

The ROUNDTABLE

National Resource Center for Adoption Volume 26 • Number 1 • 2013

Adoption Support and Preservation Services: The Sequel

By Susan Livingston Smith, LMSW

Permanency for children who cannot safely live in their original families is rooted in the belief that all children need a consistent, nurturing family to promote optimal development and emotional security, not only during childhood but throughout their lives. The Adoption and Safe Families Act of 1997 (ASFA) transformed this child welfare priority by establishing shorter time lines for reunification and requiring permanency plans for children within 12 months of entering care—plans which could no longer include long-term foster care. This represents the broadest and most aggressive policy of any nation to seek adoption for children who cannot safely grow up in their birth families. The impact of ASFA, coupled with financial incentives to the States to increase adoptions, has been a rapid and sustained increase in adoptions. In the 10 fiscal years preceding ASFA (1988-1997), approximately 211,000 children were adopted from care (Maza, 2008); in the most recent 10 years (FY2002-2011), 524,495 adoptions were reported—roughly two

and a half times as many (USDHHS, 2012).

The United States is one of only a few developed countries where drifting in impermanent out-of-home care is viewed as contrary to the best interest of children, and the government will terminate parental rights without parental consent to allow children to find permanency through adoption and guardianship. A comparative study of child welfare systems in 10 developed countries found that over the previous 10-15 years, the United States was the only country where the rate of children in out-of-home care did not increase, largely due to its emphasis on adoption (Gilbert, 2012).

A considerable body of research attests to the reality that adoption is better for children than institutions or long-term foster care. Specifically, adoption:

- offers greater stability.
- offers children optimal potential for resiliency, particularly if it begins when they are younger.
- offers the children's emotional security, sense of belonging and general wellbeing.
- offers children support to assist them in the transition to adulthood and a lifelong family.

An overview of this research and that on adoption support and preservation services is contained in a paper published by the Evan B. Donaldson Adoption Institute, "Keeping the Promise: The Critical Need for Post-Adoption Services to Enable Children and Families to Succeed" (Smith, 2010).



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In the past 15 years, approximately three quarters of a million children have been adopted from foster care in this country, and a little over one quarter of a million more have been adopted from abroad. Almost all of these children come from backgrounds that pose some risks for their ongoing development—factors such as, prenatal substance exposure, inadequate nurture, abuse, and impermanency. Children can be amazingly resilient, and they typically make progress in developmental milestones after adoption, but the legacy of deprivation, trauma and loss poses ongoing challenges for them and their families. Several decades ago, we envisioned adoption as a "happily ever after" ending for children who had come from difficult beginnings, and we believed that love would be enough to enable them to thrive. Years of experience in special needs adoptions, along with ongoing research on the impact of early deprivation and trauma on the brain and human development, have driven home the reality that legal permanence does not ensure well-being. Rather, it entails considerable healing work to address the consequences of their early years, and their families often require assistance to understand and address the challenges their children need to surmount in order to succeed.

The National Survey of Adoptive Parents, viewed as the first nationally representative study of adoptive families in the United States, puts the level of these challenges in a more concrete context. This study reported that while 10 percent of children in the general population received mental health services, the figures for adopted children included 46% of foster care adoptions, 35% of international adoptions, and 33% of private domestic adoptions (Vandivere, Malm, & Radel, 2009). It is important to recognize that the majority of adopted youth are functioning within the normal range, including those who came from adverse situations, and well over 90% of parents in every type of adoption are satisfied with their adoptions. However, a sizeable number of these families need support and specialized services after adoption to effectively address the needs of their children.

The layers of issues and dynamics present in complex, chronic adjustment difficulties are often not understood by adoptive parents or the professionals they contact. The type of help parents seek most is adoption-competent therapy, but research indicates that most mental health professionals lack relevant training. For example, a recent study conducted by the Center for Adoption Support and Education (2012) surveyed 485 individuals who were part of the adoption triad (87% adoptive parents) regarding

their experiences seeking help. Of those who had worked with mental health professionals (81%), slightly less than one-fourth believed the professionals were adoption competent. Many individuals reported seeing multiple therapists over the years who were not adoption competent, and some reported experiences with therapists that actually damaged their family.

