

Helping birth relatives and supporting contact after adoption

A survey of provision in England and Wales

This study is part of the Adoption Research Initiative (ARi), a group of major research projects commissioned by the former Department for Education and Skills (DfES). The dissemination of key messages from the initiative was funded by the Department for Education.

The survey was carried out by Dr. Elsbeth Neil and her colleagues at the University of East Anglia and Dr. Paula Lorgelly now at the University of Monash, Australia¹. Data was gathered during 2005. This survey is the first part of a larger study. Two further studies have examined the issues of helping birth relatives and supporting contact in more depth².

This summary is drawn from a longer research brief and the full report of the study³. It reviews the methodology and findings and highlights key messages from the research. Information about other resources from the three linked studies is available at the [ARi website](#).

1. Background to the survey

The Adoption and Children Act 2002 and statutory guidance required significant developments in the provision of birth relative and contact support services in England and Wales. An Adoption Support Grant was provided for local authorities (LAs) to fund the new services. The main changes were:

- All LAs must appoint an adoption support services adviser (ASSA), to advise on the provision of services.
- Birth families must have access to a range of support services such as counselling, advice and information, both before and after adoption.

- Birth parents are entitled to a support worker independent of the child's social worker.
- Adopters, adopted children and birth relatives have the right to request an assessment of need regarding support services, including contact arrangements.
- LAs must maintain services to assist contact arrangements.

2. What was the purpose of the survey?

This survey was undertaken soon after the implementation of the 2002 Act. Its purpose was to identify:

- How the new requirement for adoption agencies to appoint an ASSA had been implemented.
- The range of birth relative and contact support services being offered by LA and voluntary adoption agencies (VAAs) and by adoption support agencies across England and Wales.
- Whether or not these services were being taken up.
- The steps being taken to reach out to birth relatives, particularly those of minority ethnicity or those who face additional challenges related to their learning difficulties or physical or mental health.
- The range of inter-agency working practices where services were being commissioned by LAs.
- The extent to which adoption agencies evaluated the effectiveness of the services they provided.

3. How was the survey done?

- **Postal questionnaires** were sent to all adoption and adoption support agencies in England and Wales. These explored the role of the ASSA, and the provision of birth relative and contact support services. A total of 135 questionnaires was returned, giving a response rate of 63%.

¹ The full research team was Dr. Elsbeth Neil, Dr. Clive Sellick, Julie Young, Nick Healy, University of East Anglia and Dr. Paula Lorgelly, University of Glasgow

² See [Summary 9](#) and [Summary 10](#) in this series

³ This summary was drafted by Mary Beek, Professional Adviser to the Adoption Policy team, Department for Education, in consultation with the research team.

- **Follow-up telephone interviews** with ASSAs or other dedicated adoption support staff were conducted in 60 agencies. Each interview was individually tailored according to the agency's returned questionnaire. This enabled the researchers to develop and clarify areas of special interest. Ten of the interviews had a particular focus on economic costing and contractual arrangements in the purchase of services.
- **Two focus groups** were held, involving adoption staff from a variety of agencies and across sectors. These provided further opportunities for information gathering and for the researchers to hear a range of views on service provision and delivery.

4. What were the key findings?

The Adoption Support Services Adviser

The survey found that the management level at which the ASSA post was held varied across agencies as follows:

- Director level (usually second tier assistant director level). This was the arrangement for the majority (58%) of the LAs which responded.
- First line manager level (usually the adoption or post-adoption team manager). This was the arrangement in 27% of LAs.
- Social worker level (adoption senior practitioner or social worker). This was the arrangement in 11% of LAs.
- In two LAs the ASSA post was shared between two people at two different levels of management.

The more senior the ASSA, the smaller the proportion of his or her time was spent discharging ASSA responsibilities. At whatever level the ASSA post was assigned, in reality the responsibilities of the ASSA were discharged at three different levels, with the ASSA delegating downwards or referring upwards as required. Strategic responsibilities such as planning and commissioning services and determining agency policy tended to be undertaken by senior managers. Service allocation, staff management, writing procedures and budgeting tended to be undertaken by front line managers. Direct service delivery was mainly undertaken by practitioners.

Services supporting birth relatives

- The take up of services was low. Although few agencies were able to provide precise figures, most reported a low take up of services by birth relatives. This was felt to be due partly to the conflict of interest between the LA and the birth family and the resulting mistrust for

birth families. Other reasons were to do with additional difficulties such as mental health problems, learning difficulties and substance misuse which affected many birth relatives.

- Linking birth relative support with contact support appeared successful in promoting uptake of the former. For example, contact support staff across sectors:
 - Offered to help birth relatives with writing contact letters and cards.
 - Used the forwarding of contact letters to remind birth relatives that support services were available.
 - Encouraged those using a letterbox service to meet support service staff or others using support services.
 - Publicised support services through workers who were supervising direct contact.
- The timing of when services were offered was variable. Some agencies reported greater success in engaging birth relatives after an adoption order had been made, while others emphasised the importance of getting involved early to support people through the process.
- Referral routes to support services varied considerably. Some birth relatives were referred by their social worker; others referred themselves after receiving information about the service. In some agencies, key staff such as Adoption Panel administrators referred all eligible families to service providers. In others, adoption social workers publicised services through training and direct approaches to children's social workers. Many support agencies welcomed referrals from a variety of sources including solicitors, children's guardians, family centre and adult care workers.
- Few specialist services for birth relatives were provided. Those for black and minority ethnicity service users generally centred on language issues (e.g. the provision of an interpreter). Only a few agencies reported that they had developed special services to take account of additional needs such as learning difficulties or mental health problems. However, some innovative approaches were described by these agencies, and others said they would endeavour to respond to individual cases.
- There was a 'Postcode lottery' of service provision. Whilst all local authorities provided or commissioned some services for birth relatives, there were substantial

differences in what was available in different parts of the country. The services most frequently available were support for contact (provided by 95% of agencies). Those least likely to be offered were advocacy or therapy (provided by 62% and 58% of agencies).

