

# Innovations in Adoption Support

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# Presented by Katy Burch

- Assistant Director at the [Institute of Public Care](#)
- Working in and passionate about children's social care / support for children and families for over 30 years:
  - Initially as a child care lawyer
  - 'Turned researcher' 20 years ago
- Lead evaluator for recent national studies including:
  - An [evaluation of the Adoption Support Framework for Wales](#) (2020-21)
  - [An evaluation of the Adoption Support Fund in England](#) (In stages, 2018-2022)

# What this lecture includes

- What are the current drivers for innovation in adoption (support) and their significance?
- A framework for (thinking about) adoption support – [National Adoption Service for Wales](#) innovations
- An exploration of recent innovations in:
  - Universal Support (for all adoptive families)
  - Targeted support (for emerging additional needs)
  - Specialist support (for specialist or complex needs)
- Concluding reflections

## It will draw on:

- The 2 major national studies I have led including a [review of support services \(including innovations\) funded by DfE in England during the initial Covid period](#)
- Other major studies in Wales and the rest of the UK e.g.
  - The [Adoption Cohort Study](#) (Wales)
  - The AUK [Adoption Barometer Studies](#) (UK & by nation)
  - Research currently being undertaken by [Strathclyde University](#) and [Glasgow University](#)
  - Recent evidence reviews e.g. [Tavistock](#) (2016) and Prof. [Julie Selwyn's](#) (2017) systematic reviews
  - The evaluation of [Regional Adoption Agencies](#) (England)

# Innovation



# History of Innovation in Adoption Support



# Why is innovation important in Adoption Support

- Address historical, persistent myths that ‘warm loving family is enough’
- ‘Adoption Cohort’ Study suggests approx. 1/2 adopted children have experienced at least 4 **ACEs (trauma)** before the adoption
- Early life **disrupted attachments** may have a negative impact on the quality of the child’s later relationships (in childhood and into adulthood)
- Recent studies suggest a high proportion of adopted children have been exposed to drugs/alcohol (misuse) in utero + some also have other **neurodevelopmental conditions** e.g. ASD/ADHD
- Overlapping causal factors for child difficulties make them much harder to identify and address
- Adopted children on average have significantly greater and more complex emotional health and wellbeing needs than children in the wider population (more akin to other care experienced children) and many also have a learning / educational support needs



