



Family Futures



i-Adopt Adoption Service

Placing a child with Family Futures

helping
families
heal



A unique placement service

Family Futures was rated 'Outstanding' by Ofsted for the third time running in 2018, described as "a nationally recognised centre of excellence for therapeutic adoption and adoption support services... Children and their families receive holistic care of exceptional quality, which results in excellent experiences, outcomes and progress."

Our i-Adopt placement service was set up in 2008 to address the challenges of caring for older children with complex needs. We were seeing in our post-adoption service that these challenges were causing issues for adoptive families, many of whom were struggling to cope.

i-Adopt is an adoption service designed to provide prospective adopters with the understanding and resources to therapeutically parent children who have been exposed to early adversity and trauma.

"Prospective adopters receive outstanding support and guidance from dedicated workers throughout the adoption process"

"Given the complexity of the needs presented, the agency is a strong catalyst for achieving, enabling and promoting stability of placements."

Ofsted, 2018

The children placed through i-Adopt have experienced higher than typical adversity in their birth families and are likely to present with complex difficulties. We specialise in placing and supporting older children with complex needs*. With our multi-disciplinary and comprehensive assessment of prospective adopters and our intensive therapeutic input, the children we place experience significantly improved outcomes and progress.

*An audit of Family Futures' i-Adopt Service, 2011-2018 found that:

- 44% of the children we placed were 5-7 year-olds
- Children placed had an average of 6 ACEs (Adverse Childhood Experiences) and were therefore highly traumatised
- Over a third of the children placed were from an ethnic minority background.

We prepare adopters to become therapeutic parents

Developmental re-parenting helps children come to terms with their trauma and experience secure attachments. Prospective adopters will learn to support their child to develop a capacity to be co-regulated, then over time to self-regulate. Throughout their i-Adopt assessment process adopters learn about therapeutic parenting so they can implement these skills when they adopt.

Why place a child with Family Futures?

The assessment process

Throughout Stage 1 and 2 of the adoption assessment process, we use a range of therapeutic tools to assess prospective adopters. These enable us to gain comprehensive insight into attachment histories, current attachment styles, stress responses and triggers. The tools we use are experiential and incorporate creative arts and drama techniques as well as psychological profiling.

The information gathered throughout the assessment highlights the family's support needs, informs our matching process and informs the post adoption support therapy programme.

A multi-disciplinary approach

Our assessments involve an Occupational Therapist, Education Specialist, Social Worker and Therapist. We can offer consistency right the way through as the assessing therapist then becomes the child's therapist post-placement. We also regard prospective adopters as equal team members.

Our team consists of:

- Child and Adult Psychotherapists
- Social Workers
- Clinical Psychologists
- Specialist Teachers
- Paediatric Occupational Therapists
- Paediatrician
- Child Psychiatrist
- Clinical Psychologist specialising in neurodevelopmental assessment
- Therapeutic Home Support Worker
- Assistant Psychologists

Network meeting

We believe that helping the support network of prospective adopters to understand the child's needs will enhance the potential healing for the traumatised child and help avoid the emotional and physical exhaustion we have so often seen in adoptive parents.

We arrange a facilitated family and friends' network meeting so that each adoptive family can gain the optimum level of support particular to their needs. The key aims of the meeting are to raise awareness about adoption and to offer a dynamic intervention within the extended network that defines the group's role and each person's commitment to supporting the family or individual family member in a specific way.

Parenting Training

Prospective adopters take part in training which has been developed from our clinical experience of working with traumatised children. The training offers practical techniques for therapeutically re-parenting a child and an understanding of the effects of early trauma – how this impacts relationship attachments, the child's senses, performance in school and behaviour. The training aims to build the confidence of prospective adopters, boosting their parenting skills and resilience.



Making Placements Secure:

The matching process

Our child assessment

At no charge to the Local Authority (as the child assessment is paid for out of the inter-agency fee), our team would carry out a multi-disciplinary assessment of the child in their current foster placement. This will help us to understand the child better, help us to identify their needs and enable our adopters, therapy team and the placing agency to make an informed choice about a post-placement therapy package that is appropriate to the child.

