

**NICAAG Presentation to the Cwth Attorney-General's**  
**Harmonization Working Group – Dr Gary Banks, May20, 2009.**

***Including NICAAG's views on the key issues required to  
practically progress the issue of post-adoption support services***

Good Morning all,

On behalf of NICAAG I'd like to thank-you for this opportunity and hope it represents yet another step in government-community cooperation and collaboration in the ICA area. I believe it is fair to say that NICAAG holds the highest hopes for this working group.

Let me describe for a moment my thinking as I developed this presentation. While the topic as suggested by AG's was of great importance to NICAAG, there are a number of issues I'd like to touch on first.

I reviewed some of the House report, particularly the bi-partisan agreement of the recommendations; the National Principles in Adoption; the Cwth-State ICA agreement and finally the Cwth-State agreement on the Implementation of the Hague Convention. I reflected on the enormous efforts of so many in the adoption community to bring about and participate in the House Enquiry - not just in stepping up to express their frustration, but to seek and achieve significant change in this area, and to leave their hopes and expectations resting on us – NICAAG and in particular this Working Group.

I believe that report was a major victory for the adoption community – and when I am using that term, I am applying the widest definition of inclusion I can. Adoptees, adoptive applicants and families, relinquishing mothers (and families), stakeholder groups, health, education and welfare professionals working in the field, including most importantly, public sector professionals charged with the responsibility of achieving the recommendations of the House Report.

To me the Harmonization Working Group can and I hope will represent the sharp point of advances in ICA issues across Australia, and similarly represent the mechanism that community and government alike can point to, to illustrate the capacity of this community to instigate change, development and growth in this area.

I then started to look at the expressed role of the Working Group, and

Recommendation 3 of the Report states [para 3.43]:

“In renegotiating the Commonwealth-State Agreement, the Commonwealth shall ensure a greater harmonization of **laws, fees and assessment practices**, including:

- more general, principle based criteria in legislation
- **more robust, transparent and documented practices, and**
- **Standardized assessments across the jurisdictions.**

These harmonizations should be developed in consultation with stakeholders such as adoption support groups, adopted children and adoptive parents.”

Clause 20 of the Cwth-State Agreement provides for the establishment of an inter-governmental working group to progress the greater harmonization of intercountry adoption legislation, fees and administrative procedures, **to achieve best practice and not to achieve uniformity as an end in itself.**

There are particular terms in this recommendation that holds enormous currency for the adoption community and clearly sets the direction for this group. I will come back to these terms shortly.

First of all I'd like to find the wonderful soul who coined the term 'harmonization'. One wit in the NICAAG has made more than passing reference to the notion of harmony and expressed doubt

about this grp's capacity to sing in a choir-like fashion. But, needless to say, the Working Group met late last year, formulated terms of reference and began what I would describe as a scoping exercise as illustrated in the 'List of Issues, and the State-by-state matrix of eligibility placement criteria.

Already that list illustrates the enormous challenge this Group faces with the state-by-state discord of legislative and administrative practices so far described, and I fear those are just the start, and each element so far articulated, then represents an entire sub-set of issues yet to be delineated.

The challenge confronting this Group looms larger if one steps back to consider the colourful history of our (being Australia's) ability to cooperate as colonies, then states, then a fledging commonwealth and that it took all of those bodies more than 120 years to get a railway system singing in some sort of harmony. At multiple times various politicians and engineers have got together to review a railway system that varied 6 gauges and a myriad of switching and communication systems across this huge country, many built pre-federation where there remained customs and border control at each state boundary with little thought of the idea that federation nor fluid inter-state movement of goods and people would occur. Remarkably, in 1945, the gauge 'standardization' project began with 3 proposals:

Gauge standardization from Fremantle and Perth to Kalgoorlie, all of South Australian and Victorian broad gauge lines, all of the South Australian south east lines.

New standard gauge 'strategic and developmental railway' from Bourke, New South Wales to Townsville, Queensland.

New standard gauge line to Darwin, including new line from Dajarra, Queensland to Birdum, Northern Territory.

The report wrote that if only main trunk lines were converted, it would introduce a multitude of break of gauge terminals and result in greatly increased costs. It also recommended abandoning part of the existing Perth - Kalgoorlie narrow gauge line, and build a

flatter and straighter route using 3rd rail dual gauge, as modernisation was just important as standardization.

Not surprisingly, South Australia was unhappy with the report, as the link to the Northern Territory would not run through their state. Western Australia and Queensland both saw no advantage in the report, as they already had a common gauge in their states, and only one main break of gauge. NSW entered into the agreement to advance gauge standardization in Victoria and South Australia, but did not ratify it.

After more government committees, another three reports, a Royal Commission and finally the One Nation project was carried out under the Keating Government from 1991 to 1996. The Melbourne-Adelaide railway line was converted to standard gauge in 1995, at a cost of \$167 million. A standard gauge/dual gauge link was also opened to the Port of Brisbane in 1997.

So after 150+ years, a single national railway line (not a system) has been achieved.