This inability of adoptive families to find adoption-competent services led to the development of specialized post-adoption services beginning primarily in the late 1980s and 1990s. Many exemplary services have been developed, primarily through federally-funded-demonstration projects and initiatives supported by state child welfare systems. However, funding constraints have led some to be terminated, others to be scaled back, and yet others to be offered on very limited bases. These services include information and referral, education and training, support groups and mentoring, respite care, advocacy, crisis intervention, search/reunion services, and therapeutic counseling.

A continuum of ongoing adoption support and preservation services needs to be developed to bolster families adopting children from complicated beginnings and to enable them to succeed—services which include preventive and early-intervention services as well as clinical interventions for very challenging situations. Some are more formal and offered by professionals, while others may be informal and be provided under adoptive parent-sponsored programs or through the internet. Prospective adoptive parents need to be educated to understand that adoptive parenting can be different in significant ways from raising birth children, and that accessing informal or formal supports or services is a sign of strength and confidence—not one of parental inadequacy, as some parents believe.

Adoptive parents need special knowledge, skills, and support to address challenges as they arise, and while this process can begin in the preparation phase, much of it extends over the course of the child's development. Some strengths and abilities that are particularly important for parents are:

- understanding their adopted child in light of the child's history.
- understanding that loss, trauma, adoption and identity issues will resurface in different ways over the course of the child's development.

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Partnering with Others to Improve Adoption Outcomes

By John Johnson, MS

What do you get when you put "black belts," aircraft engineers, dedicated social workers, and community stakeholders in a room together? You get improved adoption outcomes.

If anyone asks you, how would you like to work with aeronautics manufacturing to improve your adoption process and services? The answer to the question should be an overwhelming, yes!

In late 2009, this was the question that was presented to our agency by Tennessee Congressman Jim Cooper and then CEO of Vought Aircraft industries, Elmer Doty. Senator Cooper and Mr. Doty were both members of the Congressional Coalition on Adoptions and had developed a relationship built on the importance of providing adoptive permanency. With Vought Aircraft having a manufacturing plant in Tennessee and several employees that were adoptive parents, it was a natural partnership. With the collaboration of our agency staff (Central Office, Regional/local office, and Legal Division), Vought employees contracted provider representatives, community stakeholders, and previously adoptive families who were able to assess how we might improve our timeliness to adoption and adoption support to families.

Since 2004, Tennessee Department of Children's Services (DCS) has been contracting with Harmony Adoptions of Tennessee Inc. to provide our adoption support and preservation services (ASAP). ASAP program is a collaboration between Tennessee's DCS, Harmony Adoptions of East Tennessee, Catholic Charities of Middle Tennessee, and AGAPE Child and Family of West Tennessee. The goal of the network is to help adopting families succeed by providing a continuum of pre- and post-adoption support services for children and families that promote permanency by helping adoptions succeed.

Most of ASAP's master's level clinicians work within their local communities and are able to provide support to families in rural and urban areas. This support can include making regularly scheduled visits to provide in-home counseling to children and parents to help strengthen and preserve the adoptive family in order to prevent dissolution of the adoption. Additional ASAP services include 24/7 crisis intervention, family support groups,

evidence-based interventions, relief team development, and community education provided by highly-trained adoption professionals.

Building on the success of these services, we were able to get our workgroup members to focus on how we might transfer our lessons learned and their personal experiences on continual quality improvement.

To lead our work, Vought Aircraft contributed the use of their Lean Six Sigma Black Belts to lead business process mapping, time/efficiency studies, and the application of their DMAIC process. The DMAIC problem solving flow is the cornerstone of Lean/Six sigma. It starts by clearly *Defining* a problem, then focuses on *Measuring* and *Analyzing* the process in order to solve the problem and *Improve* the process. Finally, it ensures the process is under *Control* before closing the project.

Over the next year, we met regularly to establish our Charter agreement, apply DMAIC, and create/implement our action steps. By using this process, we have now been able to lead the nation in timeliness to adoption (2009 and 2010 AFCARS reporting), implement a post-adoption survey for families to obtain feedback on their adoption experience, create a workgroup on providing support to any adoptive family that is at risk of adoption dissolution, implement a process for reviewing all children waiting for adoptive families, and create training on adoptive permanency for agency and provider front-line staff.

