

ADOPTION ADVOCATE

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Supporting the Promise of Permanency: Post-Adoption Services for Children and Families

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Introduction: The Importance of Post-Adoption Support Services

The face of adoption is changing. Throughout the country, we see more and more older children, even teenagers, celebrating their journeys home to permanent families. Since 1997, adoptions from foster care have nearly doubled in our country, and the latest statistics indicate that more than 50,000 youth are adopted out of foster care each year.¹

While this is certainly good news, we have not done enough to ensure that these families have the support necessary to be successful. The joyous moment in a judge's chambers when the finalization of an adoption occurs is not the end of a child's story to permanency, but rather the beginning of the rest of their story. Too often support and services for families disappear at this critical juncture of permanency, and children are left with a suitcase of questions and feelings of trauma and loss.

While NCFA recognizes the legal importance of paper permanency, developmental permanency is essential for lasting success and satisfaction. Pre-adoption training and education is *not* sufficient for children or their



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¹ AFCARS data for FY 2011. Retrieved from: www.acf.hhs.gov/programs/cb/resource/afcars-report-19

adoptive families. Youth adopted from the foster care system – as well as those older children adopted from orphanages or foster care in other countries – need and deserve the kind of comprehensive, individualized, and consistent post-adoption support that will allow them and their adoptive families to thrive. Adoptive families can only achieve success if they are fully supported with services that are trauma-informed, attachment-based, highly individualized, and able to meet each family where it is.

Adoption Support and Preservation (ASAP) in Tennessee

Through the Adoption Support and Preservation (ASAP) network, the state of Tennessee has taken a tremendous step in recognizing how support and services can be successfully integrated into the system of care for children and their families. The ASAP model discussed in this paper is one that can be developed in other states, and also adapted to help families adopting internationally. The goals of the ASAP program are to prepare families for the lifetime commitment of adoption, provide therapeutic support to families post-finalization, and elevate overall family satisfaction and stability. The development of the program was guided and informed by a needs assessment that involved Tennessee's adoptive families. The ASAP program is administered through the collaboration of three agencies: Harmony Adoptions, serving the eastern part of the state; Catholic Charities, serving the mid-state; and AGAPE Child and Family Services, serving western Tennessee.

Since May 2004, ASAP has served over 4,000 children and their families, and has helped achieve positive outcomes for many. When the program first began, it offered services only to families that had finalized their adoptions. Yet program leaders immediately recognized that earlier involvement in a family's journey to finalization would better prepare them for a more satisfying, successful adoption. As a result, ASAP developed its own adoption preparation curriculum that relies on attachment-based principles and trauma-informed sensitivity. Since the addition of these pre-adopt services within the ASAP program, many families have benefited from the full continuum of support throughout their adoption journey. Families adopting internationally have also been helped through the ASAP program, though most of these families are asked to visit a program office rather than receiving in-home services, and they are also asked to pay a small fee based on a sliding scale. For families that have adopted out of foster care, ASAP services are free.

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What post-adoption support does ASAP provide to families?

The following services are provided to children and adoptive families through Tennessee's ASAP network, and are necessary components for a successful, comprehensive post-adoption services program:

- **Individualized, in-home care:** Master's-level clinicians provide in-home services for adopted children and their families.
- **Crisis intervention:** Families have access to therapists 24/7, if necessary; therapists are on call for emergencies.
- **Relief team building:** Respite care is provided for parents in need of a break.
- **Support groups:** Groups for both parents and children meet for support and fellowship, and also plan special activities for families (such as Family Fun Night, Parents' Night Out, picnics, etc.).
- **Adoption preparation classes:** A professionally developed training curriculum with instruction and a take-home handbook for adoptive parents covers topics relevant to adoption, including expectations and motivations, parental self-awareness, attachment issues, grief and loss, cultural and racial factors, emotional triggers, and many other issues; class materials also include video interviews with adopted children and adoptive parents.
- **Other advocacy:** The program provides other support when and where it is needed, including information regarding children's educational needs, childcare, juvenile court processes, etc.
- **Community education:** The program has involved and trained local mental healthcare professionals and others to help build a community that has both the wish and the capacity to support adoptive families.
- **Centralized website for information and services:** Families can look online and access or request services, resources, adoption trainings, information about local support groups, etc.

