

Support for
adoptive parents

SUMMARY OF FINDINGS FROM A SYSTEMATIC REVIEW

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INTRODUCTION

This briefing outlines findings relating to adoption from a systematic review which summarised evidence on the effectiveness of interventions for foster and adoptive parents.

All children should be able to live in family environments that enable consistent, sensitive caregiving. Adoption is one option for providing long-term family care. Adoption is a permanent legal process through which adoptive parents assume full parental rights and responsibilities for a child or young person.

Adoptive parents play a critical role in providing stability and care to children who may have experienced significant adversity. Being an adoptive parent can be uniquely complex, requiring parents to respond to a range of challenges such as attachment difficulties, behavioural dysregulation, and the developmental effects of early harm.

Alongside their children's needs, adoptive parents may be navigating their own experiences of grief, loss and trauma, which can intersect with their early experiences of parenting. Adoptive families may also navigate complex family relationships, requiring parents to sensitively support children's identity and wellbeing, while managing practical, relational, and sometimes conflicting, needs. At the same time, they are also parenting within wider social care systems characterised by resource constraints, workforce pressures, and fragmented service provision. These broader factors shape the support offered to care-experienced children and their families.¹

Adopters speak about generic parenting courses not meeting their needs, highlighting the importance of tailored, evidence-based support for adoptive parents to enhance their knowledge, skills and capacity to care for their children.

The current policy landscape

In recent years, there has been increased focus on the ongoing support needs of adopted children and their families, reflecting growing understanding of the lasting impacts of early experiences. This comes at a time when rates of adoption have been declining.²

The Adoption and Special Guardianship Support Fund (ASGSF)³ provides funds to local authorities and Regional Adoption Agencies (RAAs) to pay for essential therapeutic services for eligible families including adoptive families, or where special guardianship or child arrangement orders are in place.

In February 2026, the Department for Education (DfE) published a consultation⁴ open to adoptees, those in kinship care, families and professionals, seeking views on a more

1 MacDonald, S., Trubey, R., Noyes, J., Vinnicombe, S., Morgan, H.E., Willis, S., Boffey, M., Melendez-Torres, G., Robling, M. and Wooders, C. (2024). 'Mental health and wellbeing interventions for care-experienced children and young people: systematic review and synthesis of process evaluations', *Children and Youth Services Review*, 156, pp. 107266. doi: 10.1016/j.chidyouth.2023.107266

2 Department for Education. (2025). *Children looked after in England including adoptions*. London: Department for Education. Available at: <https://www.gov.uk/government/statistics/children-looked-after-in-england-including-adoption-2024-to-2025>

3 See: <https://www.gov.uk/guidance/adoption-support-fund-asf#how-families-access-asgsf-support>

4 See: <https://www.gov.uk/government/consultations/adoption-support-that-works-for-alc>

responsive, holistic, and evidence-based system of adoption support. This includes proposed changes to the ASGSF.

About this study

We commissioned the Centre for Evidence and Implementation (CEI), Monash University, and Cardiff University to carry out the systematic review. It summarised existing evidence on support for adoptive parents of a child or young person aged 0-18 years old adopted from care, as well as support for foster carers.⁵ Adoptive families of children adopted directly⁶ or internationally⁷ were out of scope for this review.

The review focused on interventions involving direct participation of adoptive parents (in any setting and any format) but focused on both parent and child outcomes. Interventions that only involved children and young people themselves were out of scope.⁸ Most of the studies identified in the review included both foster carers⁹ and adoptive parents as participants.

The findings in this briefing – and the systematic review¹⁰ it draws from – focus on one specific aspect of adoption support: the use of evidence-based interventions designed to support adoptive parents’ skills, confidence, and wellbeing, so that they can provide the best possible care to their child(ren). It does not cover other components of support that adopted children may need to thrive, such as therapeutic support for children themselves.

Findings from the systematic review will inform a Practice Guide on support for Adoptive Parents due to be published in 2027. The findings set out in this briefing may be revised in the final Guide following an updated review of the evidence prior to its publication.