Sadly, so many of the committees, and working groups over so many years could see the elephant in the room, but for a variety of reasons chose not to confront it for need to embrace a 'standard'. Something at least that was recognized in the House Report, and developed further with the Cwth-State Agreement. An issue for the future that this Group may well have to also consider is the prospect of whether there will be a need, in time, for a National Adoption Act. But I'll just leave that one to the side...

Going back to my railway analogy, a hundred years before all of this; ...as early as 1848 NSW Governor Charles Fitzroy was advised by Secretary of State for the Colonies in London, Earl Grey, that one uniform gauge should be adopted in Australia, this being the standard gauge.

At the time the private Sydney Railway Company was building their railway line to Parramatta. The chief engineer of the company was Irish-born Francis Webb Shields, who persuaded the company and the NSW legislature to adopt the 'Irish standard

gauge' instead. This decision was endorsed by the NSW Governor and Secretary Earl Grey in London agreed in 1851.

The other states also adopted this gauge, with the Victorian Railways opening a line in 1854, and the South Australians using it on their first steam hauled railway in 1856. Meanwhile, the Sydney Railway Company gained a new Scottish engineer, James Wallace, who preferred standard gauge and convinced the NSW legislature to make the change. NSW Governor William Denison gave the go ahead in 1855, despite a request by the Secretary of State for the Colonies to reconsider. At the time there was only 37 km of track, 4 engines and assorted cars and wagons on the railway, but by 1889 New South Wales under engineer Whitton had built almost 3500 km of standard gauge line, and the rest is history.

This is only the briefest summary of this story, but it illustrates the difficulties then and now when our great federation of colonies works to reach agreement. That was the goal of the “*Rail Standardisation Committee*”

This Working Group's mandate is to achieve greater harmonization of ***laws, fees and assessment practices***. And that harmonization “should be developed in consultation with stakeholders such as adoption support groups, adopted children and adoptive parents.” That is the goal.

Fortunately, clause 20 of the Cwth-State agreement (CSA) then provided a clearer strategy to achieve this by establishment of an inter-governmental working group to progress the greater harmonization of intercountry adoption legislation, fees and *administrative procedures*, to achieve best practice and not to achieve uniformity as an end in itself.

In comparative terms to the Rail Standardisation Committee, the CSA effectively added another dimension – not just the goal of achieving a standard or uniform railway, but the best standard possible. Converting what is accepted as a standard now to what should be, and ensuring that whatever is built is done so in terms of aspiring to that higher standard.

When the Peak Body was set up, it was given a title of Peak Support Group, which while breathing life into its existence, didn't assist government or community understand or appreciate its activities. It has since been renamed the NICAAG – the National ICA *Advisory Group*.

Similarly, I would that I would suggest that this Working Group should not call itself the Harmonization Working Group as it has the potential to be perceived by others as articulating an existing standard, rather than working to espouse a higher one of what should be – at a National level. Hence I would suggest instead the *ICA Best Practice Wkg group*. (Besides that its much easier to say...)

I would argue that NICAAG as a group would strongly endorse this as a formal recommendation to all members here.

Recommendation 1: That the Hmzn Wkg Group is renamed by the AG as the ICA Best Practice Working Group
---

It may seem minor, but at a point when the Working Group articulates core differences between state legislation, fees, assessment and administrative procedures, there remains the risk of defensiveness, protectiveness and even territoriality arising with states saying as they did when tussling over the railway gauge issues, *'what's in it for our state?'*

That's probably why the government of both sides, endorsed the recommendation that the Harmonization Working Group progress its activities in consultation with stakeholders, and NICAAG sees the presence of a representative as a small step in that direction. NICAAG and its associated stakeholders groups would argue that this consultative process needs to be articulated, and expanded. Not necessarily in that order. That recommendation is coming, but I will return to this shortly.

NICAAG would like to commend the efforts of the Working Group in formulating the List of issues and subsequently to survey the wider community on the issues and thereby prioritise those.

NICAAG considered the Working Group's agreed Terms of Reference as sufficient to commence the task of achieving

Recommendation 3, though notes that these should be also considered as a minimum. More importantly NICAAG commends the dynamic wording within the Terms of Reference indicating that the Working Group intends to -

- *'progress a body of work* to achieve best practice in legislation, fees and administrative processes (note I have dropped the term hmzn) and
- *progress a body of work* regarding legislation about right of parties to publicly discuss their adopted family.'

NICAAG however raises concern about the absence of time points within the construct of *'progress a body of work'*, and recommends that any projects that the Working Group instigates are publicized with at least desirable end points in time as to when these will be achieved.

NICAAG has discussed in broad terms various issues that have been communicated to its members from the adoption community. These have been detailed in the document – “List of Harmonization Issues” (March '09), though these are yet to be prioritized by NICAAG, they include but obviously are not limited to --

- Pre and Post-adoption Support – not just education
- Differences in application processes, assessments, reassessments and approval processes
- A recognition that the more 'consultation' as a construct is taken to represent the notion of participative collaboration, the more likely State and Cwth Central authorities will be successful in breaking down perceptions of past government-community adversarial stances of 'them and us'
- The enormous state-by-state discrepancy in fees charged at various points of the adoption application process
- Media/publicity legislation issues, already recognized by the Working Group as important, and has a specific Term of Reference. The importance of this issue however, cannot be

stressed enough, nor the need to achieve legislative change as a priority.

