

Who is ACE?

Adoption Central England (ACE) is the regional adoption agency for:

- Coventry City Council
- Solihull Metropolitan Borough Council
- Herefordshire Council
- Warwickshire County Council
- Worcestershire Children First

How does ACE work?

ACE has adopted Dyadic Developmental Practice (DDP) to support families and children. ACE ensures that DDP principles are embedded and threaded throughout all levels of the service and the adoption journey.

DDP comes from a model of therapy that helps children who have experienced relational trauma to feel safe, to build emotional connections with parents and to benefit from and enjoy new relationship experiences. This is crucial for children's development.

What does this look like in practice?

When families and children are having difficulties, it can be tempting for professionals to rush in with advice, reassurance, to make therapy referrals. Using DDP, ACE will take a different approach. The attitude of PACE (playfulness, acceptance, curiosity, and empathy) allows us to understand the adoptive parents' experiences more deeply. Taking time to connect helps parents feel safe enough to talk honestly about their concerns. ACE workers adopt the same approach in meeting a child or young person.

Whilst slowing down can feel counterintuitive at times of stress, PACE helps parents to feel regulated and supported allowing them to make sense of the issues. Parents tell us PACE helps them regain confidence in themselves and maintain empathy for their children.

Sometimes, this **is** the ACE intervention. It can help ACE work towards a more productive and meaningful plan of support with the family. You will hear ACE workers refer to this as “**slowing down to get there faster**” and ACE will sometimes invite the professional network to join this approach. A DDP approach to engaging with complexity doesn’t preclude urgent action when required and in fact it can support conversations about concerns, challenge or as part of addressing safeguarding.

Why does ACE take this approach, rather than being solution focused?

It is rare that complex problems have simple solutions or obvious fixes, so DDP helps us to purposefully engage with complexity and to hold families through challenges. We are also modelling the sort of therapeutic approach we want to help parents to provide for their children.

When would we refer a child for therapy?

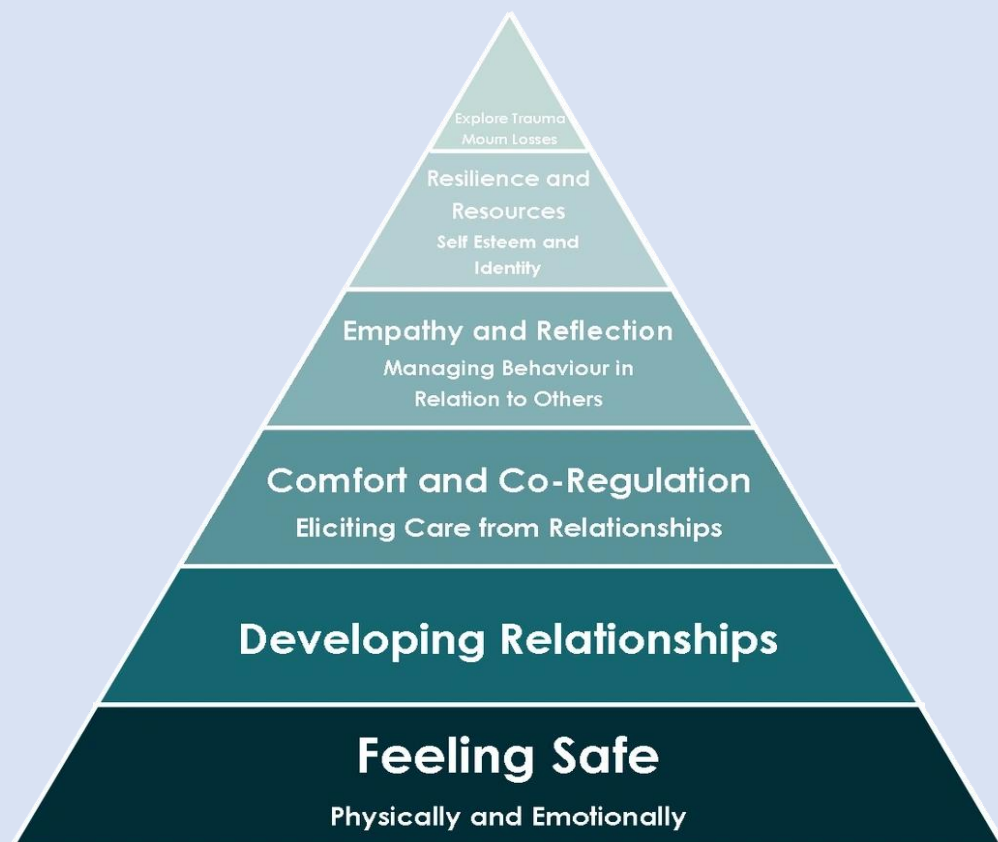
Because DDP focusses on strengthening children’s relationships with the people that matter most in their lives, the help through ACE might involve stand-alone parenting or network input, without the child being referred for therapy by themselves. There are lots of factors taken into consideration when thinking about therapy for a child. Individual therapy sessions may not be the most helpful way of supporting children with attachment and trauma related difficulties.

The following underpinning knowledge base and factors are taken into consideration when deciding whether therapy would be helpful...

- Understanding how trauma and relationships impact on a child’s developing body and brain - this helps the service to think about effective therapies and the order of interventions. Children may not be ready for therapy or life story

work which requires them to be regulated enough to access the thoughtful, reflective, or logical parts of their brain. Instead, we might focus foremost on helping parents support children's sensory or bodily regulation first, building from there.

- Golding's Pyramid of Need (2015) also helps us explore therapeutic interventions with children and families (see below). Parents and children can be at different levels of the pyramid at once and will move up and down according to what is happening in their lives. This helps us remember the importance of physical and emotional safety/stability in providing a foundation for therapy and the significance of support that is aimed at developing and strengthening relationships for children who have experienced trauma. Whilst flexibility is needed, moving too quickly to therapy involving, or for a child, when there is insufficient safety to support and hold them through this process can be more destabilising than helpful. DDP interventions therefore often start with parent-only sessions, building from there.



Kim S Golding, 2015

Further information

For further information please contact ACE on 0300 369 0556.