Equality, diversity, inclusion and equity (EDIE)

As part of Foundations’ commitment to promoting equality, diversity, inclusion and equity in the work that we do, our systematic review intended to examine the effectiveness, acceptability and experiences of support for different populations of adoptive parents and adopted children and young people, particularly those from marginalised groups.

Despite our systematic review actively searching for evidence relating to adoptive families with diverse characteristics, the existing evidence is extremely limited in diversity of participants. In the studies that our systematic review identified, most adult participants identified as White, female, and heterosexual, and most adoptive parents had completed at least some college or higher education.

5 Findings relating to foster Carers are reflected in the Foster Care Practice Guide: <https://foundations.org.uk/toolkit/practice-guides/foster-care>

6 Direct adoption refers to an adoption process between birth parent(s) and adoptive parent(s) without an intermediary agency.

7 International adoption is when a child born in one country is legally adopted by a parent or parents resident in a different country.

8 A key reason for focusing on direct support to adoptive parents was to avoid duplication of existing guidelines – including interventions delivered directly to children adopted from care would replicate several existing guidelines.

9 Findings relating to foster carers are reflected in the Foster Care Practice Guide: <https://foundations.org.uk/toolkit/practice-guides/foster-care>

10 See: <https://foundations.org.uk/our-work/publications/equity-focused-systematic-review-interventions-foster-carers-adoptive-parents>

There were also inconsistencies in reporting of children's characteristics. This hindered the review's ability to identify what works for different groups of adoptive parents, children, young people, and families. It also limits the generalisability of the review's findings and identifies significant evidence gaps. Areas for future research are highlighted below.

SUMMARY OF FINDINGS

We have grouped findings into the following categories:

- **Qualitative findings:** facilitating engagement, types of support and perceived benefits
- **Quantitative findings:** common elements of effective interventions.

Qualitative findings

The findings in the following sections of this briefing are underpinned by data from qualitative and mixed-methods studies which aimed to understand the enablers of and barriers to implementing interventions, alongside the perspectives and experiences of adoptive parents. These qualitative findings are informed by nine studies of interventions for adoptive parents. All were conducted in the UK.

The confidence in each finding was rated using the GRADE-CERQual approach¹¹ which systematically assesses our confidence in each of the finding statements from the qualitative evidence. It considers the following components: methodological limitations; coherence; adequacy of data; and relevance. The findings were rated according to the criteria:

- **High confidence:** It is highly likely that the review finding is a reasonable representation of the topic being studied
- **Moderate confidence:** It is likely that the review finding is a reasonable representation of the topic being studied
- **Low confidence:** It is possible that the review finding is a reasonable representation of the topic being studied
- **Very low confidence:** It is not clear whether the review finding is a reasonable representation of the topic being studied.

1. Facilitating engagement in support

The following factors can enable parenting support for adoptive families.

1.1 Practitioner warmth and genuine passion are vital to building trusting relationships, fostering engagement, and making participants feel valued (8 studies, high confidence)

11 Lewin, S., Booth, A., Glenton, C., Munthe-Kaas, H., Rashidian, A., Wainwright, M., Bohren, M.A., Tunçalp, Ö., Colvin, C.J., Garside, R. and Carlsen, B. (2018). 'Applying GRADE-CERQual to qualitative evidence synthesis findings: introduction to the series', *Implementation Science*, 13(Suppl 1), pp.2. doi: [10.1186/s13012-017-0688-3](https://doi.org/10.1186/s13012-017-0688-3)

Across studies, facilitator characteristics were central to the overall experience and usefulness of programmes. Facilitator traits of warmth and authentic passion were reported as enabling factors in adoptive parents' positive experiences of interventions.