As I indicated these have not been prioritized, but by outlining them, I hope it highlights the importance and/or prominence of each in discussions at NICAAG meetings already held. So in reverse order, allow me to develop these further.

#### MEDIA/PUBLICITY

This is an issue of enormous importance to individuals in a number of states in Australia and is detailed in Attachment B. It was a major issue in the Report, and in its recommendations, it has arisen at every NICAAG meeting held, the concern of the Adoption community is what has happened in the time since, that suggests any state has progressed efforts to modify their adoption acts.

Given the terms of reference for the Working Group, may I suggest that as part of any future communiqué that it addresses progress – current and proposed against these terms.

#### FEES

Notwithstanding the mandate of this group, there is a critical need for a re-consideration of fees, to address as a priority the enormous state-by-state discrepancies. The House report details this in Chapter 3, but in brief the concept that 'recovery cost models' have been variably implemented, yet few changes have been evidenced in policy, practice or staffing that would suggest that those State Depts who altered the provision of service delivery to 'recover costs', better reflect the notion of *value for money* which logically must accompany any purported shifts to 'fee-for-service' delivery.

The House report included a table of then 2004 costs, which varied from \$2053 to \$9,700. I would suggest these figures would not compare well with current charges, and that the discrepancies across states have only continued to increase.

**Table 3.2: State and territory government fees for adoptions (\$)**

**Table 3.2: State and territory government fees for adoptions (\$)**

	NSW	Vic	Qld	SA	WA	Tas	ACT	NT
First adoption (intercountry)	9,700	6,250	2,053	8,377	2,246	2,280	4,154	6,100
Second adoption (intercountry)	6,900	4,950	2,053	7,450	2,246	2,280	4,145	6,100
First adoption (local)	2,782	Free	530	1,629	750	1,710	Free	Free
Second adoption (local)	2,782	Free	530	1,019	750	1,710	Free	Free

Source: *Families with Children from China-Australia*, sub 86, p 16. Queensland local adoptions are free for special needs children.

NICAAG would recommend that a movement by States to just increase fees to achieve parity with those States charging the highest fees would simply cause outrage across the adoption community, and potentially damage the collaborative partnership between governments and communities (adoption) already in process.

Instead NICAAG would recommend the development of a state-by-state matrix as per Attachment B for review at the next Hmzn Wkg Grp, to determine an 'average' cost for each service reflective of state variations, but taking into account the cost of providing the actual service.

Recommendation 2: That a matrix of costs be developed and reviewed with average costs per service identified by the end of the next Hmzn meeting with recommendations back to relevant state CA's for consideration and (optimistically) implementation. An ongoing national pricing process can then be maintained that applied across states and across department or NGO agency services.

## CONSULTATION

Increasing consultation is of paramount concern to NICAAG and to the wider adoption community.

The House Report was most supportive of improvements in this issue, hence its inclusion in its pivotal recommendations. It also relied heavily on the Productivity Commission's report on Cost Recovery by Government Agencies. Quoting the Commission directly:

3.66 The commission generally supported consultation: Despite the risks of agency capture, stakeholder consultation is necessary to help drive agency efficiency. Those expected (or required) to pay have a clear interest in the costs, efficiency, and quality standards of agency activities and should be consulted on these arrangements.

3.67 One of the participants at the commission's hearings stated:

... [industry associations] ... can be extremely thorough in their grilling of bodies to identify costs and efficiencies and make managers accountable.

The House report then went on to say -

3.68 It appears that some ministers and their departments involved in intercountry adoption have been unaccountable for too long. The committee heard evidence of oppressive bureaucratic requirements being placed on adoptive parents that appeared to be out of proportion to what is required

It concluded by saying –

The committee would like to adopt the Productivity Commission's recommendation on stakeholder consultation for intercountry adoption. By giving a consultative

committee suitable representation and access to information, *it should be able to make meaningful recommendations*. Publishing the committee's recommendations and the government's response is a practical method of preventing both 'departmental capture' and departments not giving sufficient weight to the committees' work.

NICAAG is of the view that this extends beyond the consultative committees established by state CA's, to include the ACA, and its Working Groups. NICAAG acknowledges this to be an incremental process evidenced by initial invitation, capacity to form and demonstrate collaborative relationships leading to sessional attendance progressing logically to full membership.

Recommendation 3: That in ensuring suitable representation and access to information, the Working Group extends an invitation to NICAAG to nominate a representative to participate fully in the Working Group.

\*\*\*\*\*

### ***12.00-1.00pm Assessing, preparing and supporting Adoptive families and adoptees***

This brings me to the next part of this presentation which is focused on **assessing, preparing and supporting Adoptive families and adoptees**.