## Why innovation is important cont.

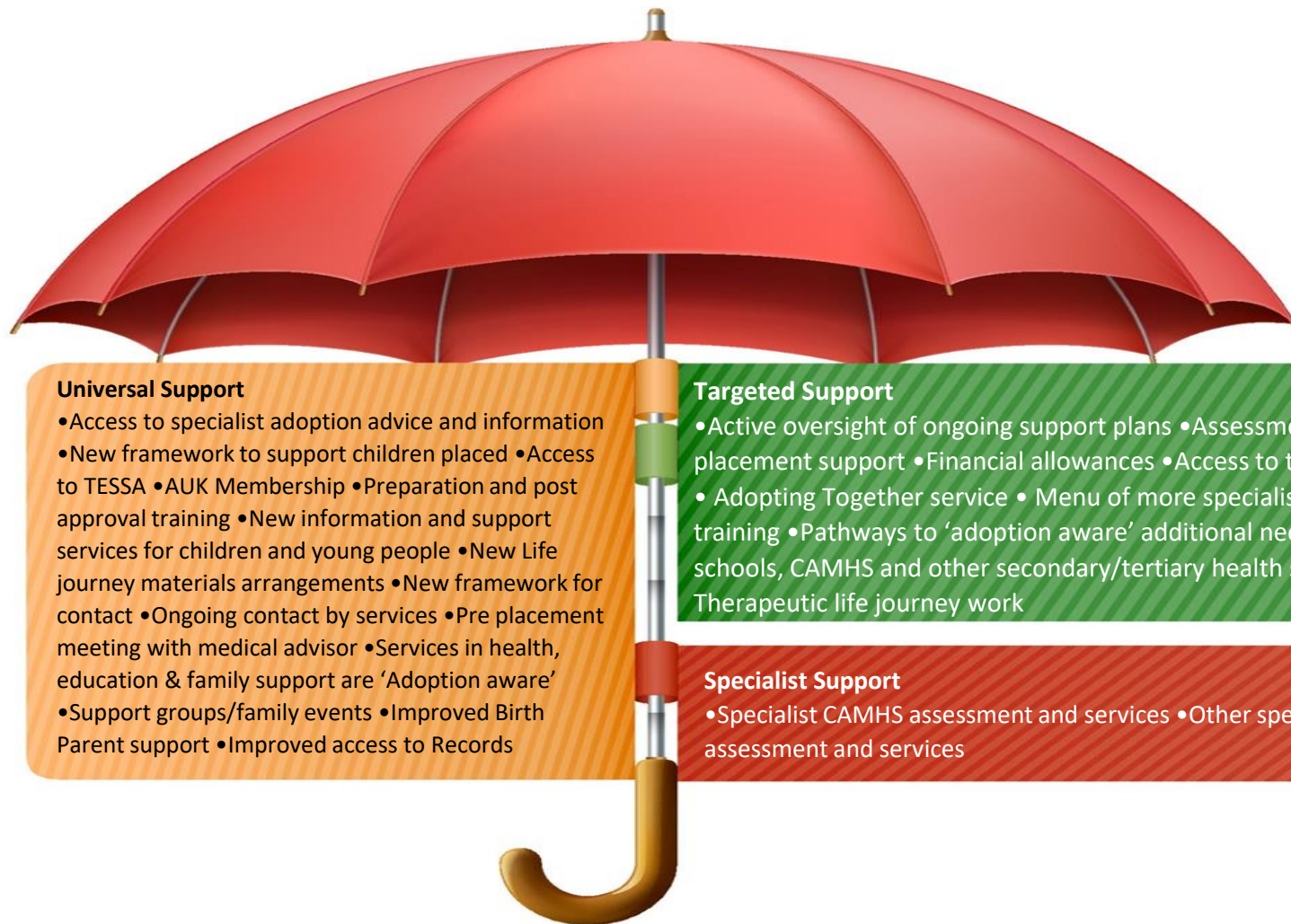
- Beyond a 'honeymoon period', transitions are often difficult times when 'issues' may arise or heighten (i.e. after an initial period of support)
- It is sometimes/increasingly difficult for children (and parents) to manage contact with birth families – particularly with the advances made in technology
- Caring for traumatised children can have traumatising effects on adoptive parents – severely challenged parenting resources + parent wellbeing can have a negative impact on children
- Covid has been experienced as very challenging for some adoptive families



# Recent drivers for innovation in adoption support

Driver	Recent examples
<b>‘Ground up’ innovation by people working in the Sector and adopters</b>	<ul style="list-style-type: none"><li>• Innovations in support for FASD (Cwm Taf)</li><li>• TESSA early targeted support (AUK - all UK)</li><li>• Multi-disciplinary support teams (range of agencies)</li><li>• Peer support for young adoptees (range of agencies)</li></ul>
<b>Funding (programmes)</b>	<ul style="list-style-type: none"><li>• Welsh Government funding for Adoption Support Framework implantation (Wales)</li><li>• Adoption Support Fund (England)</li></ul>
<b>National Policy</b>	<ul style="list-style-type: none"><li>• Re: structures (National Adoption Service for Wales); regionalisation (Wales and England)</li><li>• Re: focus (Adoption Support Framework Wales) and The Adoption Strategy: Achieving Excellence Everywhere (2021) England</li></ul>
<b>Research, evaluations and reviews</b>	<ul style="list-style-type: none"><li>• Pilot through large scale including RCT studies</li><li>• National studies</li><li>• AUK Adoption Barometer</li></ul>
<b>Events</b>	<ul style="list-style-type: none"><li>• E.g. COVID</li></ul>

