" reveals that the adolescent views their cultural and familial roots as integral to their identity,

emphasising that this knowledge is not just a curiosity, but a foundational aspect of their sense of self. The feeling of being "*incomplete*" without this knowledge illustrates the emotional and existential void created by the absence of connection to their heritage. Overall, findings reflect the adolescent's yearning for self-completion through reconnection with their cultural origins and the frustration of not being understood by those closest to them.

Emotional and psychological distress

Further analysis of unfolding narrations shows that many adolescents reported experiencing long-term emotional and psychological distress, including feelings of trauma, isolation and stigma. They often felt alienated from their adoptive families, struggling with the realisation that they were different and sometimes treated as outsiders. Some adolescents also faced stigma from their communities, which saw them as "different" or "less than" because of their adoption status. These feelings of exclusion and emotional pain frequently led to long-term mental health struggles, including anxiety, depression and a sense of loss, as indicated in the account:

> *I don't feel like I belong anywhere. My adoptive family says they love me, but I can tell I'm not really one of them. It's a lonely feeling, and it's something I think about every day.*

This statement reflects the adolescent's internal struggle with feelings of exclusion and emotional disconnection despite receiving verbal affirmations of love from their adoptive family. An analytical reading of the phrase "*I'm not really one of them*" indicates a perceived gap between the adolescent's identity and the adoptive families, suggesting that the adolescent feels fundamentally different and not fully integrated into the family unit. Constructing meaning from the phrase "*lonely feeling*" emphasises the isolation they experience, and the fact that they think about it "*every day*" reveals the pervasive and ongoing nature of this emotional distress. Overall, this verbatim comment reflects some adolescents' sense of being an outsider within their own home, leading to deep emotional pain and an ongoing struggle for belonging. Reading and interpretating the following verbatim quote reflects the above concerns:

> *People in the community look at me like I'm not really part of the family. Even though I grew up here, I still feel like an outsider. It's hard to explain, but it hurts every time someone reminds me that I'm different.*

This verbatim comment highlights the adolescent's experience of external stigma and social exclusion from the broader community. The phrase "*people in the community look at me*" suggests that adolescents feel that they are constantly being scrutinised, reinforcing their sense of being outsiders. Despite having "*grown up here*," the adolescent feels disconnected, emphasising that time and proximity have not diminished the feeling of being different. The emotional pain is evident in "*it hurts every time someone reminds me*," showing how these repeated reminders of their difference continue to wound and reinforce their feelings of exclusion. This verbatim comment reflects the adolescent's struggle with societal stigma and the emotional toll of being continuously perceived as an outsider:

> *I've struggled with feeling depressed because I can't change anything about my situation. The adoption is permanent, and I feel trapped. No one understands how much it affects me.*

This statement reveals the adolescent's deep emotional turmoil and feelings of helplessness. The phrase "*I can't change anything*" reflects a sense of powerlessness, exacerbated by the irreversible nature of the adoption, which is described as "*permanent*." The feeling of being "*trapped*" conveys the adolescent's sense of being confined in their situation, unable to escape the emotional distress that the adoption has caused. The expression "*no one understands*" indicates a profound sense of isolation, where the adolescent feels that their emotional pain is invisible or minimised by others. The experiential narratives from the adolescents reflect their ongoing battle with depression and a lack of support or understanding from those around them, contributing to their sense of emotional entrapment.

Lack of openness and transparency in the adoption process

Adolescents expressed frustration with the lack of transparency surrounding their adoption, often finding out about their status through informal or accidental means. Many felt betrayed upon discovering their adoption from friends, rumours or documents rather than from their adoptive parents or social workers. This lack of openness created an atmosphere of secrecy, which compounded their feelings of confusion and anger. They also noted that social workers rarely followed up after their adoption, leaving them to navigate their complex emotions alone. The following account reflects this:

> *I didn't even know I was adopted until my friend told me. I was shocked. No one in my family ever talked about it, and I had to find out on my own. It made me feel like everything was a lie.*

This statement reveals the profound emotional impact of discovering the adoption status through an external source rather than from the adoptive family. The phrase "*I was shocked*" highlights the intensity of the adolescent's emotional response, which suggests the lack of transparency created a deep sense of betrayal. The fact that "*no one in my family ever talked about it*" conveys a painful silence and avoidance of a critical truth, leading to feelings of isolation within the family unit. Reading the final line, "*It made me feel like everything was a lie*," reflects the adolescent's shattered trust, indicating that the secrecy around adoption undermined their belief in the authenticity of their family relationships. As indicated in the following account, findings reflect the damaging effects of secrecy, and the emotional devastation caused when the truth is hidden from an adopted child.