#### **DIFFERENCES IN APPLICATION PROCESSES, ASSESSMENTS, REASSESSMENTS AND APPROVAL PROCESSES**

Similar to the Fees issue, I believe that articulation of each states application and assessment process can be readily achieved, with

a goal of defining a draft 'best practice assessment procedure' for consideration by the time of the next Working Group meeting.

Any best practice model needs to take a 'strengths-based' assessment that is used to match parents to children. Berry's work (1997)<sup>i</sup> noted with US domestic adoptions, that families previously considered "risky," such as those with single, foster, low-income or less-educated parents, have better stability rates than average. She argues that an emphasis on matching the parent's strengths (including flexible expectations, older age and social support networks) to an individual child's needs will increase the probability of adoption stability. Clinically my experience would support that finding and I have found there are particular characteristics of adoptive parent who actively seek out additional support of their own initiative – and it is these characteristics we need to identify better and subsequently promote. Work of this nature would suggest that past decision-making about choosing adoptive applicants based on 'clinical intuition', could well be flawed and that a more robust, transparent and evidence-based decision model should be formulated. But in the first instance, I would suggest we collate what is being done.

Recommendation 4: That the Working Group develop a State based matrix of information be collated outlining the specific steps of application and assessment required for an Inter-country adoption.

#### *Assessment Methods*

There are already a number of well evaluated tools and protocols to assist clinicians (a generic term which I will use for both social workers and psychologists – as that too is an issue that varies between states) to review applicants and match children with appropriate adoptive families. McRoy (1999)<sup>ii</sup> has developed an assessment tool based on research findings about the family and child characteristics associated with certain adoption outcomes. The Houston Region of the Texas Department of Protective and Regulatory Services has been evaluating the tool from 2001 to 2006, and indicates it is a promising methodology in supporting more appropriate matches of children and families, and minimizing

the potential for disruptions.

*Preparing*

Barth<sup>iii</sup> (US Dept of Health and Human Services) argues that there are already published Foster and adoptive parent training programs, such as Model Approach to Partnerships in Parenting (MAPP); Parents' Resource for Information, Development and Education (PRIDE); and Multidimensional Treatment Foster-Care that should be used more extensively.

MAPP, PRIDE and MTFC all have well-articulated curricula for preparing and educating prospective foster and adoptive parents about the issues they may face. The trainings provide a structured environment allowing adoptive parents to share experiences and expectations with other adoptive parents. By way of comparison – MAPP is 30 hours of structured training, PRIDE – 27 and MTFC is 20hours. The interaction in these groups helps adoptive parents form more realistic expectations of their adopted children and serves as a support network. The group also gives clinicians a better opportunity to get to know prospective parents and to assess their abilities as parents.

The emphasis is a Multi-method Multi-source approach to parent preparation and education that takes into account adult learning theory. Too often the information provided by professionals in a group-oriented lecture format comes across as dry, irrelevant and/or inaccessible. In contrast the give-and-take of group processes, during which prospective parents can share their hopes, fears, expectations, and experiences with each other – as well as with those who have parented adopted children for years – in groups facilitated by a clinician enables better education together with a more robust applicant review process.<sup>iv</sup>

To oversimplify, but characterize these three approaches: MAPP makes sure that foster and adoptive parents know what they're getting into; PRIDE makes sure they grasp underlying values and associated competencies; and MTFC makes sure that treatment foster parents and adoptive parents understand how to apply the behavioural principles and structures that will form the foundation of their work with children and youth. I would argue here that it

would be a relatively simple task to pick the strongest elements of each of these models to form a national curricula.

Better prepared and educated parents means that they will be better equipped for their adoptive child, and in an era of increasing special needs adoptions, this element must become paramount in Departmental (I'll also refer to these as 'Agencies' – in the event of NGO's becoming accredited) thinking across Australia.

Following from the recommendation of developing a state-by-state matrix of application and assessment steps; the next is developing a state-by-state matrix of current educative processes, again with the intent of identifying current good practice, and together with further international research identify and put in place best practice on a national level.

Recommendation 5: That the Working Group develop a State based matrix of current educational curricula in use – in terms of format, content and delivery.
---

## POST-ADOPTION SUPPORT SERVICES

Some researchers have identified the general needs of adoptive parents. For instance, Barth and Miller (2001)<sup>y</sup> grouped post-adoption services into three basic types.

1. Education and informational services may be offered via workshops and literature. These provide parents with information that can help them better understand their adopted child, plan for the financial costs involved in adoption, and help them seek out other available services.
2. Clinical services are offered by trained professionals, and may include child, couple (i.e., parent), and family counseling, finally,
3. material services include the provision of subsidies, medical care, and respite care (i.e., a caregiver spends time with the adoptee thus giving parents a break).

Alternatively, Watson (1992)<sup>vi</sup> categorized post-adoption services into four types.