We are especially thankful to Congressman Cooper and Mr. Doty for their out-of-the-box approach and vision of how diverse groups might partner to improve the journey for adoptive children and families. Without their insight and partnership, our agency might have missed a wonderful opportunity.

As child welfare professionals, we need to continually challenge ourselves as to how we might engage and partner with others in the world to improve outcomes for children, even if we don't know martial arts or how to fly an airplane.

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Illinois Adoption Preservation Programs

By Christine Feldman, MAT, JD

Illinois has a long history of providing adoption support and preservation support. By 1991, Illinois had implemented a statewide system of clearly defined adoption support and preservation services, with the overall goal of strengthening and preserving families and reducing disruptions and out-of-home placements. These programs were developed to provide comprehensive, home-based, easily accessible, adoption-informed services to the whole family, and they continue to be the cornerstone of Illinois' adoption support and preservation services.

Beginning in the late 1990's, the rate of adoptions from foster care in Illinois greatly increased largely due to federal incentives. By 2010, the number of children in adoptive homes exceeded 40,000 while the number of children in foster care was close to 15,000; a substantial shift since there had been approximately 50,000 children in foster care in the mid 1990's. Over the years, the Illinois Adoption Preservation programs increased capacity to meet increased demands for assistance.

It should be noted that the Illinois Adoption Preservation programs serve not only families with children adopted from foster care but also children from domestic adoptions or adopted internationally, in addition to families with children in subsidized guardianships. Illinois continues to support this diverse adoption support and preservation population, not only because of federal legislation, but by the state law that created the Department of Children and Family Services which includes a mandate that family preservation services

be provided to families who have adopted a child.

The extensive network of Illinois' Adoption/Guardianship Preservation programs operates through contracts with seven private agencies with offices at 23 sites to offer statewide coverage. Moreover, the services are primarily home-based so that all families, rural and urban, have easy access. All of these programs provide front-line crisis intervention as well as comprehensive assessment, intensive clinical services, case management and advocacy, support groups, children's mental health advocacy services, and cash assistance

The key to preservation services is that they serve the whole family to keep the family together.

for special circumstances. Under a separate contract, each Adoption/ Guardianship Preservation Program offers respite services, which is described as temporary care of children to provide both them and their parents a break from the stresses of family life. Respite care can take many forms, including hourly care, summer camp, community outings, overnight care, mentoring, and family events.

Program participation by families is voluntary, and services are free. Families often self-refer and, recently, a toll free statewide Adoption Support Line has been established, staffed by master's level Adoption Preservation

clinicians, to respond to families' questions and requests for assistance so families can be conveniently linked to appropriate services in their area.

As Illinois' Adoption Preservation programs have grown and developed throughout the last two decades, the philosophy remains that adoptive families experience challenges that are substantially different from biological families and that effective services must be tailored to meet the variety of complex needs of these families. The negative experiences of children who have been adopted through the child welfare system; that is, maltreatment, prenatal substance exposure, disrupted attachments, grief and loss, to name a few, impact behavior and mental health and contribute to adoptive families' stress, complicating family life. Thus, the Adoption/Guardianship Preservation programs are staffed by experienced master's level clinicians, with specialized adoption-sensitive mental health services training. These clinicians can effectively provide children and parents with treatment modalities to address the behavioral and emotional problems of adopted children, as well as the subsequent impact on family stability and stress.

Case load size is kept small, ranging from 8 to 12 families per clinician to assure families receive close attention. Families can receive services up to one year, with an additional year, upon approved extension.

The work of the clinicians is centered on these goals: preventing disruption and providing the necessary level of support to stabilize the child within the family, increasing the

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Community Champions Network: Youth, Parents & Professionals

Partner to Advocate for Adoption Support & Preservation Services

By Kim Stevens, MEd



Since 2006, the North American Council on Adoptable Children (NACAC) has operated the Community Champions Network (CCN), a postadoption advocacy project funded by Jockey Being FamilyTM.

This community-based, grassroots, coalition-building project is grounded in the belief that youth and parents are the most reliable informants about what is needed to ensure stability and satisfaction in their adoptive family relationships and that in partnership with providers they can influence program, policy, funding, and system changes to create needed adoption support and preservation services.