> *They should have been honest with me from the start. If I had known earlier, I would have had time to process it and understand. I think social workers and parents need to tell kids the truth in a way they can handle and then check in with them. It would have made things less shocking and helped me trust them more.*

This statement reflects the adolescent's retrospective desire for openness and honesty in the adoption process. The phrase "*They should have been honest with me from the start*" captures the adolescent's belief in the importance of early transparency, suggesting that secrecy resulted in emotional harm. The reflection that "*I would have had time to process it*" reveals the adolescent's understanding that earlier disclosure would have allowed them to gradually make sense of their situation rather than being blindsided by the truth. The suggestion that "*social workers and parents need to tell kids the truth*" emphasises the adolescent's belief in age-appropriate communication and follow-up support to help the child adjust emotionally.

By immersion into the accounts of the adolescents, one can posit that the findings underscored the importance of early, honest communication and ongoing emotional support in fostering trust between the adopted child, their parents and social workers. This observation is reflected in the following account:

> *They kept everything hidden from me. I only found out when I needed a birth certificate for school, and then I realised my name wasn't the same as everyone else's. It was devastating to learn it that way.*

This verbatim comment highlights the adolescent's experience of discovering their adoption through an impersonal and administrative situation, which magnified their sense of betrayal. The phrase "*They kept everything hidden from me*" conveys the adolescent's feeling of being deliberately deceived, suggesting that the lack of transparency was not accidental but intentional. Discovering the adoption through "*a birth certificate for school*" reveals the cold and impersonal manner in which the truth emerged, stripping the revelation of any emotional context or support. The use of "*devastating*" reflects the emotional shock and trauma of learning such a critical fact in such a detached way. As confirmed by other responses, the above verbatim comment reflects the emotional harm caused by secrecy and the intensified sense of betrayal and pain when the truth is revealed in such an unexpected, impersonal manner. Failure by social workers to practice continuous service follow-up is reflected in the following account:

> *The social workers never came back to check on me or to explain what happened. It's like they just left me to figure everything out by myself, and I still don't know all the details of my adoption.*

This statement highlights the adolescent's sense of abandonment by the social workers, who played a critical role in their adoption process. The phrase "*never came back to check on me*" suggests a lack of follow-up and emotional support, indicating that the adolescent felt unsupported and possibly confused. The adolescent's need to "*figure everything out by myself*" conveys the overwhelming burden the adolescent felt in trying to make sense of their adoption without guidance, further deepening their sense of isolation. The fact that they "*still don't know all the details*" reflects the ongoing lack of transparency, suggesting that vital information about their

adoption has been withheld, leaving the adolescents in a state of uncertainty and emotional limbo. The adolescents' accounts show the emotional toll of inadequate post-adoption support and the enduring confusion and distress caused by incomplete information.

Complex feelings toward adoptive parents

Constructing meaning from the findings shows that some adolescents expressed a mixture of gratitude and resentment toward their adoptive parents. While many were thankful for the care and upbringing they received, they also felt that the adoption process itself was disempowering and left them feeling alienated. They struggled with conflicted emotions, feeling love and appreciation for their adoptive families, but also anger and sadness over the loss of their biological relationships. This emotional complexity often led to internal struggles regarding their identity and place within the adoptive family. As indicated in the following account, some adolescents had mixed feelings about the process:

> *I'm grateful for everything they've done for me, but it doesn't change the fact that I lost my real family. It's hard to explain because I love them, but I also feel like something's missing.*