The child assessment is a Neuro-Physiological Psychotherapy (NPP) assessment and considers the following factors:

- The degree of developmental trauma the child experienced and how this impacts them in their current family dynamics
- The child's sensory integration system
- The child's attachment strategies
- The child's current family relationships and contact arrangements
- The child's understanding of their story
- The child's cognitive and executive functioning
- The child's current functioning at school, where relevant
- The child's needs for further therapeutic intervention
- The child's need for further specialist assessment or CAMHS intervention
- The parents' / carers' functioning and support needs
- The sibling dynamics

Before the assessment day the following information is gathered:

- Pre-existing information about the child's/children's early history and any assessments or treatment interventions that have taken place
- A medical history
- Carer, teacher and self-report on a battery of psychological screening tools, including the Sensory Processing Measure; Behaviour Rating Inventory of Executive Functioning (BRIEF); Assessment Checklist for Children/Adolescents (ACC/ACA); Child Behaviour Checklist (CBCL) and Parent Stress Index.

Following this assessment, a comprehensive report is written, highlighting the support needs and proposing a post-adoption support therapeutic package.



Introductions

We pay special attention to getting introductions right, based around the needs of the child. During introductions, having done our assessment, the social worker and the child therapist from Family Futures would be in daily contact with our prospective adopters and make several visits to the foster home to help facilitate the introductions.

Introductions can be an emotional vortex for all parties. The purpose of these visits would give an opportunity to the foster carer, the child and the prospective adopters to vocalise feelings engendered by the transition process.

We believe it is better that these feelings are talked out rather than acted out. As the social worker and the therapist will be on hand during

the early days of placement with the prospective adopters, it also provides continuity for the child, the adopters and the foster carers.

There is no cost to the local authority for this as it is paid for out of the inter-agency fee.



Parents' views on the assessment process at Family Futures

from An Audit of Family Futures i-Adopt Service 2011-2019

Many of the adoptive parents described the assessment process as therapy for themselves. They shared that it provided them with the opportunity to explore memories from their childhoods and to learn more about themselves.

Parents described the Great Behaviour Breakdown training as a great resource in understanding challenging behaviour and the support provided in how to appropriately respond.

The psychoeducation provided was described as interesting and helpful. They felt that the information on trauma and attachment and the impact on child development and neurodevelopment prepared them to consider what it would be like to live with traumatised children.

Making Placements Secure:

A therapy package post placement

Family Futures' work is at the leading edge of adoption support. Our pioneering Neuro-Physiological Psychotherapy (NPP) assessment and treatment programme is unique in addressing holistically all aspects of a child's development which have been harmed by neglect or abuse suffered in their early years.

We have an integrated, multi-disciplinary team who work with the child and parents to support them throughout the adoption process. We are committed to innovation based on clinical evidence and research from the growing field of trauma, attachment and neuroscience.

An effective treatment programme designed for adopted children (NPP)

The model we use at Family Futures, Neuro-Physiological Psychotherapy (NPP), considers the impact of maltreatment on the child's developing somato-sensory systems, and on the developing attachment system and behavioural responses.

In this approach, the attachment system is seen as both a biological and social one, organised around achieving proximity to the caregiver (safety), and also a cognitive, emotional one that develops an inner working model or representation of others and how they will act towards them. Our research evidence mentioned above, shows this to be an effective treatment approach.

In 2016 two papers were published in *Clinical Child Psychology and Psychiatry* showing statistically validated and peer reviewed evidence that children who had participated in our NPP assessment and treatment programme showed significant improvement across the developmental spectrum.

This is the first evidence to show the effectiveness of a treatment programme that is designed for adopted children.



"It is something we will never forget and will always be grateful for...it was priceless...we had hands underneath us holding us."

L family

Stage one of the treatment process

The Family Futures model is based on the understanding of the tri-part brain and that in order to strengthen the child's attachment to their parent and to help the child form a more coherent narrative of their story we must first help calm their nervous system.

By working with the child's propensity to be triggered into fight/flight/freeze as a result of environmental triggers the first stage of the model works with these primitive brain responses by using, amongst others, techniques from Sensory Integration, Somatic Experience and Mindfulness. If appropriate we also encourage a developmental re-parenting approach. Play and the integration of Theraplay® techniques are also key at this stage to encourage social engagement and the child's

experience of feeling safe.

Due to the missed developmental stages the child has experienced, parents often have to go back in order to go forward with their child developmentally. Developmental re-parenting is a way of parenting that involves a parent thinking about the child's needs developmentally rather than just in relation to their chronological age.