- The evaluation of services was inconsistent. The majority (69%) of agencies reported some evaluation, but in many cases this was informal (e.g. discussions in team meetings, staff supervision). It also tended to be quantitative (e.g. logging referral rates) as opposed to qualitative (e.g. asking birth relatives whether or not services were helpful). Only a third of agencies which evaluated their services sought feedback directly from services users, though a greater number planned to do so in future.
- Inter-agency arrangements were used variably. Seventy percent of local authorities had arrangements with voluntary adoption agencies or adoption support agencies to supplement their birth relative support provision. Other local authorities spot-purchased services or were part of consortia arrangements.
- The independent sector role was somewhat insecure. In some cases low service use led to LAs reviewing or withdrawing from contractual arrangements as they felt they were paying for services that few people used. For some independent sector providers, this created instability and financial uncertainty.

Services Supporting Contact

- The survey found that supporting letter box contact was the predominant activity. On average, agencies were supporting 15 letterbox arrangements for every one face-to-face arrangement. Many agencies had sophisticated systems for the referral, operation and review of letterbox contact. In contrast, there were few systems in place for the administration and review of face to face contact arrangements.
- The questionnaire included a case study of a complex face to face contact arrangement, and respondents were asked to outline how they might respond. Although almost all agencies said they would directly support the child and adoptive parents, only some said they would support the birth mother, and a minority of these suggested joint work with the birth and adoptive family.

- The role that independent support services could play in helping birth parents with contact issues was not always recognised, suggesting there is greater scope for links between these two areas of service provision.

5. Limitations and strengths of the research

Limitations

- The survey reflects practices in 2005 when many agencies were planning, developing or reviewing their adoption support services. The findings only give a 'snapshot' of what was happening during the study time period and may not reflect current practice.
- Many agencies could not respond in detail to some of the questions (especially about how many people were using various services), as detailed records were not kept or not easily accessible to the people completing the questionnaires. As a result the research only provides broad impressions about levels of service take up.
- The survey describes service provision, but does not evaluate the quality of services. Later stages of this project will do so.

Strengths

- This study was the first to investigate and map birth relative and contact support services and it continues to be highly relevant to the ongoing development of these services.
- The proposal for the study was independently and anonymously peer-reviewed before the work was commissioned.
- The report was independently and anonymously peer-reviewed before publication.
- The survey information was gathered from a wide range of sources and through different methods.
- The project used a highly experienced research team with significant experience of researching adoption. All data was cross checked within the research team.

Key messages

The following suggestions are drawn from the findings of the survey and include some practice examples which were provided by respondents.

Supporting birth relatives

- Ensure that services to support birth relatives are promoted as being non-judgemental and independent from Children's Services and that they offer a flexible range of help, available at different points in time through the adoption process.
- Establish and promote multiple referral routes to services and ensure that there is a swift and personal response.
- Take account of the specific needs of birth relatives who are from minority ethnic groups. Ensure that all publicity and other materials are culturally sensitive and that all who work in the support service are alert to issues of ethnicity, culture and religion. Offer translation and interpreting services when needed.
- Take account of the specific needs of birth relatives with additional needs such as mental health problems, drug or alcohol problems, or learning difficulties. Ensure that services are as accessible as possible to these people and sensitive to their particular requirements.
- Identify gaps or shortfalls in services through discussions with other professionals who work with birth relatives. Join adoption support services with other specialist services to create packages of support.

Supporting contact

- Ensure that adopters are fully informed regarding the birth relatives with whom they are to have contact and the rationale for the arrangements that have been proposed. In one agency, the family finder for the child remained involved with the adoptive family for 12 months after the adoption order because they could provide the adopters with helpful additional information about past events, the parties and the reasons for direct contact.
- Promote positive contact by ensuring that birth relatives' support needs are being met. For example, some agencies in the survey reported that they routinely used correspondence connected with contact support services to promote birth relative support services.

- Review contact arrangements regularly. For example, an annual letter might be written to all parties where there is face-to-face contact to check whether or not arrangements are satisfactory. If there are difficulties, a meeting might be held with all involved to discuss, mediate, and where necessary revise the arrangements.
- Actively promote collaboration and mutual understanding between adult parties. For example, one independent agency said they would facilitate meetings between the adoptive parents and birth mother to build mutual understanding and collaboration, arguing that "...adopted children can relax within contact arrangements if there is mutual respect...between the birth and adopted adults...they need to trust and understand one another".

Generally

- Ensure that innovative and successful practice in all areas of adoption support is shared within and between adoption consortia.
- Consider whether some services might be shared across agencies or purchased jointly.
- Set up a simple but effective system for evaluating support services. This could include gathering reliable data on who is referred to services or offered services and whether or not services are taken up. Feedback from service users and providers is important and could be routinely gathered. An evaluation system helps to identify areas of need, services that are especially valued and might be developed further, and also services that are less valued and might be improved or dispensed with. Resources can be targeted accordingly.
- Make evaluation reports widely available within and across adoption consortia so that agencies can learn from each other about innovations, successes and failures.