



Family Futures™

FAMILY FUTURES' Top 20 'Wishlist' for Adoption in the 21st Century

We were asked by the WAVE Trust to provide them with a list of twenty things we felt would be positive changes to policy and practice in the field of adoption. Our twenty points are based on our experience here at Family Futures, and cover key elements and key players within the complex field of adoption placements in the 21st century. We have ordered them not by way of priority, but in a way that reflects the process, acknowledging that there are many interdependencies amongst them.

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FAMILY FUTURES' Top 20 'Wishlist' **for Adoption in the 21st Century**

1. National campaigns to raise awareness of looked-after children's needs

State funded and professional media advertising campaigns designed to raise public awareness of the plight of looked-after children and their need for permanent adoptive families.

2. Earlier removal of children

Earlier removal of children from traumatising family environments would enhance their capacity to thrive in adoptive families.

3. Post-placement support/therapy for adopted children and their families

Every child who is adopted having access to post-placement support for their adoptive parents and therapeutic intervention to heal the scars of trauma.

4. Committed funding for therapeutic/educational input for each adoptive child/family

Adoption saves society a huge amount of money in comparison to a lifetime in the care system. Given that adoptive parents have full parental rights, it is appropriate that they are expected to pay for the day to day living expenses of their children. However, there is growing recognition that the majority of children placed for adoption will have or do have the need of additional educational and therapeutic input. I believe that this should be paid for out of a grant or a pot of money that goes with each child into the future which could be a proportion of the expense that that child would have been to the state had they remained in care (say, 25%). If the state facilitates adoption, this investment would represent a win-win situation for state, the child and their family. Currently we have a lose-lose situation; adoptive parents feel under-resourced in terms of service provision and the state continues to pay the high cost of children remaining in the public care system and beyond, in terms of involvement in the criminal justice and adult mental health systems.

5. Adoption leave equivalent to maternity leave for both parents

Adoption leave to be equal to maternity leave for both fathers and mothers as it is vital for children with a poor attachment history to spend time with their new adoptive parents in order to 'build the bonds of attachment'.

6. Prioritising early intervention in adoption, whilst supporting members of ethnic minorities to adopt

Adoption and fostering need to embrace the fact that Britain is the most multi-cultural country in the world. We need therefore to be more realistic about matching children ethnically, culturally and with respect to religion, bearing in mind that time is of the essence and early permanent placement should be the priority above all other considerations.

However, so this does not become a justification for some form of subtle institutional racism or social imperialism, financial and other incentives should be offered to members of ethnic minorities in order to facilitate them becoming adoptive parents or permanent carers of children from within their own communities. We need to do both: it is not either/or.

Easier access and more generous adoption allowances would enable potential adopters to have income supplements to enable them to take on the financial demands of parenting an adopted child.

7. Swifter and more inclusive assessment and selection of prospective adopters

Currently there are many more childless individuals and couples who would consider adoption as a route to parenthood than there are children needing adoption. However this imbalance is not reflected in the adoption system in terms of placement outcomes. I believe there are a number of reasons for this.

- i Poor public perception and understanding of adoption today
- ii Media and internet savvy potential applicants who are aware of the complexities of need that children have and the paucity of resources currently available to support them through the process
- iii The constraints of ethnic matching
- iv The lack of financial support for the poorer sections of the community who, if assisted, could become part of the resource pool of parents.

The selection process currently and routinely followed suffers from the following drawbacks:

- i Group information days and training sessions for prospective adopters delay and depersonalise the process
- ii As the complexity of needs of children in the care system appears to increase, so does professionals' and panels' anxiety levels when it comes to selection and matching. This leads to procrastination and indecision. BAAF Assessment reports typically contain volumes of information but no tools for analysing the information in order to develop a psychological profile of the potential parent. More SMART tools need to be used as part of a more concise, focussed and shorter selection process (eg Adult Attachment Interview/Attachment Style Interview).
- iii The Family Futures' 20:80 principle. We believe that 20% of an agency's resources should be front-loaded into the preparation and assessment programme of potential adoptive parents and 80% into post-placement support where parents 'learn on the job' how to be parents. Adoption agencies that do not adequately resource their post-placement support packages become too reliant on assessment leading to a tendency to look for 'ideal' candidates and matches which will be able to stand alone in the future. In our experience, this is unrealistic, and we need to move away from a model of adoptive parenthood that is recruiting parents knowing that in the future they will have to go it alone. This model is theoretically flawed and morally wrong.

Swifter and more inclusive assessments could be made possible if there was a guarantee of post-adoption support. Post-adoption support is not just about resolving post-placement difficulties. It is also about providing a safety net for any shortcomings and the inherent difficulties there are in predicting parenting capacity.

8. Use of special guardianship to be limited

The use of 'special guardianship' should be confined to the role it was originally intended, which was to be more the exception than the rule as a route to permanence

9. Short term foster carer role to be professionalised

Adoption is only as good as the short term foster care that the child has received. The status of foster carers should be raised to that of 'barefoot therapists' who are dignified with the role of primary agents of change for children.

In order to achieve this they need to be treated as colleagues, trained to a professional level, and supported through the emotional tsunami that will inevitably follow if they endeavour to truly engage psychologically and emotionally with the children in their care.

Without such engagement, the child's early traumas can become fossilised in their mind and in their bodies. This makes the prospective adoptive parents' 'job' far harder and longer as they endeavour to form a more secure attachment relationship with the child. Foster carers need the emotional and psychological support to go with the child, at the earliest opportunity, to the dark and dirty places that the child has just left, whilst the child's fears and memories remain vivid and plastic.