In each of our 23 CCN sites, NACAC has identified a growing team of adoptive parents, professionals, youth, and community members to form and participate in an advocacy coalition. NACAC, with the top experts in the field, trains and supports these teams. Each coalition develops an action plan to guide local efforts to expand adoption support and preservation services and engages community

organizations, legislative leaders, administrators, courts, child welfare workers, private business leaders, funders, educators, service providers, and others in achieving their goals. An emphasis in real youth engagement is a priority. Success occurs when the coalitions are able to access funding, create effective partnerships and resource sharing, increase competency in foster and adoption in service delivery, and/or achieve policy and practice improvements.

CCN's initial launch was a twopart effort. First, we identified eight communities that were willing and able to identify a parent-professional leadership team and a need for improving and expanding adoption support and preservation services. The second essential piece was to go to the youth who ultimately would benefit from a more competent and supportive community to find out what they knew they needed. While adoption support and preservation service delivery has long been focused on needs identified by adult parents and providers, we felt strongly that the youth voice and inclusion would result in a greater understanding of the efficacy of certain services. In contrast to the notion that "if momma's not happy, no one is happy," we understood that it is ultimately the stability and well-being of the children that has the greatest impact on the family's sense of satisfaction and success.

The youth we have partnered with have truly helped to set a

course for CCN's work while also providing parents with more hope and understanding as they care for their own children. Among the insights youth have shared are the following:

- First and foremost, remember that we were powerless in our journey to adoption. Our history always includes loss and often is riddled with experiences of neglect, abuse and abandonment. Powerless people have an essential need to regain some sense of power—this is at the root of our most troubling behavior—running, cutting, substance abuse, promiscuity, eating, and eliminating disorders are all actions that we and we alone can control. Our body is all we "own." As we become more secure in knowing that our power won't be stripped again, we can settle into the process of recovery and healing. Power plays between parent and child are truly a no-win proposition.
- We have the right to own our story and our history. Please don't try to make things better by minimizing our hurt, painting a false "rosy" picture, or telling us you understand. We don't believe anyone can understand and do not trust you when you either tell us you do or try to convince us that things are not as we perceive them. Give us a place, the time, and the empathy to share our feelings and fears.

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- having realistic expectations for the child.
- knowing where and when to seek help.
- being able to empathize with child's feelings and perceive the child's strengths.
- taking care of themselves and managing their' own reactions in interactions with the child.
- mastering the art of therapeutic parenting.

These typically are not abilities that are intrinsic to parents but rather are acquired through training, support groups, and other types of services.

Parents need to be educated about the kinds of adoption support and preservation resources and services that would be most relevant to their needs. In other words, professionals must first translate the child's history to an explication of the needs the family is likely to encounter in parenting, and then translate those needs into information on adoption support and preservation. This process will flow into the post-adoption period as parents' receptivity and need for information evolves over time. Just as children's needs that are apparent at the time of adoptive placement may vary on a continuum from low to high, adoptive parents also may have issues for which they may need adoption support and preservation services. Examples may include ongoing struggles related to infertility or the need for greater parenting knowledge and skills to meet the challenges of a particular child.

The body of research on post-adoption services indicates that adolescence is the period of greatest need and the most common time that adoptive families seek help (Smith, 2010). The National Survey of Adoptive Parents cited earlier reports that 57 percent of teens adopted from foster care received mental health services. Adolescence is universally filled with a range of challenges—complex identity work, a heightened need for peer approval, puberty and hormonal shifts, deeper reflection on life events due to cognitive advances, and the push toward independence and separation from family. For children who have experienced profound loss and trauma there is often a resurgence of issues in early adolescence. For example, a study of youth served through an adoption preservation program found that post traumatic syndrome disorder (PTSD) symptoms were most prevalent among pre-teens (Smith, Howard, & Monroe, 2000). Depression is high among teens generally, but it is particularly high among youth adopted when older. A recent study found that teens adopted at age 4 or older had higher rates of depression than non-adopted youth or those adopted before age 4. Also 23 percent of

the later adopted youth reported suicidal thoughts during adolescence (Festinger & Jaccard, 2012).