1.2 Providing a space to focus on parents' needs was welcomed and seen as useful (6 studies, high confidence)

Adoptive parents expressed that where interventions provided parent-focused support for their wellbeing, they were better able to respond to and meet their child's needs. Providing space for parents to share how they were feeling or coping was felt to give adoptive parents a much needed feeling of being seen, valued, and supported. It provided a therapeutic outlet for their emotions that they may not often experience. This approach links to the perceived benefit of understanding the need for self-care outlined below.

1.3 Parents have limited time and want to use it wisely; interventions need to be perceived as relevant and effective to maintain engagement (8 studies, moderate confidence)

Findings suggest that participants need to see and feel tangible benefits after joining an intervention. This could be through enjoying the time or seeing tangible change in themselves or their child to justify the time commitment.

1.4 Clear, accessible information helps adoptive parents to engage with support (1 study, low confidence)

Findings show that clear communication of an intervention's aims and activities during recruitment and referrals facilitate engagement by aligning expected and actual intervention content and delivery structure. Accurate information from the delivery organisation to referrers, and subsequently to participants, supports meaningful understanding of whether an intervention is suitable for each family. This can help to avoid families feeling like an intervention is not right for them after they have started engaging with support.

1.5 The assumption that primary caregivers are female can be a barrier to male parents, single women, and same-sex couples accessing support (2 studies, high confidence)

Across the included qualitative studies, most participating parents were women. Very few studies directly commented on the reasons for and consequences of this imbalance for the content of interventions, and the experiences of participants. One study found that adoptive mothers were exclusively referenced as the main caregiver and that it was assumed all women had a partner. These patterns point to the need for interventions to be recruited, referred to, and delivered in ways that actively reduce barriers for all care givers, ensuring assumptions are not made about family structures, and that fathers and other significant caregivers are supported to access and engage meaningfully with support.

2. Types of support

Adoptive parents valued specific types of parenting support. Different modes and models of interventions can be used to meet families' needs and preferences.

2.1 Facilitated peer support provides parents with a much-needed space for emotional support, reciprocal learning, and feeling heard and seen (6 studies, high confidence)

Both organic and intentional peer support provided through group interventions was repeatedly identified as a driver of positive experiences and outcomes for adoptive parents. Parents reported that being around others who had similar experiences created a safe space where they could discuss and reflect, speak openly about their situations, and feel heard and understood. Parents reported that the chance to connect with peers helped them to feel less isolated, eased feelings of guilt and shame, and provided a valuable source of emotional support.

2.2 Adoptive parents value interventions that are structured but have room for flexibility, enabling facilitators to be responsive to individual needs (6 studies, high confidence)

While adoptive parents appreciated structured, evidence-based learning, they highlighted that programmes and practitioners having the flexibility to tailor content to their or their families' specific needs was important. Tailored content was considered more engaging and relevant. Adoptive parents also spoke about generic parenting courses not meeting their needs, highlighting the importance of tailored support for families' specific circumstances.

2.3 Adoptive parents value learning strategies that integrate theory and practice (6 studies, low confidence)

Adoptive parents reported valuing intervention content where theory was integrated with practice and provided them with applied strategies. Where interventions integrated a learning–practice–feedback cycle, this was largely well received and considered useful by adoptive parents.

2.4 Adoptive parents valued interventions that included multi-agency support and provided a network around the child (2 studies, low confidence)

Some adoptive parents indicated that support for the wider family and system around them is also beneficial. Including others in interventions better equips a wider network to support a child and reduces the pressure and over reliance on adoptive parents. This type of support could include short breaks for the parents, advice, and practical support with issues such as accessing payments and benefits.

3. Perceived benefits of support

Adoptive parents most frequently reported benefits related to three areas:

3.1. Understanding and having a space for self-care (3 studies, moderate)

A common outcome reported by adoptive parents who participated in interventions was greater awareness of the value of taking care of their own wellbeing and learning practical ways to practise self-care. Adoptive parents reported appreciating having a space to focus on themselves within their often busy, child-focused schedules, and having access to emotional support.

Importantly, some adoptive parents emphasised that being supported to implement strategies to improve wellbeing, through practical advice and support, had led to real changes in their emotional wellbeing.

