**WHANGAI / INFORMAL ADOPTION**

**Author:**
VIP Coordinator

**Scope:**
All Hauora Tairawhiti midwifery staff, including LMCs, nursing and medical staff, DHB social workers, Maori Health Services, Duty Managers and the Child Protection Coordinator

**Purpose:**
The purpose of this guideline is to ensure a smooth transition of baby from birth whanau to whangai whanau and provide a process to facilitate a resolution should any concerns arise during the hospital birth admission through to discharge. It will also provide a mechanism for identifying roles and responsibilities should clinical/non-clinical or cultural issues and concerns arise. Considerations and planning around possible outcomes prior to the baby’s birth will reduce unnecessary anxiety and confusion for all involved.

**Definitions:**
- CPC: Child Protection Coordinator
- CYF: Child, Youth and Family
- Hauora Maori: Maori Health Department
- LMC: Lead Maternity Carer
- LSICS: Lower Segment Caesarean Section
- MDT: Multi-Disciplinary Team
- NNU: Neo Natal Unit
- SW: Social Worker
- Whanau: Family group
- Whangai: Nourish, care in feeding the baby, transfer of kai from one to another.
- Whangai (to feed): Nourish, bring up (matua whangai – foster parents, tamaiti whangai – foster child)

**GUIDELINE:**
**Description**
Traditionally, Maori culture views a child not as the child of the birth parents alone but of the whole whanau and hapu. It is not uncommon for Maori children to live with other members of their whanau who are not their birth parents. Such children are known as whangai.

In Maori culture it is preferred that a child is brought up by other members of the whanau, rather than by strangers if the biological parents are not going to be the primary care givers. The new caregivers within the whanau are then considered to be supplementary parents rather than substitutes.

If Maori whangai a baby to Non-Maori this may also be regarded as whangai.
Whangai does not change who the legal parents of a child are.

(A belief of Maori is that “whangai” is a process that enhances, supports, and strengthens whakapapa).

Procedure

It is expected that the LMC is aware of the parents’ intention to whangai this baby and that this be recorded in the woman’s hospital maternity records.

NB: On occasions it is the wider whanau (e.g. grandparents) decision to Whangai baby out to other whanau, particularly in the case of young parents. This may not necessarily be the woman’s decision. Please be mindful of this situation as extra support may be required.

A copy of the Whangai/Informal Adoption Care Plan (Appendix 1) is to be completed and scanned into the woman’s maternity clinical information records and inserted into the woman’s maternity manilla folder prior to the baby’s birth.

If whanau arrangements appear to be unclear or it is difficult to identify that baby will be discharged to a safe situation and with a clearly identified long-term caregiver then the LMC is advised to make a referral to the Child Protection Coordinator or the Maternity Social Worker.

The Birth Registration Form must be filled out with the biological parent details and not those of the whangai parent.

Whangai / Informal Adoption Care Plan Template (Appendix 1)

The purpose of this care plan is to guide the LMC/midwife in their discussions with the woman/whanau who intend to whangai their baby to other whanau members as planning is required around this process. Considerations around possible outcomes prior to baby’s birth will reduce unnecessary anxiety and confusion for all involved. The discussions must take place in the antenatal period and a copy of the whangai care plan to be scanned into the woman’s maternity clinical information records and inserted into the woman’s maternity manilla folder prior to the baby’s birth.

In the event of the biological mother being too unwell to give informed consent and sign the Authorisation for Discharge Of My Baby To Whangai Parent Form (Appendix 2) arrangements are to be made with the Clinical Midwife Manager, or Duty Nurse Manager, after hours for a family member who may be the whangai parent to stay within the Post Natal Unit and care for the newborn if clinically appropriate.

Summary of Considerations (be aware that other situations may exist that are not addressed within the Whangai / Informal Adoption Care Plan)

- Who has made the decision to whangai?
- The role of the whangai parents in pregnancy, labour and birth.
- Who will provide what baby will need?
- Opportunity to provide colostrum/breast milk for baby.
- Who will take the placenta (whenua)?
- If unwell baby, mother or both (consent).
Role of the Hauora Maori Team

The Hauora Maori Team are available to provide support in the following situations:

- If a woman arrives to the Birthing Unit unbooked and support is required to co-ordinate the process of whangai within the facility.
- The biological mum changes her mind about whangai after baby is born, the Hauora Maori team will offer support to the whanau in finding resolution.
- If the extended whanau are involved in the whangai placement and a dispute arises
- Hauora Maori Team should be involved in the MDT process and dispute resolution and/or provide advice based on their Maori cultural assessment.
- Hauora Maori Team contacts: Kaiatawhai – Josephine McLean Ext 8167 and Pakeke Whanau Ora – Mark Kopua Ext 8876. Any escalation beyond their help should be directed to the General Manager - Peter Brown Ext 8030.

Points to Note

The LMC discussions and planning with the woman and her whanau in the antenatal period is fundamental in early identification and addressing of issues before they become more complex.