Best practice in addressing the ongoing needs of adopted children and their families would include the following actions:

- Identify high-risk children before adoption and provide intensive early intervention and seamless supports. (Some high-risk indicators include difficulty in giving and receiving affection, a high level of oppositional behaviors, a history of serious abuse, and a family history of mental illness.)
- Provide adoption-competency training to child welfare and mental health professionals.
- Develop an information and referral system that is supportive of consumers.
- Make educational and supportive services available to all adoptive parents and youth.
- Provide intensive support to those with chronic and severe problems (respite, crisis call, etc.) and link them with adoption-competent therapeutic services at the earliest possible point.
- Develop specialized adoption preservation services for families experiencing difficulties that threaten adoption stability, including case coordination and advocacy as well as state of the art assessment and intervention.
- Develop a system for addressing the needs of families that "fall through the cracks" such as, a board to resolve disputes about which State agencies bear payment responsibility or how costly services such as residential treatment can be accessed.
- Develop private and public funding partnerships to maximize services and access to them for families
- Stop cutbacks in subsidies and adoption support and preservation services to maximize children's opportunities for adoption and families' ability to succeed.
- Facilitate research on post-adoption interventions in order to create an evidence base on services that are most effective.

Finally, through a number of laws, the federal government has aggressively supported adoptions from foster care, even providing financial incentives to States to increase their adoptions. Federal, state, and local governments and child-welfare related systems need to act just as forcefully to sustain these adoptive families. Only with partnerships at all systems' levels can we truly

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fulfill the three-fold mission of child welfare: promoting the safety, permanency, and well-being of children. Many adoption and child welfare organizations currently are striving to further adoption support and preservation services, including a coalition of organizations working with the Donaldson Adoption Institute and a National Task Force for Adoption Support and Preservation.¹

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The coalition includes the Adoption Institute, Child Welfare League of America, NACAC, Freddie Mac Foundation, the Dave Thomas Foundation for Adoption, the Congressional Coalition for Adoption Institute, Voice for Adoption and the Center for Adoption Support and Education, and others participate on the National Task Force. To keep abreast of these activities, you can sign up for the Post Adoption Resource Network by e-mailing info@adoptioninstitute.org.

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family's level of functioning, and increasing the use of community-based services. To meet these goals, clinicians work with parents on appropriate and effective parenting techniques; help parents to feel better about their ability to parent their children; help parents connect current behavior to their child's past history and losses; and, most importantly, give parents the confidence and skills to help their child. The key to preservation services is that they serve the whole family to keep the family together. The clinicians accomplish this work, not only in therapy sessions with children and parents, but by convening support groups for parents to learn from each other and by assisting parents at schools, hospitals, police stations, or other places where support is needed.

Many therapists have been serving in the Adoption Preservation programs for well over a decade. As stated by one Adoption Preservation therapist, who has worked with families in this program for 15 years, "We provide a service like no other. We assist the whole child and the whole family. We wrap them in services and are able to advocate for children in a variety of ways and in a variety

of areas. We meet our families and children where they are figuratively and realistically. I stay because I see we are making a difference. We are able to offer a service that is not offered anywhere else."

The Illinois Adoption/Guardianship Preservation programs have been highly effective. Each agency consistently is at client capacity. Parent feedback indicates that the support groups, therapeutic interventions, and information sharing have been invaluable. Evaluations concluded by The Center for Adoption Studies at Illinois State University have documented the impact of the program in improving parent/child relationships and preventing disruptions. In terms of systemic effectiveness, the legal dissolution rate for children participating in these programs is very low.

Illinois' long commitment to helping families succeed has been successful.