10. Extension and enhancement of social work training

Training for social workers in general to be on a par with that of psychologists in terms of duration, to ensure that for career grade social workers, they are equipped with the knowledge base and skills to carry out the highly complex task of assessing children and families.

11. Attachment theory and understanding of developmental trauma to underpin social work practice in adoption and fostering

Social work training needs to come out of the closet of political correctness, social policy and politics and focus on assessing and meeting the holistic needs of children, adults and the elderly in a way that is based on neurological, psychological, physiological and developmental research and theory. Attachment theory and the science of interpersonal relationships need to be at the heart of all areas of social work practice. For those social workers working in the field of adoption and fostering, there should be a specialist module on the effect of developmental trauma on child development and recovery.

12. Neuro-scientific evidence-base to inform decisions on children's welfare

Because of inadequate training and limited staff resources, children are remaining in neglectful and traumatising birth family environments for too long. The double-bind for social workers is that they are criticised for either being 'pathologically optimistic' (about a parent's capacity to improve their parenting style) or 'child-stealers', in the public view.

The resolution of this double-bind is for social workers to be fully conversant with the latest neuro-scientific research and theory and its implications for child development, so that their assessment and decision-making can be more evidence-based and robust during the child's early formative years. We need social workers to get out of the stocks of tabloid prejudice and into a more respected role of safeguarders of children's welfare.

13. Multi-disciplinary adoption services

Adoption services becoming multi-disciplinary as part of integrated health and children's service provision, and that the multi-disciplinary team takes case responsibility from the moment that adoption as a care-plan is agreed.

14. Birth family contact with looked after children to be re-defined as a responsibility

Contact pre permanent placement and post permanent placement should be seen more as a responsibility of the birth relative towards the child rather than as the exercising of a human right. Too often in the court domain, contacts between birth relatives and looked after children are seen as a negotiation, as a right, as continuity for the child.

We need to see contact in the light of what we know about the impact of trauma on childhood development and attachment behaviour. The questions regarding contact that need to be asked are

- i Can the birth parent behave responsibly and conduct contact in a way that is in the 'best interests of the child' as defined by the developmental and therapeutic needs of that child?
- ii Does the contact help the child to feel good about themselves, to absolve them of responsibility for what has happened in the past, and reassure them that it is OK to feel safe and form attachments to current carers?
- iii What is the purpose of the contact? Does the decision-making process about contact take on board the fact that the child will be having contact with someone who has caused them 'significant harm' whilst remaining a significant figure to them?
- iv What support and facilitation and reassurance will be offered to the child in order for them to feel safe, in order for them to make sense of what is happening, in order for them not to be re-traumatised?

15. Automatic joint or collective placement of siblings to be challenged

Conventional practice and our natural instincts are to endeavour to keep sibling groups together in permanent placement. Indeed this consideration is enshrined in children's legislation.

This presumption needs to be questioned for two reasons.

- i Firstly, is it possible for foster carers or adoptive parents to deliver the intensity and quality of developmental re-parenting that each individual child needs to recover from the 'significant harm' they have experienced in their birth family (and sometimes within the care system), when siblings with similar needs are placed together?
- ii Have sibling attachment relationships been so distorted and pathologised by living in an adverse domestic environment that their 'trauma bond' will only perpetuate past patterns in their new family, leaving foster carers and adopters managing the matrix rather than parenting the child?

We need to change custom and practice from a presumption that siblings should be kept together at all costs to prioritising the potential for children to form a secure attachment to adoptive parents which may require them to be parented as 'onlys' rather than siblings.

16. Longer placement transitions

Commonly, regardless of the age of the child, placement transitions are made over a two to three week period. For older children (4+) this time frame is too short. Children from the care system who have often lost their trust in adults to care for them and protect them approach a change of placement with fear and trepidation. They have 'internal working models' (personal schema) of parents which are based on a template of their biological parent(s)' parenting of them. We need therefore to revise our time-scales for introductions and make them age-appropriate and developmentally attuned. This may force us to change our expectations of foster carers and adopters during this complex and emotionally charged process. In recognition of this, higher levels of professional involvement both to support participants and to mentor them into the new and uncharted territory of adoptive parenthood will be necessary.

17. Health screening/Paediatric monitoring of all looked after children

For children who may have been conceived in a foetal environment contaminated by drugs, alcohol, cortisol (as a result of intense maternal stress) and are then born into a neglectful and traumatising environment, the developmental and ill health sequelae are short, medium and long-term. We would advocate more rigorous paediatric monitoring of all looked after children. This should continue for adopted children post-adoption, as some of the implications and manifestations of developmental trauma on the health of the child are sometimes subtle and problems that children grow into and not out of. Family Futures' paediatrician's research on the children screened through our service reflects this* (available on request).

18. Assessment of adopted children's need for 'catch up' educational provision

Every adopted child of school age should be assessed for appropriate supplementary and complementary educational provision. This will enable them to catch up developmentally and achieve their full potential in mainstream school.

19. Attachment theory and the damaging effects of developmental trauma on the capacity to learn to be integral to all teacher training programmes

It would be advantageous for all children at all ages and stages that their teachers had a good working knowledge of attachment theory, child development and the effect of relational trauma on the capacity to learn, delivered through their primary teacher training.

The child's capacity and potential to learn takes place in a social and emotional context which needs to be understood by teachers in a holistic way if we are genuinely to be 'inclusive' in our approach to education. Though this is of specific relevance to children in the care system or those who have been adopted, there are many children living in the community whose lives are on the threshold of state intervention whom such understanding would benefit.

20. Dedicated support for birth parents

Birth parents should have dedicated workers as part of the multi-disciplinary adoption team who continue to work with them to help them resolve their deep sense of loss, their own early personal traumas, and facilitate meaningful contact with their children who are adopted or in the care system.