The Family Futures' NPP therapy programme reflects the structure of the brain and its development in the following ways:

Area of the brain	Focus	Theme	Interventions
Primitive Brain	Trauma Responses Physiological Regulation Emotional Regulation	Fear and stress reduction Emotional and physiological awareness Co-regulation and attunement	Sleep, diet and toileting advice Medication Somatic and Sensorimotor work Mindfulness Sensory Integration Developmental re-parenting with 1:1 time at home
Limbic Brain	Attachment	Developing a more secure attachment Shame reduction Development of conscience and empathy	DDP and creative arts Theraplay Developmental re-parenting
Cortical Brain	Integration Identity	Developing a coherent narrative and reflective capacity	DDP with a life story focus Facilitated contact Individual Psychotherapy Identity and self-esteem work

Developmental re-parenting is so called, not because we can undo the neurological damage caused but to support the laying down of new neuronal pathways and responses to environmental triggers based on experience, and the formation of an alternative template for relationships based on safety and attuned, sensitive care. Our model of re-parenting helps parents provide the child with experiences that lay the foundation of emotional and physiological regulation.

Stage two of the treatment Process

As the child begins to feel safe and they develop a capacity for co-regulation by their parent and skills in self-regulation, the therapists and parents can engage in techniques that help build a more secure attachment and ways of relating for the child.

The techniques also increase the parent's attunement to the child and confidence in their own parenting. We use Theraplay®, the creative arts, including Drama Therapy and Dyadic Developmental Psychotherapy to increase the parent's understanding of the child's strengths, their intersubjective experience and to enable them to sensitively attune and respond to their child.

Stage three of the treatment Process

Therapeutic Life Story work occurs at an appropriate pace and degree throughout treatment (perhaps using puppetry or art or other techniques). As the child's capacity to seek support from a parent, self-regulate and talk about their feelings and thoughts increases, so too does their ability to remain in their thinking, cognitive brain when discussing early life experiences without being triggered into trauma responses.

Therefore, with the continued underpinning of a Dyadic Developmental Psychotherapy approach, narrative forms of therapeutic Life Story work are more accessible and the child is supported to process and integrate their early history into a more coherent narrative.

Strategies from earlier stages continue to be used as the noticing and modulation of sensation and arousal is required to facilitate this process.



Facilitated Contact

For the child, facilitated contact is beneficial as it enables meaningful contact with birth relatives and significant others, where their real concerns and feelings are addressed in a supported environment, rather than complex relationships and traumatic experiences re-enacted.

In the era of Facebook and Social media where making contact with birth relatives is relatively easy, it is more important than ever, that contact between children and their birth parents and siblings is managed and facilitated. In many instances it is far better to have a planned facilitated contact whilst adoptive and foster carers have some measure of influence over their child, rather than to wait for unplanned and psychologically hazardous contact when it is left to happen by itself.

Parent work and support

Throughout all three stages of treatment therapeutic parent support is essential. Parents are encouraged to consider their own history and experience of parenting and which of their child's behaviours and responses trigger them. They are encouraged to attend the Family Futures parenting programme to explore these triggers with other parents and to further develop their self-regulatory strategies.

The therapy team will continue to support parents with these strategies whilst also drawing on strategies from somatic experience and mindfulness techniques. Parents are also provided with psychoeducation throughout and supported to understand the origins of their child's trauma and fear based responses. In some cases parents may be encouraged to engage in individual or couples therapy.

Extended Network Support

Parenting traumatised children can often have a socially isolating effect. The NPP model offers training and network liaison to the parents' network of family and friends to encourage understanding and support within their immediate system.

Professional Network Liaison

If parents are to offer containment to children, then it is essential that the network supporting them is both cohesive and containing. Across the model, the team works to maintain good collaboration and communication throughout the professional network to ensure consistency and continuity in treatment. This will also involve liaising across health, social care and education bodies.



“4 years ago an incredible little girl joined our family. Her journey has been a long one; her history one of trauma and dreadful neglect, but her futures is bright due to the help of Family Futures”

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School Observation and consultation

Family Futures offer a stand-alone school observation that considers the child's functioning and support needs at school. A report is issued following the observation which can also be conducted alongside our full NPP assessment or a neuro-developmental assessment.

The impact of Developmental Trauma on a child's learning and peer relationships can cause problems in the classroom. The NPP approach is to work with schools to reduce a child's fear-based responses and promote good cognitive and executive functioning in the classroom.

Compliance and dissociative strategies can lead to children's needs not being picked up until the transition to secondary school where their strategies collapse in the face of multiple demands.

Defensive, aggressive behaviours often lead to exclusion. The treatment programme aims to improve relational difficulties and help the formation of positive peer relationships.

Post Placement Stand Alone Specialist Assessments

If additional assessments are needed, Family Futures also offer specialist assessments which can be:

- a Paediatric Occupational Therapy Sensory Integration Assessment
- a Neuro-developmental/ Cognitive Assessment
- a Psychiatric Assessment
- a Paediatric Assessment.