1. After adoption, there may be a continuation of services provided by the agency that placed the child with the family in order to help families integrate the adoptee and to locate the sources of support they may need in the future.
2. Intervention services may be provided upon request when families are experiencing difficulties.
3. Agency-initiated, planned services may be offered that respond to the developmental needs of the child.
4. Finally, services may be available to those involved in the adoption so they can seek information about each other, or make contact. Thus, it is important to recognize that there is a “continuum of need” (Commonwealth of Kentucky, 1993; p. 54)<sup>vii</sup>.

Latterly Gibbs et al, (2002)<sup>viii</sup> identified 5 areas of Post-Adoption Support

1. Information Services
2. Clinical Services
3. Respite Care
4. Material Services
5. Support Networks

Despite Australia’s compliance with the Hague Convention and despite the National Adoption Principles, I believe it would be fair to say that by contrast to the services widely available at the pre-adoption stage, there remains a dearth of Post Adoption Support services, and this needs to be addressed by this group.

The Cwth-State agreement on the Implementation of the Hague Convention, clearly affirms that the Departments (being at this point State CA’s) will provide – (and I’m only highlighting the relevant issues) -

- (a) Initial Enquiries – respond to initial enquiries for intercountry adoption;
- (b) Information Sessions - conduct regular information sessions to inform potential applicants;**
- (c) Expressions of Interest – receive and process expressions of interest;
- (d) Applications – receive and process applications to adopt**
- (e) Assessments – undertake assessments of suitability (including relevant medical, referee and police reports, and preparation of the Home Study);**
- (f) Decision to approve or not approve – determine the suitability of applicants;
- (g) Forwarding of file – forward a report including all relevant information required to the country of origin (Article 15);
- (h) Allocation of children – receive allocation of children, confirm suitability of match (Article 17b) and advise applicants;
- (i) Supervision of placement – provide support and advice to applicants following a placement;
- (j) Placement Breakdown – in case of placement breakdown prior to adoption orders being made, consult with the State Central Authority regarding appropriate arrangements, but the body is not to make decisions on alternative arrangements;
- (k) Adoption Information – collect and preserve relevant information about the child and the applicants (Article 9a), and respond to requests for adoption information until the child attains the age of 18 years;
- (l) Evaluation Reports – prepare general evaluation report for the State Central Authority (Article 9d);
- (m) Post Adoptive Services – provide a referral and support service post granting of the adoption order;**

But in addition to this lack of services, there also remains an absence of data at a State and Commonwealth level to identify the types of support services needed by families after adoption and who may need the services. Going further there remains an absence of data or information on rates of adoption *disturbance* (sufficient to warrant intervention at a clinical level), as well as *disruption* and *dissolution* of adoption (terms applying to pre-final Order and post-final Orders respectively). How then can we as clinicians also address this when we don't know the factors associated with placement disturbances?

Recommendation 6: That the Working Group further the development of a National Data base that captures, at least at a group-data level, clinical information such as disturbance, disruption, dissolution data.

But briefly looking at the published literature would suggest that we are even further behind most Western countries, who not only have an array of post-adoption services, they have sufficient upon which to have published evaluative studies.

Phillips (1990)<sup>ix</sup> found that adoptive parents in Scotland suggested 15 specific services they would like to receive, and many of these fell within the categories identified by Barth and Miller (2001). Furthermore, parents claimed that they would use the services if they were provided (Phillips, 1990).

Walsh (1991)<sup>x</sup> surveyed Illinois families receiving adoption assistance and found that the most needed resources were special education, medical services, and family counseling. Just under half of the sample said they had used these services in the past year alone.

The Commonwealth of Kentucky (1993) reported that support needs that were not met include mental health services, assistance in dealing with the school system, parenting skills education, support groups for children and parents, information resources, and counselling help with disruption and dissolution.

In a study of the adoption of special needs children, Kramer and Houston (1998)<sup>xi</sup> found that pre-adoptive parents in an American mid-western state were particularly concerned about their children's health and medical issues, child development and education, and child behavior problems at home. However, parents did not necessarily use the adoption agency as a source of support, and they rated informal, non-agency resources such as their spouse, extended family members, and friends to be most helpful. Parents identified several needs that were not being met including difficulty in accessing agency staff and services such as medical care, educational or developmental evaluations,

counseling, support from other adoptive parents and respite care.

More recently, McDonald et al. (2001)<sup>xii</sup> reported that adoptive parents in Kansas said they needed special education for their child, medical services, financial assistance, and legal advice. Fewer parents reported their need for parent support groups, respite care, advocacy services, sibling support groups, emergency assistance, and crisis intervention. A minority of parents said they encountered problems when accessing the services. Finally, parents recommended that there should be more consistency and continuity with caseworkers involved in the adoption process.

Festinger (2001)<sup>xiii</sup> documented the service needs of adoptive parents in New York. She found that the three most commonly provided services were medical services, special education programs, and information about after school activities. On average, parents said they needed eight services that were not provided. The three most unmet needs were for a telephone hotline, information about summer activities, and tutoring help.