# A framework for thinking about adoption support – the ASF (Wales)



## Universal Support

- Access to specialist adoption advice and information
- New framework to support children placed
- Access to TESSA
- AUK Membership
- Preparation and post approval training
- New information and support services for children and young people
- New Life journey materials arrangements
- New framework for contact
- Ongoing contact by services
- Pre placement meeting with medical advisor
- Services in health, education & family support are 'Adoption aware'
- Support groups/family events
- Improved Birth Parent support
- Improved access to Records

## Targeted Support

- Active oversight of ongoing support plans
- Assessment for new post placement support
- Financial allowances
- Access to therapeutic services
- Adopting Together service
- Menu of more specialist post approval training
- Pathways to 'adoption aware' additional needs support in schools, CAMHS and other secondary/tertiary health services
- Therapeutic life journey work

## Specialist Support

- Specialist CAMHS assessment and services
- Other specialist / therapeutic assessment and services

# Universal level support – for all adoptive families

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# Universal Level: More Traditional Supports

- **Good quality pre-adoption training and preparation**
- **Post-adoption social worker support** in the early weeks and months of an adoption
- **Peer support** (groups) - are evidence-based and (seem to continue to be) highly valued by adoptive parents – learning from / with someone in the same position, feeling supported, ‘sharing a laugh together’
- **(Therapeutic) life story work** – not much evidence about the impact + historically adopters have been critical about the quality of ‘life story books’ and work
- **Birth family contact** support.

# Universal support – What's new?

- Many more (new) adopters being **encouraged to & able to ask for help** + getting a welcoming response
- **More regular comms** with (regional) agencies including to outline 'the support offer' (particularly since Covid) and to provide podcasts and accessible information
- **A clear(er) 'front door'** for post adoption support i.e. the Regional Adoption Agencies (Wales and England)
- **'Advice lines'** and/or swift(er) response to queries
- **More online peer support groups** – during Covid perceived to be very helpful by many, also particularly for single / rural / parents & those with older children.



## Universal support – what's new (cont.)

- **'Buddy' schemes** (in own right or part of a broader offer)
- More **post-adoption training** including in particular in 'therapeutic parenting' – including ONLINE offers developed (more) during Covid
- **Improvements in life story work** – including more 'therapeutic work' relating to the child's life story – [research into the use\(fulness\) of objects in life story work + report](#)
- Greater emphasis on universal access to **'Memberships and Subscriptions'** e.g. of [AUK](#), [NATP](#)

\*Parents in Wales continued to value strongly (at end 2020 / early 2021) social worker support; peer support and post-adoption training. Covid has emphasised the importance of 'options' or 'a menu of support'

# Universal support – areas for further innovation?

- How best to **support all adopted children in nursery and school settings** - how can educational settings understand and respond better to children's needs as they emerge – this is the major area of difficulty for many children / families
- How to get the **message out about being open to support for parents of older children**
- **More evidence about the impact of innovations** e.g. online peer groups / training and therapeutic life story work to understand their potential impact



# Targeted support – when needs arise



# Targeted level – some more traditional supports

- Social work(er) advice
- Parent(ing) training programmes
- Play / creative therapies (including with both parent & child) and ‘Theraplay’ (for younger children)
- DDP – Very popular & a large scale trial being conducted now by [Glasgow University](#)
- [Sensory Integration \(Processing\) Therapy](#)
- Video feedback to promote positive parenting (VIPP) supported by the [Tavistock](#)

## Targeted support – what's new?

- Multi-disciplinary teams and assessment & 'consultations' with families leading to co-produced plans / 'drop ins'
- TESSA (being trialled across the UK) integrating clinician and peer support for families with early stage difficulties
- 'Adopting Together' (St Davids) similar model at an earliest stage for children who wait the longest for a forever home
- 'Brief interventions' and psychology/ist consultations (for parents and schools)
- Peer support networks for adopted young people including 'Connected'
- ONLINE e.g. therapy, expert webinars, workshops – with limits (particularly for younger children)!