A Whangai placement does not change who the legal parents of a child are.

Referral to a Woman, Child and Family Social Worker may be considered in the antenatal period and again at admission for birth.

If the Whangai mum is expecting to stay in hospital until the baby is ready to be discharged the LMC must arrange this with the CMM prior to admission.

Care Plans are living documents and information must be updated when decisions and planned arrangements change.

This document is intended for use within the maternity facilities at Hauora Tairawhiti but may also be a useful tool in the homebirth setting.
Related Documentation

- Te Tiriti O Waitangi Policy Document
- Whangai / Informal Adoption Care Plan Template. (Appendix 1)
- Authorisation For bay to Be Discharged To Whangai Parent Form (Appendix 2)
- Hauora Tairawhiti Child Abuse and Neglect Policy 2016
- Midwives Handbook for Practice New Zealand College of Midwives 2016
- Midwifery Standards Review New Zealand College of Midwives 2016

References

- Section 88 Nurses Amendment Act 1986
- Children’s, Young Persons and their Families Act 1989

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APPENDIX 1

Whangai / Informal Adoption Care Plan Template
(To be used in the context of the Whangai - Informal Adoption Guideline)

Mothers sticker

The purpose of this care plan is to guide the LMC in their discussions with the woman/whanau who intend to whangai their baby to other whanau members. Considerations around possible outcomes prior to baby’s birth will reduce unnecessary anxiety and confusion for all involved. The discussions would take place in the antenatal period and a copy of this whangai care plan is to be scanned into the woman’s maternity clinical information records and inserted into the woman’s maternity manilla folder prior to the birth.

The following is a list of prompts for the biological woman’s consideration with you. It is not complete in its entirety and some situations will be uniquely different.

Identify who has made the decisions to whangai baby to other whanau.
(If it may be the maternal parents/partner’s decision and not the woman’s, reservations around the decision.)

Identify the role the whangai parents will play during pregnancy.
(Attendance at appointments, who will prepare/supply baby’s clothing/bassinette/car seat/formula/bottles/teats etc.)

Identify the whangai parent’s role during labour/birth.
(Who will be present, cord cutting, who will baby be passed to, baby to stay in room with biological whanau or mum not wanting to see baby so other arrangements will need to be made by the LMC).

Identify which whanau will take the placenta. Biological □ Whangai □
(To be discussed with the biological whanau)
Colostrum / breast milk availability for baby.
(Colostrum for baby, Lactation Consultant referral, support for this to occur if wished by the biological mother.)

Identify what will happen immediately after baby is born.
(Mum to see/hold, hand to whangai parent, baby kept in the room or taken to another room. What role will the biological parents have around this time?)

If the biological mother changes her mind or has reservations when baby is born how this might be managed.
(DHB Social Worker/Hauora Maori Department, CPC assistance to organise a whanau Hui)

Experience of the whangai mum with newborn babies
(Further support may be required, plans around the whangai mum being staying in the Post Natal Unit)

In the event of baby’s admission to NNU there are other considerations to be discussed with the woman.
(Legal consent for medical procedures must be given by a biological parent, their availability to the Paediatric Team including post discharge. There will also need to be involvement of the whangai parents)

Baby may be transferred to another hospital. Awareness of this possibility is important
(The issues identified for a NNU admission may involve a baby transfer situation, prematurity, unwell, biological parent availability for consent/communication. Who will go with the baby? A copy of this plan to go with baby’s notes)

In the event of the biological mother being unwell and a well baby there are also considerations to be posed with the woman.
(Arrangements around LSCS, transfer to another unit e.g. ICU. Baby discharged home to whangai parents)
Birth Registration Form.

To be completed by the Biological parent with their details (not whangai whanau details).

Discussed with the woman by the LMC Discussed □

Discharge details including current address and phone contact for whangai whanau are documented in the biological mothers and baby’s notes and on this care plan.

(The mother and baby files are separated following discharge)

Post Natal follow up for baby. Same LMC □ Different LMC □

(The LMC is responsible for arranging a new LMC for the baby and whangai whanau if required)

If different, name, address and contact details of baby’s new LMC

Authorisation For Baby To Be Discharged To Whangai Parent Form (Appendix 2) to be discussed and completed on discharge.

Signed (LMC) ........................................

Signed (Biological mother)............................. Date........................................
APPENDIX 2

Authorisation For Baby to Be Discharged To Whangai Parent Form

**Biological Mothers sticker**  
**Child’s sticker**

I am the birth mother of .................................................................

name of child (ren)

I authorise that when the above named child is ready for discharge from Hauora Tairawhiti:

I consent for my baby to be discharged into the care of :

.................................................................  .................................................................

(name)  
(address)  
(phone)

who will be the whangai parent of my baby.

Biological mother (sign).................................................................

LMC or other (sign).................................................................role.................................................................

Date .................................

Copy for mother  
Copy for mother’s file  
Copy for baby’s file  
Copy for whangai parent