Brooks, Allen, and Barth (2002)<sup>xiv</sup> compared the post-adoption service needs and usage of parents who had adopted children from public agencies (i.e., those initiated by a government agency) and private agencies (i.e., those initiated by a private organization) in California. The majority of parents in both groups stated they used educational resources on adoption issues. A quarter of parents in both groups reported using services such as support groups, family therapy, and counselling. Parents placed more importance on the provision of services such as educational resources and workshops. Lesser importance (but still importance) was placed on respite care, intensive crisis counseling, couple or individual counseling, family therapy, and classes for extended adoptive family members. Approximately 1 in 3 adoptive families used most of the post-adoption services that were offered.

Some studies have documented the success of post-adoption agency services. Overall, adoptive parents tend to be satisfied with services (Harris, 2002). Brooks et al. (2002) revealed that both public and private agency adopters considered parent support

groups, workshops on adoption issues, couple and individual counseling, and educational resources to be particularly helpful.

In a study of services delivered by the West Midlands Post Adoption Service, U.K., Harris (2002)<sup>xv</sup> found that services had affected families positively. These positive differences included improvements to their mental health, feelings about self, and information and knowledge about adoption. Researchers have also found that post-adoption services were associated with reductions in children's emotional and behavioral problems (Smith & Howard, 1998)<sup>xvi</sup>. Finally, post-adoption family support networks such as support from the spouse, other adoptive parents, physicians, and day care center, have been found to be associated with higher levels of family functioning (Leung & Erich, 2002)<sup>xvii</sup>.

Finally, Dhimi (2007)<sup>xviii</sup> in a recent review of post-adoption services in British Columbia, Canada reported that adoptive parents would use post-adoption services *if they were offered* (Phillips, 1990). They also went onto identify causal factors for lack of use of such services and made recommendations to address these.

First, adoptive parents often lack knowledge of the availability of services. Parents may be unaware of their own eligibility to use services, and how to gain access to them. The fact that education workshops were widely advertised by the Agency may partly explain why they were frequently used. It is imperative that post-adoption agencies increase their visibility in the community and effectively advertise their services. For instance, the Commonwealth of Kentucky (1993) found that caseworkers reported offering services more frequently than the parents noted them being offered. This finding highlights the fact that parents may not necessarily hear the offers, and they may also have forgotten that some services were offered. Clearly, verbal communication on its own is an inadequate means of informing parents of the services that are available to them. Post-adoption services may be more effectively and widely advertised via the internet, public libraries, family practitioners, and public and private adoption agencies and support networks. ***Creating a culture of***

**information sharing** is critical.

A second explanation for the low use of post-adoption services is that they may be offered at inconvenient times and locations. This is a serious problem because inconvenience may prevent families who know about services to actually use them when they are needed. Of course, the flexibility of a program will be hampered by constraints on financial and staff resources, and it is unlikely that services can be convenient for every family. Thus, as Kramer and Houston (1998) recommend, agency staff could encourage parents to seek out personal sources of support.

Agencies should also encourage prospective service users who are prohibited by timing or other constraints to inform them of these reasons so that agencies can adapt to the changing needs of clients.

Third, parents may not use post-adoption services as they often seek help from alternative sources. As we found, many parents relied on several sources of support including personal sources such as friends and other adoptive parents, the internet, and professionals such as social workers and counselors. Informal, non-agency sources of support are convenient, and families may feel more comfortable turning to people they know rather than agency staff. In addition, Harris (2002) suggests that adoptive parents may avoid services because they are unwilling to acknowledge that a problem exists with the adoption or that the problem is serious enough to require assistance. By using services, some parents may be reminded that their child is adopted, and they would rather forget that part of their past and move on. Adoptive parents may also feel fearful of contacting social services for help. As Phillips (1990) concludes, ***“To be acceptable such a service needs to be provided along informal lines, with the initiative coming from the adoption agency”*** (p. 26).

In essence, Departments need ‘to push’ services towards the adoptive family rather than waiting for the adoption community to demand them.

Finally, another explanation for why adoptive parents rarely use some post-adoption services is that post-adoption agencies tend to employ a reactive rather than proactive approach to service delivery. Services are predominately offered to families upon request. Whereas this approach is efficient, it will likely be inadequate if families do not know about the existence of post-adoption services.

Watson (1992) points out that agencies (Depts) have six responsibilities

- “leadership and vision,
- planning and coordination,
- standard setting and licensing,
- training,
- funding, and
- the provision of some direct service” (p. 10).

One of the mandates of Departments is to be responsive to the needs of adoptive families in the development of services. However, they found that nearly half of the parents were unaware that they had input into the development of services.

Parents tend to need post-adoption services at specific time points. As Dhami's findings suggest, support is often required after a stressful or traumatic event. Further research is required to identify the nature of these events. More generally, services are needed soon after the adoption, and then again at significant developmental points in the child's life such as when the child starts pre-school, then school, and becomes a teenager and adult.

They are the key time points – but the critical point here is that the majority occur well after placement is finalized.