# Targeted support – areas for further innovation?

- **Timely support of the right nature**
- **Sufficiently well tailored & coordinated supports for older children and young people** e.g. across education, CAMHS, housing & in transition to adulthood
- **Even better matching of therapeutic support to needs**
- **Enough focus on parents as the key agents of child wellbeing and recovery?** – to do so, they need to be sufficiently well-informed including to resist secondary trauma & sustain parenting warmth
- **More transparent access to a financial allowance,** where this will help / is needed

# Specialist(s) support inc. for complex needs



# Specialist level support – some more traditional supports

- Focused on the **parenting task** e.g. more / more specialist forms of parenting training programmes
- Focused on **dealing with violence** in the home - Non-Violent Resistance ([NVR](#))
- Focused on **whole family functioning** e.g. family therapy / Multi-Systemic Therapy ([MST](#))
- Focused on **attachment and developmental trauma** - Dyadic Developmental Psychotherapy ([DDP](#)) – still the most frequently commissioned specialist therapy?

# Specialist support – what's new?

- Therapies more specifically focused on child trauma:
  - Eye Movement Desensitisation & Reprocessing ([EMDR](#))
  - Trauma-Focused CBT ([TF-CBT](#))
- **Multi-disciplinary teams** including with strong(er) links and referral pathways with CAMHS
- **Assessment, diagnosis and support pathways for neuro-developmental difficulties** (FASD, ASD, ADHD)  
e.g.
  - [Cwm Taf assessment / diagnosis pathway for FASD](#)
  - [FASD Support Hub](#) (Scotland)



# Specialist support – areas for further innovation?

- **Speedier, consistent access to assessment / diagnosis for FASD (also ASD/ADHD)?**
- **Consistently good interface between (regional) adoption support agencies and CAMHS (with clear criteria and pathways for referral and/or joint work)**
- **The availability of and our understanding of ‘what works’ in terms of support for families where a child has a FASD diagnosis or very complex presentations?**