A report is issued following each specialist assessment.

Specialised Treatment Packages

In some cases, following an assessment a specialist, short-term treatment package may be recommended. These include:

- Theraplay® Treatment Package
- Dyadic Developmental Therapy Treatment Package
- Creative Arts Treatment Package
- Sensory Integration Treatment Package

Contact us to find out more about these.



Why do adopted children need a post placement therapy package?

Most children placed for adoption today have been removed from their birth families because of “significant harm”. The significant harm they have been exposed to causes significant harm to their subsequent development.

What does the research tell us?

Brown and Ward (2013) in their extensive review of literature on the impact of maltreatment on child development and outcomes, highlight the **long term developmental, social, emotional and attachment related difficulties linked to maltreatment.**

A consensus exists based on longitudinal studies of mental health outcomes for children adopted from public care, that **for maltreated children who are adopted there remains a risk of emotional and behavioural difficulties** (Rushton, 2004; Tarren Sweeney, 2010)

Research on **Adverse Childhood Experiences (ACEs)** highlights that these can impact long term outcomes across the life span, including: **health, social prospects, mental health difficulties, criminality and violence.** (Bellis, Hughes, Hardcastle, Ashton, Ford, Quigg & Davies 2017)

Results from the research carried out by Dejong, Hodges, & Malik (2016) suggested that whilst adoption is a protective factor for children who enter the care system, **it is clear that adoption by itself is not a sufficient intervention for early childhood adversity.**

Rushton (2007) reports that on the whole, studies show largely successful outcomes for

adoption from care but that **a significant proportion of adoptions disrupt**, with that percentage growing for late placed children.

Selwyn, Wijedsa and Meakings (2014) in their study into adoption disruption found that **a quarter of adoptive parents reported major hardship in caring for children with multiple and overlapping difficulties** and that this group of children presented with substantial levels of social, emotional and behavioural difficulties across the Strengths and Difficulties Questionnaire (Goodman, 2001)

Given the increased risk for mental health diagnosis, **a significant percentage of children adopted from care also exhibit continued difficulties in educational performance, and behavioural and emotional difficulties into adolescence and adulthood** (Brown, Waters & Shelton, 2017, Gore & Langton, 2017).

This impacts on family functioning and if untreated, has a financial burden on society (Conti, Morris, Melnychuk & Pizzo 2017); Knapp, Scott & Davies, 1999)

Often children adopted from care can meet criteria for the diagnosis of one or more mental health disorders, but **often they go undiagnosed and/or do not receive treatment for these** (DeJong, Hodges & Malik, 2016, Woolgar & Baldock, 2016).

A cost effective service

Investing in the child's future

Family Futures' innovative adoption support programme is based on evidence from medical research, scientific study and clinical experience. Investing in families' futures and keeping children safe in this way is proven to be effective.

Providing significant help in the early stages of a placement establishes it on a firmer footing and therefore minimises future crises and possible disruptions.

There is evidence from the DfE (hence the need for the Adoption Support Fund) that one third to two thirds of adoptive placements of older children with complex needs get into difficulties which can lead to the adoption breaking down.

Value for money

There is growing evidence that lone therapy providers contracted in to provide therapy services for adoptive families are not effective. This is because children who have experienced 'significant harm' require an integrated service which addresses all the aspects of their development affected: behavioural, sensory, emotional and cognitive.

Local Authorities who commission our services understandably ask us about our costs. These cover one-to-one support with a team of multi-disciplinary professionals around the family. This integrated, research-validated approach improves the child's outcomes significantly.

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Registered Company no: 08423617
Adoption Agency Registration: SC462984

As a regulated agency providing multi-disciplinary treatment programmes, we have costs which an unregulated provider does not have. These are essential to the running of an Ofsted registered 'outstanding' service. We are also inspected by an independent inspector on an annual basis.

Family Futures is a Community Interest Company which means we are not-for-profit. We have compared our prices with other service providers and our multidisciplinary service offers good value for money (for example, CAMHS Tier 3 and Tier 4 services are more expensive than ours).

Unregulated providers are required to operate under the umbrella of the Local Authority which is responsible for providing overarching insurance and clinical supervision for their practice, ensuring that they comply with regulatory procedures and legislation. This leaves the liability and risk with the Local Authority. This would also represent an

"Family Futures has always been a remarkable organisation to provide a wide range of specialised services for adoptive families and professionals throughout the UK. What is even more remarkable is that they keep getting better at what they do so well."

Dr Daniel A. Hughes, PhD



Family Futures



Consortium of Voluntary Adoption Agencies