This statement reflects the adolescent's convergent and divergent conflicting emotions toward their adoptive parents, where gratitude and love coexist with a deep sense of loss. The phrase "I'm *grateful for everything*" acknowledges the care and support provided by the adoptive parents, but the word "*but*" signals that this gratitude does not erase the emotional pain of losing their biological family. However, the difficulty in explaining these feelings, as expressed in "It's *hard to explain because I love them*," highlights the internal tension between love for the adoptive family and the unresolved grief over losing their biological family. The feeling that "*something*'s *missing*" suggests an incomplete sense of identity, as if the loss of their birth family creates an emotional void that their adoptive relationships cannot fill. Thus, the findings reflect the complex emotional landscape many adoptees have to navigate, balancing appreciation for their adoptive parents with an enduring sense of loss and incompleteness tied to their biological roots. The following expression conveys this ambivalence:

> *I know they tried their best, but they don't understand what I've lost. They think I should just be happy with what I have, but it's not that simple. I feel like I'm living in someone else's life.*

This statement reveals an awareness of their adoptive parents' efforts, but also points to a fundamental disconnect in understanding their emotional needs. Interpretating the phrase "*they tried their best*" indicates that they acknowledge the good intentions of the adoptive parents, but "*they don't understand what I've lost*" highlights a critical gap in empathy or comprehension of the magnitude of the adolescent's grief and loss. The expectation that the adoptee should "*just be happy with what I have*" indicates that the adoptive parents may be minimising or overlooking the adolescent's deeper emotional struggles, suggesting that their attempts to provide love and care do not fully address the complexities of the adoptee's experience. Expressing metaphorically "*living in someone else's life*" powerfully conveys a sense of displacement, as if the adolescent feels

disconnected from their own identity and is instead living a life that does not fully belong to them. Thus, the findings showed the emotional strain of feeling misunderstood, the internal conflict between gratitude, and a profound sense of dislocation. The following existential account conveys the above experience:

> *I appreciate my adoptive parents, but there's always a part of me that wonders what my life would have been like if I stayed with my real family. It's something that I can't stop thinking about.*

An analytical reading of the above statement captures the adolescent's ongoing internal conflict, where appreciation for their adoptive parents coexists with a persistent curiosity and longing for the life they might have had with their biological family. The phrase "*I appreciate my adoptive parents*" signals respect and gratitude for the adoptive family's care. However, the use of "*but*" introduces the unresolved tension of wondering "*what my life would have been like*." This continuous wondering, as indicated by "*I can't stop thinking about it*," reflects the adolescent's struggle to reconcile their two possible lives – the one they are living in and the one that was lost through adoption. Thus, the findings show that a constant return to an imagined alternative life suggests that the adolescents felt incomplete or unresolved, as though the lack of closure about their biological family keeps them emotionally tethered to an unknown past. Overall, this final theme of the findings shows the existence of ambivalence – the emotional complexity of adoption, where gratitude does not erase the longing for a different life and a response to the unanswered questions that come with it.

DISCUSSION

The study of adopted adolescents in Zimbabwe reveals several critical themes that resonate with, yet also diverge from, adoption experiences in other global contexts. These themes – lack of agency, cultural and identity disconnect, emotional and psychological distress, and complex feelings toward adoptive parents – are not unique to Zimbabwe but present in various forms across different cultural settings. Adopted adolescents in Zimbabwe expressed profound frustration over their lack of control in the adoption process, echoing similar concerns in studies from other countries. For instance, the research by Marcelli et al. (2020) on transracial adoptees highlighted that adolescents often feel alienated when they are not included in decisions about their adoption. This sense of powerlessness, exacerbated by the irreversible nature of adoption, is a recurring theme in adoption literature. In Zimbabwe, this is compounded by legal norms that prioritise biological ties and adoption is considered only after exploring other care alternatives (as mandated by the Zimbabwe National Orphan Care Policy of 1999). From an anti-oppressive practice (AOP) perspective, this lack of agency reflects a systemic issue where power imbalances place social workers and legal authorities in control, while children are left voiceless. AOP advocates for empowering service users – in this case, adopted adolescents – by including them as active participants in decisions that affect their lives. By applying AOP principles, Zimbabwe's adoption

process could shift toward a more child-centred approach that promotes partnerships between children, social workers and adoptive families, thus restoring a sense of agency to the adoptees.