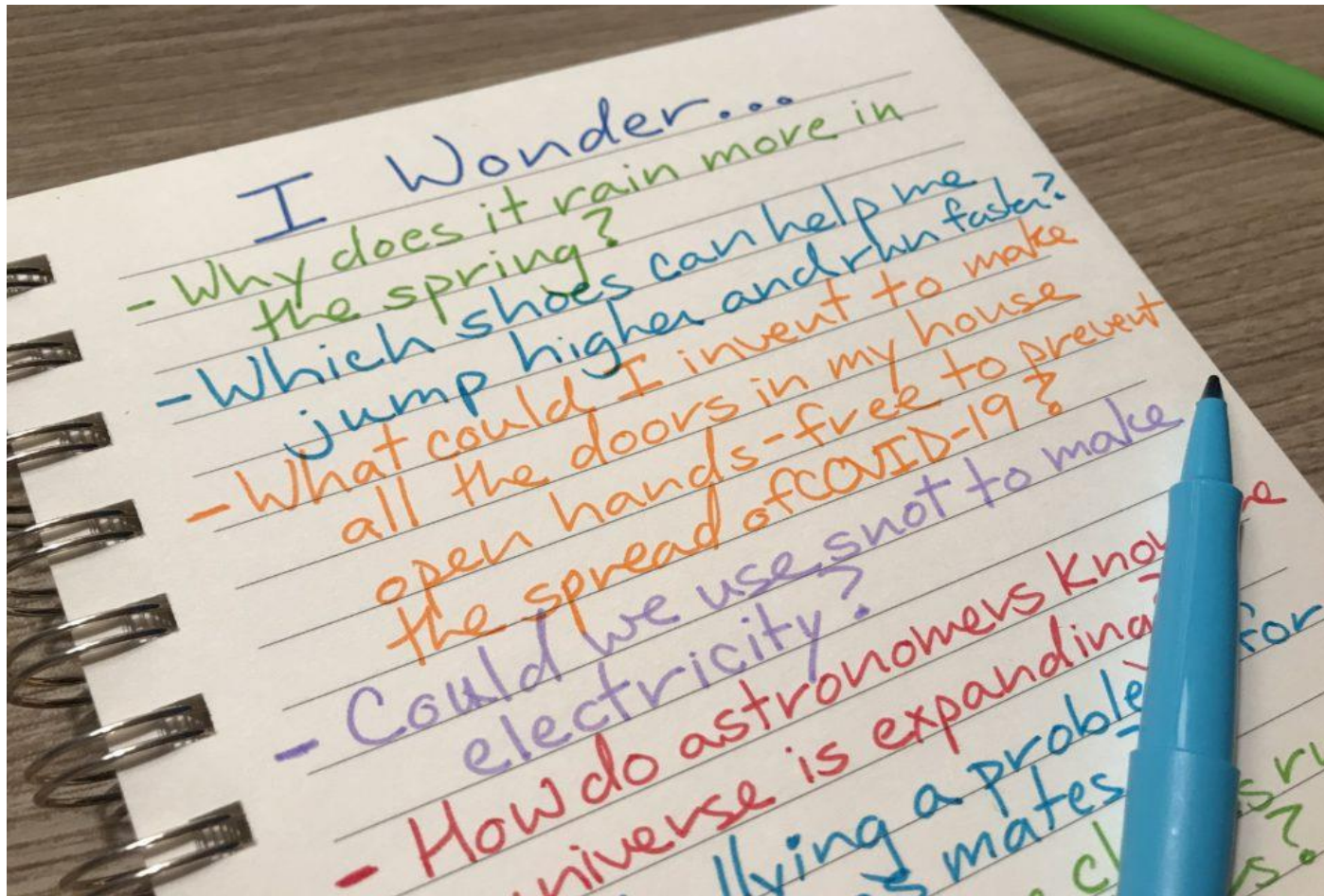
# The progress in the last 5 years



# Quotes from Adoptive Parents

- “They’ve always been sort of non-judgemental, just very helpful... understanding. I think that makes it easier to ask for help. They’re very open, very human. They’re very easy to talk to”
- “Felt huge shame and failure. Needed counselling to ask for support and accept that it takes a team to hold our child in placement”
- “We had a pre-adoption team for the child meeting, where their entire lives were unpicked by a psychologist, social workers, foster carers and doctors, to help us to understand how and why our children are affected by their early life experiences, and possible cues and solutions. It was such a helpful meeting, which produced a report, which we have no doubt we will be referring back to for years to come”
- The two-day course on therapeutic parenting organised by the region commissioned by the National Association of Therapeutic Parenting to deliver it. It was so good. We had covered it in the initial adoption training prior to having a child but it was great to do now we have a child.
- “It can be kind of very very difficult for schools to understand adopted young people and the trauma and kind of all that. You get phone calls telling you they’ve been really naughty. You’re kind of constantly .. defending them. Having somebody there who can come to meetings with you was really helpful”

# Final reflections



## I wonder...

- Can we find ways to provide a **clear, consistent offer** to all adopted children and families – albeit tailored to fit with local / regional characteristics? Including with **longer-term funding / investment (sustainable)**
- Can we **engage the broader education system** in thinking about the needs of children who have / may have experienced trauma / who are neuro-diverse / have had disrupted attachments (not only adopted children)?
- **Can we get better at identifying which children are likely to have support needs + provide these pro-actively?**

## I wonder..

- Could we **apply the accelerated learning** from this period of innovation in adoption support to other services / areas e.g. **for other care experienced children**?
- **Can we improve support for older children with more complex needs including possibly a ‘no wrong door’ approach to support?**
- **Could we organize our research efforts slightly better – to be less opportunistic and more systematic (in exploring what works, to what extent, in what circumstances etc.)?**



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