*The next issue is what to teach?* Brodzinsky (2008) also recognized this and recommends that all adoptive parents be prepared and educated in the following areas:

- **Mental health issues associated with adoption** -- understanding both the benefits and risks related to adoptive

family life, as well as those factors that influence children's variability in adjustment

- **Normative parenting issues in adoptive family life** -- how adoption influences child-rearing at various stages of the family life cycle
- **Developmental issues in adoption** – how adoption impacts the life of the child at various developmental periods and into adulthood, including the importance of birth family members in the mental and emotional life of the child, regardless of the amount of contact among these individuals
- **Talking with children about adoption** -- guidelines about how to share adoption-related information with their children, especially when it is sensitive or when there is an absence of information
- **Role of loss and grief in adoption** – the extent and unique nature of adoption-related loss/grief, as well as how it affects children's adjustment and how parents can help their children cope with it
- **Identity issues in adoption** – the way adoption colors children's identity, as well as ways parents can help their sons and daughters develop a positive and secure sense of themselves
- **Role of the search process in adoption** – the nature of and motives for searching among adopted individuals, as well as ways parents can help their children with this process.
- **Support services in adoption** – the relevant community services and supports that are available, adoption-competent therapists; web-based adoption sites and online adoption courses. Adoption books and DVDs.

*Then the next issue is how to teach this?*

“Webinars” (Web-based seminars) and internet-based learning must become a core element of all state support, yet, logic suggests that this could easily be centralized to one source with all states having access to it, thereby representing significant savings.

Similarly this material needs to be developed and directed at two levels – firstly to the adoptive parents and families –

e.g.

**Education: Educating Adoption Professionals & Families**

**Putting Research into Action: Educating Adoption Professionals and Families**

The Evan B. Donaldson Adoption Institute - already a nationally recognized leader in research and policy development - is extending its efforts to implement systemic change through the training of adoption professionals with the aim of educating adoptive parents about the issues they - and their children - may face. The Institute is well known for its research on critical issues in adoption and foster care, and for its high-quality and high-impact initiatives to inform the public and professionals; promote ethical practices; and support legal, policy and practice reforms. Now we have developed research-based training materials to improve the preparation of adoptive parents, with the goal of helping families succeed.

**Available Training Programs**

Training	Dates & Time	Format	Register
Adoptive Parent Preparation Train the Trainer Webinar - Understanding the Psychological, Developmental and Medical Challenges that Adopted Children May Experience. <a href="#">Details</a>	02/10/2009, 3pm EST/12pm PST 04/07/2009, 3pm EST/12pm PST 06/09/2009, 3pm EST/12pm PST	Webinar Web Briefing	<a href="#">Online</a> <a href="#">Print</a>
Update on Issues in Transracial Adoption <a href="#">Details</a>	Anytime	Web Briefing	<a href="#">Online</a>

See [www.adoptioninstitute.org](http://www.adoptioninstitute.org)

Or [www.adoptionlearningpartners.org](http://www.adoptionlearningpartners.org)

Secondly training needs to be directed at the clinicians/assessors and providers of post-adoption support services, (and particularly those charged with preparing reviews of applicants). This then introduces yet another area for the Working Group to address – that of identifying an accreditation process for providers of ‘adoption assessment services’. Annual contracts would need to be offered on the basis of demonstrated expertise. Contract renewals would need to take into account demonstration of ongoing professional development (continuous education) in the field. Both these elements then highlight the need for the Depts/CA’s to be

positioned in the role of regulator (and funder) rather than direct provider. Conversely, this is a role that the Cwth AG's already provides via its national accreditation scheme of Family Dispute Resolution Providers, and this model would lend itself readily to accreditation of adoption assessors.

In terms of Departments providing greater support, the critical need is for information, education, and support resources. It would be reasonable to suggest the Departments are not expected to provide all of these services, but at the very least they should be at the forefront of communicating the need for them across other departments, agencies, tertiary teaching facilities and professional associations (such as the Australian Psychological Society or the Australian Social Worker Association).

Departments can however be at the forefront of using more internet-based technology for both education and support – both pre and post-adoption, thereby providing much needed resources to adoptive families in regional areas. For example I provide clinical supervision to young graduate clinicians in remote areas such as Burke and Coonabarabran via Skype, and this resource can be readily incorporated into service delivery now.

#### GOALS GOING FORWARD:

Post-Adoption support needs to be more than just education.

Services need to be 'pushed forward' rather than waiting for the adoption community to demand them. This is especially critical for adoptees as they progress through adolescence into adulthood. All Depts – state and commonwealth need to be promoting a '*culture of information sharing*', rather than information possession.

Current technology of web-based learning and support options needs to be embraced and developed.

But above all, State Depts, and the Cwth are all signatories to the Agreement on the Implementation of the Hague Convention. All Depts are have signed this Agreement indicating they will/do

provide Post-Adoption services. Now is the time to demonstrate that.

Hence core recommendations that arise from this review –

By the next Working Group meeting a state-by-state information matrix needs to be developed for review regarding:

- Fees charged for each stage of the adoptive process
- Assessment and approval procedures
- Current education curricula including format and media
- Lists of current Post-adoption services currently on offer, compared against data from the survey of the adoption community as to what should be offered.
- Immediate projects to identify established training programs for professionals and for adoptive applicants

Time hasn't allowed me to cover many other issues NICAAG would like to see progressed, but the Working Group will soon need to confront the issue of State-by-State versus National quotas and the possibility of a National waiting list.