Cultural disconnection emerged as a significant issue for Zimbabwean adolescents, mirroring findings from transracial and international adoption studies globally. Research in Norway and the United States indicates that adopted adolescents often struggle with identity development, particularly when raised in environments culturally different from their origins (Liodden & Leirvik, 2024; Helder et al., 2014). In Zimbabwe, this disconnection is not only racial, as seen in transracial adoptions, but also deeply tied to the erasure of language and ancestral knowledge. Adolescents in the study felt lost and incomplete without a connection to their birth culture, which parallels the struggles of adoptees in France and Norway, where assimilation into the adoptive family's culture often leads to a loss of ethnic identity (Escafré-Dublet & Hamidi, 2023). AOP highlights the need to recognise and challenge systemic oppression, such as the erasure of cultural identity in adoption practices. Zimbabwe's current adoption policies, which do not support post-adoption contact with birth families, perpetuate this form of oppression by severing the child's access to their cultural roots. AOP would advocate for more inclusive adoption practices that maintain the child's cultural and familial connections, thereby promoting cultural preservation alongside the child's integration into the adoptive family. For example, Zimbabwe can consider adoption as a specialised field rather than generic. Thus, drawing from the South African context, it is advocated that child adoption should remain a specialised field within social work. This ensures that rigorous screening and comprehensive training can be implemented. As part of this training, prospective adoptive parents are taught various methods of disclosing the adoption to the child, with an understanding that disclosure is an ongoing process that must be approached with sensitivity to the adoptee's stage of development.

Emotional and psychological distress are well-documented phenomena among adoptees worldwide, and the Zimbabwean adolescents' experiences align with this broader body of research. For example, studies in the USA and Northern Ireland show that adopted children are at higher risk for mental health issues, including depression and anxiety (McSherry et al., 2015). In Zimbabwe, the lack of post-adoption support exacerbates these emotional struggles. Adolescents expressed feelings of isolation and alienation, which were intensified by the secrecy surrounding their adoption. This finding contrasts with practices in countries like the USA and Portugal, where open adoptions and ongoing communication about birth families have been shown to mitigate some of these emotional challenges (Barbosa-Ducharne & Marinho, 2019). From an AOP perspective, the absence of emotional and psychological support further perpetuates oppressive practices by failing to address the ongoing needs of adoptees after the adoption process has been finalised. AOP encourages self-reflection among social workers to assess how their practices may contribute to the emotional distress of adoptees. Implementing regular post-adoption support services, including mental health counselling, would align with AOP's goal of empowering adoptees and ensuring that their emotional wellbeing is prioritised throughout their lives.

The ambivalence expressed by Zimbabwean adoptees toward their adoptive parents is a common theme in adoption literature. Adopted adolescents often feel gratitude for their adoptive families while simultaneously mourning the loss of their birth families. This emotional complexity is well documented in studies across different cultural contexts, such as the review by Whatson et al. (2024) of adoptees' search for birth families. However, what distinguishes the Zimbabwean experience is the added layer of cultural disconnection and the rigid legal framework that limits contact with birth families. In many Western contexts, adoptive parents are increasingly encouraged to facilitate connections with birth families to support the child's identity development (Grotevant, 2009; Muzingili & Muntanga, 2020). In contrast, the Zimbabwean approach, which prioritises maintaining secrecy and limiting post-adoption contact, leaves adoptees grappling with unresolved questions about their origins, deepening their sense of loss and dislocation. AOP stresses the importance of working in partnership with service users and their families to create more inclusive and transparent decision-making processes. In this context, AOP would advocate for a more open adoption model that allows adoptees to maintain contact with their birth families, thereby alleviating some of their emotional burden and supporting their identity formation.

IMPLICATIONS FOR PRACTICE

The findings from the study highlight critical gaps in Zimbabwe's adoption system, particularly regarding child rights, cultural sensitivity and the empowerment of all parties involved. Current adoption practices in Zimbabwe often marginalise the voices of adopted children, violating their right to be heard in matters affecting their lives, as outlined in the United Nations Convention on the Rights of the Child (CRC). This reflects an inherent power imbalance in the adoption process, where the authority of social workers and legal frameworks overshadows children's voices. From an AOP perspective, this power imbalance is a form of systemic oppression that needs to be addressed by promoting empowerment and partnerships between social workers, adoptive families and adoptees. Policies must prioritise transparency, inclusivity and equity to ensure adoption is an empowering and anti-oppressive practice. Open communication models (Macleod et al., 2021) can benefit the entire adoption triad – adopted children, adoptive parents and birth families – by fostering ongoing dialogue that respects the child's right to access information about their origins. AOP would advocate for such open communication models to be integrated into Zimbabwe's adoption framework, ensuring that children are empowered to participate in decisions about their lives.