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- We need to have the regular kids' experiences that traditionally raised children take for granted. Let us play sports, join clubs, sing, act, play—and not at a delayed time when it is decided that we are "stable" enough to do so. These experiences will help us to find our stability and develop the tools we need to succeed in the community.
- Do not try to "fix" our behavior with too many medications and too much therapy. And please don't think everything we do is because of our labels and diagnoses. Sometimes we are just being kids. What we want most in the world is to feel normal.
- Assist us in using the arts as an outlet—poetry, cartooning, music, painting and drawing, journaling, acting. These allow us to release emotions and work things out while maintaining the safety and the positive reinforcement of telling the story as an artist, rather than a first-person narrative.
- Provide opportunities for us to be with others who have been in foster care and who have been adopted. Peer groups, mentor programs, and youth advocacy groups can all work well, as long as adoption and foster care are not the only focus. Youth want to be with others who understand them, but do NOT want to spend all their time talking about issues. At the same time, when we do want to speak to the issues and inform system improvement, we can find purpose and healing in the process.
- Let us use counseling when we need it. We'd prefer to come

- to a clinician for occasional "tune-ups," rather than go every week. Anticipate that at different life stages and developmental surges, counseling may become important to us again (puberty, first love, graduation, moves, parenting, etc.).
- Extend family group conferencing past the permanent placement as a way to resolve issues between us and our parents and between us and our siblings. In adoptive and foster families, it is often easy for one child to be identified as the problem child.
- Offer ongoing parenting classes both before and after the permanent placement. These classes should cover both issues around trauma and loss and normative development. Often our parents are unsure whether an issue is about adoption or just about growing up, but it is frequently about both.
- If one of us is placed in out-of-home care (residential treatment, psychiatric hospitalization, therapeutic foster care, etc.), advocate for us and our siblings to still be seen as family. This can be a very stressful time for the children still at home, often resurfacing loss and transition issues. For the child in treatment, it is crucial that they do not re-experience abandonment as a result of separation from family.
- Follow our lead on openness, search, and reunion. While we understand and acknowledge the importance of birth family ties and connectedness, it is never wise to force or surprise youth with unknown persons.

- And just as important, if we need or want to reconnect, help us find ways to do so that are safe and supportive. In cases where there are safety concerns, a parent or adoption support and preservation service provider could act as liaison between us and our birth family.
- There must be components that address our cultural needs. For those of us in multiracial families, adult role models and peer connections are essential. Parents have to embrace and celebrate the fact that they are now a multicultural family.

In the last two years of the CCN project, we have expanded to include the launch of youth network and youth speak-out teams in both the United States and Canada. Our teen and twenty-something youth are partnering with us to raise awareness, educate, and drive system change. In the process, they are often also reporting an improved sense of wellbeing and purpose.

As fundamental to the work of CCN as youth are adoptive parents themselves. Parents are both the agents of change in the advocacy work but also the key to designing and delivering adoption support and preservation support. NACAC was founded on the principles that peer support is an essential component of adoption-competent service, that parents are the primary agents of healing for their children, and that we can create a society where every child can grow up in a permanent, loving, culturally-competent family that has the support it needs.

The CCN program asks parents what we need to change in order to achieve these goals. Parents often (continued on next page)

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feel that they are not listened to, that the issues they are challenged with are minimized or misunderstood, that the greater community has little or no understanding of adoption, and that they cannot find competent help to address their children's needs in a timely way. They, like the youth, report that one of the greatest sources of relief and support is among their peers. Other, experienced adoptive parents who are traveling on the same journey can offer a level of understanding, insight, advice, and hope that is often not available within even the most prestigious provider organization.

Parents have shared the following when asked what is necessary to improve adoption support and preservation support for themselves and their children:

- "In depth training on attachment and mental health symptoms and treatment should be stressed for all adoption and child welfare professionals."
- "Take the stigma out of asking for help."
- "The benefits of being with other families who share common experiences helps to normalize the issues we face on a daily basis."
- "We must have open and honest communication with providers and full disclosure on the children's needs and histories prior to placement."
- "Affordable, accessible information and resources on a timely basis is a must. Don't make our children and families wait until it is a crisis to respond."
- "The county/state (and provincial) social services agencies should be required to have post-adoption

support services that include casemanagement, crisis intervention, support services, and training for parents adopting children with special needs."