3.2. Perceived improvements in emotional regulation and ability to engage in reflection before responding to children (5 studies, high)

Adoptive parents reported that interventions often provided them with tools that helped to reduce reactivity, ‘take a step back’, and think before engaging with the child, improving their ability to respond sensitively. Findings show that adoptive parents drew a direct line between their ability to pause and reflect, and their capacity to provide responsive, sensitive caregiving. As parents’ ability to pause and reflect improved, they reported feeling more able to respond patiently to behaviours that challenge.¹²

3.3. Perceived increases in parental confidence and empowerment (6 studies, high)

Adoptive parents widely reported increased confidence in their caregiving abilities after receiving an intervention. This increased confidence reportedly instilled hope that adoptive parents would be better able to cope in future, despite the inevitable challenges they would face. This sense of hope was described as stemming from the self-belief that participants were equipped to deal with challenges following the intervention.

¹² Behaviours that challenge (externalising behaviours) refer to behaviours which manifest in a child or young person’s outward behaviour, such as aggression, defiance or behaviour considered anti-social.

Quantitative findings: Common elements of effective interventions

Included studies

The systematic review identified 25 impact evaluations¹³ of interventions delivered to adoptive parents. These were randomised controlled trials (RCTs) and quasi-experimental studies that evaluated the effectiveness of interventions for adoptive parents. There was variation in the reported findings on outcomes, with many studies finding mixed or no effects. Most of the studies (76%) were assessed as being high risk and have not been included in this briefing. This is because, if a study is rated as having high risk of bias, issues have been identified with its methods or the way it was conducted, which are likely to distort the results. This means that we cannot have confidence in the study's findings.

This left four robust impact evaluations, assessed to have a low or moderate risk of bias, which found statistically significant positive effects of five different interventions. Positive effects were found on child behaviour, child sleep, parent-child emotional attachment, parenting stress, parental empathy, and satisfaction with parenting. These interventions are outlined [in the appendix](#).

There will be other interventions not included in this briefing that are currently delivered locally and accessed by adoptive families. These interventions may not have been identified by our systematic review due to a lack of robust evaluation. This does not mean they are ineffective; rather, we currently lack robust evidence about their impact on child or parent outcomes.

Common elements of effective interventions

Our systematic review identified that all of the identified interventions included **psychoeducation**. Psychoeducation provides information related to mental health, emotional wellbeing, and psychological processes to support understanding. This may include child development, parent-child interactions, parenting styles, the effects of abuse and trauma, and how parental wellbeing influences children. All five programmes also included core components focused on **relationship enhancement/promoting parental sensitivity**. For example, practice focused on parent-child play and communication, observation, and child-led interactions.

This could indicate that psychoeducation and relationship enhancement/promoting parental sensitivity are important components of interventions offered to adoptive parents, and may be particularly relevant to child behaviour – where three interventions were shown to be effective.

However, further research is needed to examine this association. Other components that were present in some but not all five of the interventions were positive reinforcement, proactive parenting, skills for caregivers themselves, and skills caregivers teach/facilitate with their children.

¹³ For an impact evaluation to be included in our Practice Guides, it must be a:

- Randomised controlled trial or quasi-experimental study
- Conducted in the UK or comparable high-income country
- Assessed to have a low or moderate risk of bias
- Found a statistically significant positive effect of the intervention.

Transferability of the identified interventions

Three of the four studies that met our criteria for inclusion took place in the United States (US) and involved US-based programmes. The fourth study was an evaluation of two programmes in the UK. This means that the transferability of the US-based programmes and the adaptations that would be needed for implementation within the UK are currently unknown and untested.