There will also need to be some form of accreditation process for clinicians to conduct assessments – again with some form of national standard. If that is the case, then it opens the door to applicants being able to access clinicians across state borders.

The entire area of “Special Needs” children needs detailed review and reconceptualisation. China for example just considers ‘age’ and ‘disabilities’ as being the only two explicitly state criteria for special needs classification. Yet in a major study by Tan et al (2007)<sup>xix</sup>, they found no differences between special needs and non-special needs children across a variety of measures. In addition, they concluded, that the nature of the disabilities associated with the SN classification for many of the children may not pose significant challenges to optimal development – yet this is an issue rarely mentioned with ‘Special Needs’.

I have covered the issue of consultation, but I wish to close with a request from NICAAG to include a representative as a standing member of this Working Group going forward.

Finally, on behalf of NICAAG I thank-you for the opportunity of this sessional invite and we look forward to participating more fully in the next meeting.

\*\*\*\*\*

- <sup>i</sup> Berry, Marianne. (1997) Adoption Disruption. In R.J. Avery, Ed., **Adoption Policy and Special Needs Children** (pp. 77-106). Westport, CT: Auburn House.
- <sup>ii</sup> McRoy, R.G. (1999). **Special Needs Adoptions: Practice Issues**. New York: Garland Publishing, Inc.
- <sup>iii</sup> Barth, R.P., Gibbs, D.A., and Siebenaler, K. (2002). **Assessing the Field of Post-Adoption Service: Family Needs, Program Models and Evaluation Issues**, available at <http://aspe.hhs.gov/hsp/postadoption01/case-study/>.
- <sup>iv</sup> Brodzinsky, D.M. (2008) **Adoptive Parent Preparation Project Phase I: Meeting the Mental Health and Developmental Needs of Adopted Children**. New York NY: Evan B. Donaldson Adoption Institute
- <sup>v</sup> Barth, R.P. & Miller, J.M. (2001). Building Effective Post-Adoption Services: What is the Empirical Foundation? **Family Relations, Vol. 49, No. 4** (pp. 447-455).
- <sup>vi</sup> Watson, K. W. (1992). Providing services after adoption. **Public Welfare, 50**, 5–13.
- <sup>vii</sup> Commonwealth of Kentucky (1993). **Strategic plan for post legal adoption services in Kentucky**. Frankfort, KY:Department of Social Services.
- <sup>viii</sup> Gibbs, D., Siebenaler, K., & Barth, R.P. (2002) **Assessing the Field of Post-Adoption Services: Family Needs, Program Models, and Evaluation Issues**. U.S. Department of Health and Human Services
- <sup>ix</sup> Phillips, R. (1990). Post-adoption services—the view of adopters. **Early Child Development and Care, 59**, 21–27.
- <sup>x</sup> Walsh, J. A. (1991). **A parent survey: Assessing post adoption services**. Springfield: Illinois Department of Children and Family Services.
- <sup>xi</sup> Kramer, L. E., & Houston, D. (1998). Supporting families as they adopt children with special Needs. **Family Relations, 47**, 423–432.
- <sup>xii</sup> McDonald, T. P., Propp, J. R., & Murphy, K. C. (2001). The postadoption experience: Child, parent, and family predictors of family adjustment to adoption. **Child Welfare, 80**, 71–95.
- <sup>xiii</sup> Festinger, T. (2001). **After adoption: A study of placement stability and parents' service needs**. New York: New York City Administration for Children's Services.
- <sup>xiv</sup> Brooks, D., Allen, J., & Barth, R. P. (2002). Adoption services use, helpfulness, and need: A comparison of public and private agency and independent adoptive families. **Children and Youth Services Review, 24**, 79–104

---

<sup>xv</sup> Harris, P. (2002). A study of post-adoption services delivered by the West Midlands Post Adoption Service. Report available by contacting [wmpasemail@aol.com](mailto:wmpasemail@aol.com)

<sup>xvi</sup> Smith, S. L., Howard, J. A., & Monroe, A. D. (1998). An analysis of child behavior problems in adoptions in difficulty. **Journal of Social Service Research**, **24**, 61–84

<sup>xvii</sup> Leung, P., & Erich, S. (2002). Family functioning of adoptive children with special needs: Implications of familial supports and child characteristics. **Children and Youth Services Review**, **24**, 799–816

<sup>xviii</sup> Dhimi, M.K., Mandel, D.R., Sothmann, K. (2007) An evaluation of post-adoption services. **Children and Youth Services Review**, **29**, 162-179.

<sup>xix</sup> Tan, T.X., Marfo, K., Dedrick, R.F. (2007) Special needs adoption from China: Exploring child-level indicators, adoptive family characteristics, and correlates of behavioural adjustment. **Children and Youth Services Review**, **29**, 1269-1285.

\*\*\*\*\*