Recent surveys and papers report that parent support groups are rated at or near the top of the most helpful post-permanency services. In fact, the Evan B. Donaldson Institute's research paper on adoption support and preservation supports, "Keeping the Promise: The Critical Need for Post-Adoption Services to Enable Children and Families to Succeed,⁵" cites the following:

Using support groups and other informal support services is associated with greater parenting satisfaction (Reilly & Platz, 2003; Gibbs, Barth, & Houts, 2005). Support groups can be a powerful source of information, social support and validation for adoptive parents and adopted children, who often are not connected to other adoptive families. Being able to express frustrations, joys, and feelings that have gone unexpressed or unheard with others coming from similar situations can be very healing and normalize perceptions of their situation. An adoptive parent whom the author interviewed for a program evaluation expressed it in these words:

After being (in the group) the very first time, I went home crying, realizing it wasn't all my fault. The people here told us why they were here, and I was hearing the same kind of stories from most of them. It helped me accept that (my son's) anger, even though it's directed at me, is not because of anything I've done but because of the incredible pain he has because of things that happened to him as a very young child (Smith & Howard, 1999, p. 219).

As a core component of our CCN project, we ask parents to identify the top four priority advocacy issues for NACAC to address moving forward. The following results were not surprising:

- 1. adoption competency training (for parents and professionals)
- 2. training and education for parents
- 3. schools/educational advocacy and support
- 4. support groups and peer-to-peer support for parents and youth

We have realized many successes in the first six years of the CCN program. The number of coalitions throughout the United States and Canada has grown from 8 to 23. These coalitions have banded together to advocate for increased investment in post-adoption support in their communities and have raised awareness of these needs of all members of the adoptive family. A number of CCN communities have achieved concrete successes. They

- Ontario now provides adoption subsidies for select populations and made adoption a possibility for a large category of older children and youth.
- New Brunswick has launched a peer-to-peer support program.
- Post-adoption program funding is awarded annually to our Missouri parent-led partners.
- A parent-led statewide advocacy network is growing in Texas.
- Sacramento has maintained a going parent-professional CCN Steering Committee that hosts a web-based, one-stop adoption resource and information site.

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Adopton Support and Preservation Services Tip Sheet

By Janice King, LMSW

B ased on the competencies identified in the Adoption Competency Curriculum, the following check list and coaching tips were developed to help guide discussions regarding the realities of adoption and are intended to support the work of practitioners.

Practitioner Check List	Coaching Tips for Supervisors
✓ Provide, during family preparation and assessment, information regarding adoption support and preservation services available within the state, as well as who provides the services.	Provide to staff a current resource list of available services across the state. Ensure staff is familiar with service providers and their specialties.
 Engage families in developing an individualized plan for family support. 	Ensure staff is helping families to develop empowerment skills and the ability to network with community based resources that offer support to families—area churches, schools, and community centers.
✓ Ensure families understand the funding sources and resources for all possible services for their families.	Provide to staff a package of resources and funding sources for adoption support and preservation services. Review the list of funding sources and resources with staff frequently.
✓ Discuss and describe the adoption support and preservation services families and children request most often. Help parents understand the ongoing needs of children/youth who have experienced trauma.	Track the type and frequency of services provided by contracted providers/or those delivered by state agencies. Have some knowledge of national statistics about service delivery from research/literature. Search for evidenced informed services to share with staff.
 Help families understand adoption developmental stages and survival behaviors and their effects on adoption preservation. 	Ensure staff provides families with information about services and needed training necessary to fully support them during the adoption process and after adoption.
✓ Help families understand and view crisis as a normal, predictable part of the adoption process.	Ensure staff assists families in connecting with parent support groups. Provide information regarding local support groups where there are no or minimal support groups, provide information regarding creating adoption support groups.
✓ Provide families with information and tools to help them during a crisis. Explain the importance of having a contingency plan to support stabilization of the family during the time of crisis	Ensure staff has referral and resource packages available for families before the adoption that contain contact information; develop mentoring families and assign during the preparation and assessment phase.
✓ Support families as they adjust to adoption. Encourage families to take the time to discuss adoption disruption and dissolution and their impacts on children/youth, parents and other family members.	Assist staff in developing solution focused strategies that empower the family to seek support early, utilize peer support, educational groups, and specialized clinical support.