Although the adoption landscapes differ between the US and the UK, there are many comparable challenges experienced by families within these two systems. Interventions for families often target universal mechanisms of change, such as improving parent-child relationships. These are grounded in well-established psychological and social science principles that are not country specific. Many programmes are intentionally developed to be adaptable across settings, though the extent to which this is the case internationally is unknown. This means that US evidence can offer meaningful insights for UK practice but contextual differences and transferability of interventions should always be given careful consideration. Adaptations are often needed. Any intervention adapted to the UK should be tested, monitored and evaluated to ensure that:

- It remains acceptable to adoptive parents and the broader systems in the UK
- Core components are implemented well enough to meet fidelity standards
- It remains effective in achieving its intended outcomes.

AREAS OF FUTURE FOCUS

Our systematic review highlights three evidence gaps/areas where future research should be prioritised.

1. Robust impact evaluations of UK-based interventions for adoptive parents

A key finding of the review is a lack of robust evaluation of interventions designed for adoptive parents in the UK. Further research is needed to understand the effectiveness of interventions that support adoptive parents in the UK context.

2. Robust impact evaluations of interventions for adoptive parents of older children

We also found a lack of robust evidence on interventions for adoptive parents of older children and young people (aged 10 and older) who may have different support needs. This is another important priority for future research.

3. Understanding how interventions work for different groups of adoptive families, particularly those from minoritised racial and cultural backgrounds

The systematic review findings highlight an evidence gap in understanding of what works for different groups of adoptive families. Studies of interventions for adoptive parents often included foster carers, highlighting a need for more specific research with adoptive families.

Few papers in our review discussed the ethnicity of participants in relation to the recruitment of adoptive parents and their participation in interventions. However, even when studies reported that interventions were delivered to adoptive parents from minoritised ethnic groups and families with lower socioeconomic status, studies did not differentiate findings. Studies did not include reflection on how those from minoritised or marginalised groups experienced systematic biases and inequalities that affect how they access and experience services.

Further research is therefore required to explore outcomes for diverse populations of adoptive families, with demographic data collected and reported, and sub-group analysis undertaken. This would contribute to improved understanding of what works for whom, and how to drive equity in outcomes for adopted children and their families.

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For a full list of references of included studies, see the [systematic review](#).

APPENDIX

Interventions that demonstrated effectiveness

Two home-based parenting programmes

- One programme used a cognitive behavioural approach aiming to promote positive behaviour through positive parenting strategies. One used an educational approach focused on parents' understanding of child behaviour, supporting them to respond
 - Trained social workers delivered 10 sessions to adoptive parents of children (between 3 to 8 years old) reported to have high behavioural needs by their parent and/or social worker.
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Child-parent relationship therapy (CPRT)

- A facilitator-led therapeutic training programme delivered in person to small groups of adoptive parents of a child aged between 2.5 to 9 years old
 - Parents self-referred for concerns related to attachment, behaviour and stress
 - Over 10 weekly two-hour sessions, parents entered the child's world through play. They were supported to better understand their child's experiences, emotions and needs, and to respond with empathy and attunement
 - The intervention improved behavioural challenges, parenting stress and empathy.
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Sleep and adjustment in foster environments for toddlers and pre-schoolers (SAFE-T)

- Three therapist-delivered telehealth sessions with adoptive parents and foster carers of a child aged 2 to 5 years old
 - Content focused on the child's history and sleep difficulties, developmentally informed sleep education, and implementing the 4Cs: **C**alming evening environments; **C**onsistent sleep schedules; **C**ues that signal sleep and close **C**onnection at bedtime
 - The intervention improved child internalising behaviour, sleep disturbance, and sleep duration
 - However, the majority (68%) of participants were foster carers, compared to 32% who were adoptive parents. Results were not separated for the two groups.
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Emotional attachment and emotional availability (EA2)

- A six-week online group delivered to 6 to 10 adoptive parents and their children aged 1.5 to 5 years old. All parents reported that their child had developmental or intellectual, emotional, behavioural and/or attachment-related challenges

- The group, involving a facilitator and supervisor, focused on strengthening the emotional quality of parent–child relationships. It included information on emotional availability and attachment, reflection and group discussions, video instructions and examples, as well as individualised strength-based video feedback to parents
- The intervention improved child behavioural challenges and parent–child observed emotional attachment.