Most critical to post-adoption support is the involvement of Master's-level clinicians, known within the ASAP program as Family Therapists, who can make regularly scheduled in-home visits and remain on call for emergency situations. Many of the ASAP clinicians work from home, residing in the communities they serve, thus affording them flexibility in serving urban and rural areas of the state. Meeting clients in their homes is crucial to providing the best possible post-adoption support, as it eliminates the need for outside childcare for other children, keeps the child(ren) at home in a familiar

environment, and allows therapists to meet and talk with all members of the family.

Family Therapists in the ASAP program specialize in trauma-informed, attachment-based treatment protocols, which give them a unique capacity to address core needs of adoptive families, particularly those adopting from the foster care system. Both evidence-based and promising practice models are utilized, and treatment goals vary depending upon the unique needs of the family. Treatment models and techniques used by Family Therapists include, but are not limited to: TF-CBT (Trauma-Focused Cognitive Behavioral Therapy), PCIT (Parent & Child Interaction Therapy), ARC (Attachment & self-Regulatory Competency), and TBRI (Trust-Based Relational Intervention™). Evaluation instruments include parental stress index assessments, traumatic stress index assessments, and behavior checklists,² which are administered both pre- and post-treatment. Therapists also lead support group meetings for both adopted children and adoptive parents.

How have post-adoption supports helped individual families in Tennessee?

Currently, over 4,000 families have been served through ASAP. Families participating in the program have less than a 7% disruption rate pre-finalization, and less than a 2% dissolution rate post-finalization.

Post-adoption services provided for one family, the Romano family, clearly illustrates the importance of the continuum of both pre- and post-adoption support. Ms. Romano, a single parent, adopted nine-year-old John from Tennessee's public child wellbeing system. The Department of Children's Services originally referred this family to ASAP for adoption preparation and transition, as John had experienced multiple incidences of traumatic exposures and placement disruptions and had, as a result, frequent and challenging behavioral issues associated with his grief and loss. An ASAP Family Therapist began in-home work with the Romano family to prepare them for their lifelong commitment to adoption, and to assist the family in moving towards greater connection, healing, and cohesion.

At the beginning of treatment, John presented with significant symptoms of trauma in the areas of avoidance, sleep problems, irritability/anger, concentration problems, and exaggerated startle response. By the conclusion of ASAP services, each of these problematic areas of concern had reduced and were no longer present on a regular basis. Through psycho-education and parent sessions targeted at increasing Ms. Romano's attachment-based parenting skills, over time Ms. Romano was able to accurately read John's

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² Specifically, evaluation instruments include: Parent Feelings Form; Behavior Problem Index; Parental Stress Index/Stress Index for Parents of Adolescents; NSLIJHS Trauma History Checklist and Interview; and the UCLA PTSD Index.

cues and respond to the needs that lie underneath John's maladaptive behaviors resulting from traumatic exposure. Ms. Romano also created attachment-rich rituals and routines to deepen the connection between John and herself, and to help John fully integrate into the family system.

Additionally, ASAP was able to continue to support this family post-finalization, providing TF-CBT (Trauma-Focused Cognitive Behavioral Therapy) for John until his symptoms of trauma had decreased and family cohesion was on the rise. Ms. Romano was parenting two young sons when John came home to her, and family work and transition planning was critical for the wellbeing of the entire family. At discharge, John's behavioral manifestations due to the multiple traumas he had endured were minimal, the family was functioning as a fully integrated unit, and Ms. Romano felt significantly more confident in parenting John and meeting his emotional needs.

Ongoing education and program development should be a critical service philosophy of post-adoption support programs. Harmony Adoptions recently expanded its post-adoption support program by launching its EAP (Equine-Assisted Psychotherapy) services and therapeutic family camps. Both of these programs remain true to ASAP's attachment-based and trauma-informed treatment protocols, and are available to all adoptive families.

One young man named Derek was, like many teenagers, initially resistant to traditional "talk therapy" strategies. Yet he has thrived in the therapeutic context of the Equine-Assisted Psychotherapy program, and regularly draws parallels between his own experiences and that of the horses and their herd. Another former EAP teen client, Lindsay, recently attended ASAP's therapeutic family camp with her adoptive parents. Her family said that they experienced gains in feelings of connection and cohesion through the family camp experience, and shared a much-needed authentic and positive memory-making weekend together in this therapeutic setting.