A significant policy gap is the absence of frameworks integrating cultural sensitivity into the adoption process. Adoption in Zimbabwe is heavily influenced by Westernised child protection models, which often disregard the child's cultural heritage. Developing culturally responsive service care would promote preserving the child's cultural identity, language and community connections. This aligns with AOP's commitment to challenging oppressive structures that undermine adoptees' cultural and familial connections. AOP would encourage the development of policies that allow for post-adoption contact with birth families, ensuring that children can maintain links to their cultural heritage, which is essential for their identity and emotional

wellbeing. This would challenge the current oppressive structures in Zimbabwe's adoption system and promote more culturally responsive practices. However, challenging oppressive adoption is practical when biological parents or ancestral connection is established. If there is no biological connection (in the case of abandoned children), a programme should be in place to connect adolescents with community families willing to look after adolescents.

Social workers must be trained to approach adoption from a strength-based, family-centred perspective, ensuring that the voices of birth families, adoptive parents and children are heard and respected in decision-making processes. This aligns with AOP's emphasis on empowerment and working in partnership, reducing power imbalances and preventing the marginalisation of vulnerable parties, particularly the birth parents and the child. Regular service evaluation, through research and feedback mechanisms, is essential for adapting strategies to meet the evolving needs of adoptive families. By establishing post-adoption support services, including counselling and cultural education, Zimbabwe can move towards a model of adoption that is not only child-centred but also culturally rooted and respectful of the rights of all involved.

LIMITATIONS OF THE STUDY

The study's small sample size of 19 adopted adolescents limits the generalisability of the findings, as it may not represent the broader population of adoptees in Zimbabwe. Additionally, the research is prone to selection bias, as it primarily reflects the views of adolescents who may have experienced challenges with their adoption, while excluding those who did not contest their adoption. Including adoptees' perspectives who report more positive, or neutral adoption experiences could have enhanced the discussion by providing a more balanced understanding of adoption outcomes. However, it is also important to recognise that an absence of complaints does not necessarily equate to a successful adoption. Some adolescents may refrain from expressing dissatisfaction because of a fear of stigma or disloyalty to their adoptive families, meaning that their true experiences might remain unexplored. Furthermore, the absence of perspectives from adoptive parents and social workers restricts the scope of the study, offering only a partial understanding of the adoption experience. Including these stakeholders in future research would provide a more comprehensive view, capturing the complexities of adoption from multiple angles. Finally, the study's cross-sectional design limits insight into how adoption experiences evolve. Longitudinal studies would be valuable in future research to track adoptees' emotional, psychological and cultural development over time, offering a deeper understanding of both short-term and long-term adoption outcomes in Zimbabwe.

CONCLUSION

The study highlights significant challenges within the adoption system in Zimbabwe, exposing how current practices often marginalise the voices of adopted children and fail to integrate culturally sensitive approaches. These practices may perpetuate oppressive dynamics, as they deny children the right to participate in decisions that affect their lives and sever their connections to their cultural heritage. AOP provides a framework for addressing these issues by promoting

empowerment, partnerships and cultural preservation. The findings suggest that the adoption process, while intended to provide care and protection, can sometimes become an oppressive mechanism when children's rights to participation, identity construction and cultural continuity are overlooked. There is a clear need for policy reforms that promote transparency, inclusivity and empowerment to counter these issues. Despite the small sample size of this study, adoption should be reframed as an empowering process that respects the rights of all parties, particularly the child. Open communication models and culturally responsive practices must be integrated to ensure that adoption serves the best interests of the child, while honouring their background and identity. While the study provides critical insights, its limitations – such as the small sample size and lack of diverse perspectives – underscore the need for further research. Expanding the scope to include social workers, adoptive parents and larger, more diverse populations will provide a more comprehensive understanding of adoption in Zimbabwe, ensuring that future practices align with AOP's empowerment and partnership principles.

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