(continued on next page)

Practice Protocols (continued from page 10)

The following websites provide additional information on adoption support and preservation services:

- Adoption Support and Preservation Services: A Continuing Public Interest. National Resource Center for Adoption. http://www.nrcadoption.org/resources/ practice-tools
- Finding and Using Postadoption Services. Child Welfare Information Gateway. https://www.childwelfare.gov/pubs/f postadoption.cfm
- Parenting After Adoption. Child Welfare Information Gateway. https://www.childwelfare.gov/adoption/ adopt_parenting

- Post-Adoption Services: Meeting the Mental Health Needs of Children Adopted from Foster Care. North American Council on Adoptable Children. http:// www.nacac.org/adoptalk/postadoptpaper.pdf
- The California Evidenced-Based Clearinghouse for Child Welfare. http://www.cebc4cw.org/search/topicareas

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Community Champions (continued from page 9)

 Training on adoption competence has been provided to thousands of providers, parents, community members, and youth at various sites.

Most important, parents, youth, legislators, child welfare staff, community providers, and others across all CCN sites are increasingly seeing themselves as partners and working together to meet the needs of children and youth.

Unfortunately, we still have a long way to go. Public/private partnerships, like the one that NACAC and Jockey Being FamilyTM have launched, are necessary and more are needed. However, we cannot do it alone. To continue meeting the needs of adoptive families, a true commitment is required of both the government and the larger community. Federal, state, provincial, and local governments must see their role as not simply finding families for children but to support those families once created. Redirecting a fixed percentage of U.S. federal dollars to create adoption-competent support services is an advocacy priority that coalition members are taking up at both the state and federal levels.

There are a number of organizations that have come together to speak in one voice on behalf of a better system of supporting adoptive families. These include NACAC,

the Dave Thomas Foundation, Evans B. Donaldson Adoption Institute, and Voice for Adoption. For more information on how you can become involved in efforts to improve adoption support and preservation services, please contact Kim Stevens at kimstevens@nacac.org.

References

¹NACAC - Post Adopton Support. http://www.nacac.org/postadopt/ccn.html

²Jockey Being Family. http://jockeybeingfamily.com/

³All recommendations came directly from youth in discussions held at the 2006 NACAC annual conference in Long Beach, CA.

⁴Visit for more on the youth teams. http://refca.net/move-ment/heroes, http://www.adoption.ca/youth-speak-out-video, and https://www.adoption.on.ca/uploads/File/Shared/youth-network-newsletter.pdf

⁵Susan Livingston Smith, Keeping the Promise: The Critical Need for Post-Adoption Services to Enable Children and Families to Succeed. http://www.adoptioninstitute.org/publications/2010_10_20_KeepingThePromise.pdf

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Your Feedback is Important to Us!



The National Resource Center for Adoption (NRCA) needs your feedback about *The Roundtable*. Please go to our web site to participate in a brief survey provided by Public Research and Evaluation Services, Inc., the independent evaluation firm of the NRCA: http://surveys.pres-online.org/s3/NRCA-Roundtable-Survey-2013

Your participation in this survey is voluntary and will not affect your interaction or participation in services with the National Resource Center for Adoption. Your responses are confidential and will be reported in group summary only. Thank you.

Sharonlyn Harrison, PhD, Director Public Research and Evaluation Services, Inc. (PRES) 24901 Northwestern Highway, Suite 610, Southfield, MI 48075

We're Here To Help!



The National Resource Center for Adoption assists States, Tribes, Territories, and Courts in building their capacity to ensure permanency for abused and neglected children through adoption and adoption preservation services.

The Center specializes in providing technical assistance, with a focus on program planning, policy development and practice through consultation, information/research and resource materials aimed at supporting organizations in their efforts for continuous program improvement. Additionally, the Center offers resources to assist with every phase of the Federal Child and Family Services Reviews. Technical assistance support areas include:

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- Adoption Support and Preservation Services
- Best and Promising Practice Information/Research
- Operating under Federal Regulations (ASFA,MEPA/IEP,ICWA)
- Preparing and Retaining Resource Families
- Permanency Preparation and Planning for Children, Youth, and Families
- Adoption Assistance
- Collaborating with Outside Systems of Service
- Finding and Engaging Fathers in Adoption Planning
- Increasing the Adoption Opportunity of Children who Wait the Longest

Upon request and approval, the Center will provide technical assistance, consultation, information and research materials specific to the needs of the organization.

For technical assistance requests, contact us at:

Email: nrc@nrcadoption.org | Ph: 248.443-0306

THE ROUNDTABLE

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