Recommendations for Post-Adoption Support Programs

Post-adoption support programs must constantly endeavor to expand and grow their services to remain innovative, provide essential care and support, and meet the unique and complex needs of adoptive families. Following are a few specific recommendations that states and agencies can use to further the advancement of their post-adoption services and better support adoptive families:

- 1. Regionalize collaborations and partnerships that reflect the communities they represent.** Ethnic and cultural diversity

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within the population is, to varying degrees, inherent to every state, and programming should reflect the communities served. Most agencies cannot cover their entire state, and may not fully represent the diversity of their community or state. Collaborations and partnerships with other agencies throughout the region and the state can not only build capacity and reach in cooperation with other professionals, but also better represent the communities served.

- 2. Make sure that the professionals providing care and treatment are knowledgeable about adoption and experienced in trauma-informed, attachment-based treatment protocols.** The healing of families and the strengthening of family cohesion necessitates specialized treatment protocols and adoption sensitive professionals. Traditional counseling services from a regional or mental health treatment provider are often less successful, as the clinicians may not have been trained in meeting the unique needs of adoptive families; traditional behavior modification interventions do not address their real needs. Professional competency in adoption can lead to broader capacity-building within the clinical field.
- 3. Recognize that legislative support and action are key ingredients for program sustainability.** Lawmakers need to fully understand the costs and benefits of children remaining in stable, permanent families and not reentering care. Program leadership must partner with both state legislators and child-wellbeing department officials to build a strong and sustainable foundation for post-adoption support services.
- 4. Measure and evaluate program effectiveness on an ongoing and regular basis, as this is essential to providing the highest quality care.** The ASAP program measures key performance indicators on a monthly basis to ensure that key outcomes and goals are being met. Identifying measurement tools that clearly demonstrate greater stability in placements, heightened satisfaction and confidence among caregivers, and improved and sustained wellbeing in children are crucial to a program's long-term success. Client satisfaction surveys are also completed six and twelve months after case closure. Evaluation instruments provide key measurements and evidence for the effectiveness of the program and the significance of family growth and clinical improvement.

Conclusion

Adoption and child welfare advocates know that positive outcomes for adoptive families are not guaranteed upon finalization, and that post-adoption services are crucial to their success. Yet we have a long way to go to improve existing services and establish high-quality post-adoption supports for all adoptive families throughout the country. The face of adoption will continue to change, requiring the collective efforts of adoption and child welfare advocates to support adoptive families and develop continuums of care in all fifty states that meet every family's unique and complex needs. If we fail to do this, we invite a greater number of disrupted placements, leading to additional trauma for an already traumatized population of children and youth in the foster care system. NCFCA calls on all public and private agencies serving children and adoptive families to work together to establish comprehensive care programs that advance healthy developmental permanency for all adopted children, instead of mistaking much-celebrated "paper permanency" for true and lasting permanency.

ABOUT THE AUTHORS

Michael Yates, MDiv is the Director of Department of Children's Services Contracts with Harmony Family Center, Inc. in Maryville, Tennessee. He began working for Harmony in October 2004 as the Project Manager for the newly funded Adoption Support and Preservation (ASAP) program, a statewide adoption preparation and post-finalized support and treatment service that received the U.S. Children's Bureau Adoption Excellence Award for Support for Adoptive Families in 2008. Michael assisted in developing the ASAP Adoption Preparation Training Curriculum. Prior to his work at Harmony, he coordinated a therapeutic foster care program in Knoxville that cared for 88 children in East Tennessee. He completed his undergraduate studies at Albion College in Albion, MI and his graduate studies at Vanderbilt University.

Kristi Kulesz, LMSW is a clinician and supervisor at Harmony Adoptions, where she has worked since 2006. Kristi received her Bachelor's and Master's degrees in social work from the University of Tennessee, Knoxville. Her professional experience includes over ten years of work with children that have experienced trauma, abuse, and neglect, and extensive training in treatment models such as TF-CBT (Trauma-Focused Cognitive Behavioral Therapy), ARC (Attachment, Self-Regulation, and Competency), and TBRI (Trust-Based Relational Intervention™). Kristi has been the team leader at Harmony for the development of ASAP's Adoption Preparation Curriculum, and the team leader for the development and implementation of Therapeutic Family Camps for foster and adoptive families.



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