



In Illinois, Providing In-Home Services Is Key

The Illinois Adoption and Guardianship Support and Preservation (ASAP) program provides a range of services to support adoptive and guardianship families. At the heart of the services are in-home therapeutic support, offered at two different levels:

- **Counseling** — For families who are experiencing challenges, a master’s level therapist who has received training in adoption competency provides clinical services based on a thorough assessment and family treatment plan. Clinicians are trained in Attachment, Regulation, and Competency (ARC), Trust-Based Relational Intervention® (TBRI®), Theraplay®, Mental Health First Aid, Trauma-Focused Cognitive Behavioral Therapy, and other evidence-based and evidence-informed interventions. Clinical services can be provided to any family member for adoption- or guardianship-related issues. If a child has significant mental health needs, the agency will provide or facilitate services.
- **START 24/7** — START (Start Early, Trauma-informed, Attachment-focused, Resiliency-building, Therapeutic services) is a customizable and flexible short-term prevention service to address the family’s specific needs. START services, provided by either a bachelor’s level caseworker or master’s level therapist, are family-focused, provide psychoeducation and interactive meaningful activities with children and caregivers, and can link families to experienced clinicians if they need additional support.

Other services in the ASAP program include 24-hour telephone support, crisis intervention, respite care, support groups, educational advocacy, and financial support for emergencies.

Kathleen Bush was a direct service provider, manager, and clinical director at The Baby Fold, one of the state’s contracted ASAP providers, for about two decades. She says, “Illinois’s philosophy is that it is normal to need support and assistance, and families should feel supported to reach out when they need help. State leaders know that as children grow, different concerns can arise and families need different types of support.”

Kathleen helped create the START 24/7 program and has seen the value of providing services right from the beginning of a family’s adoption or guardianship journey. “I’m really a fan of doing the prevention work—we need to start earlier,” Kathleen notes. The key to the START program is knowing that children need support 24/7—not a one-hour intervention here and there—so their parents have to learn how to become a therapeutic resource. Kathleen explains, “We needed a way to better way to identify and meet the needs of families at the point, right after adoption, before the crises occur. We provide psychoeducation for parents and support them in learning how to develop healthy attachment and support neural healing in response to trauma and delays in development. The child needs 24/7 immersion in an emotionally safe, sensory rich, skills- and brain-building environment.”





Kathleen knows that the journey to becoming an emotionally supportive parent for children who have experienced trauma, grief and loss can be a hard one, which is why support is so crucial. She says, “One of my jobs was making sure the parents were emotionally ready to start the therapy. It can be intense and a big change. If they weren’t parented in an attached way, it might be strange for them. That’s a big part of the therapist’s job in the beginning—helping parents understand how attachment works and how to be emotionally present with their child.” She adds that so many of the families were angry and frustrated due to all of the challenges they had been facing.

During her time at The Baby Fold, Kathleen saw first-hand the importance of providing services in the family home. She notes, “It is important for many reasons. First, it allows the therapist to see the behaviors where they occur. It also encourages more family members to engage in services and increases the frequency of visits since it’s less of a burden for parents. In the homes, clinicians can better model parenting skills, teach attachment-building routines, support parents in determining ways to better support their children, such as adding quiet spaces for calming or using the back yard swing set for some vestibular input to help with regulation. We can enter into their lives of the family and find more organic ways to intervene and support the healthy development of their child.”

For Kathleen, one story really demonstrated the value of in-home services. An adoptive mother was really struggling with her two sons. The older one was very angry and reactive. The younger one was anxious and had many sensory issues. Kathleen recalls, “He was always touching things and was impulsive. Medication was not working.” When the younger brother touched the older brother, the older brother would hit him. Kathleen explains, “Mom would have good day with the younger one, who was home schooled. It was low stress and he was cooperative. But when the older brother came home, all hell would break loose. The younger child would run laps around the house. The older brother would get mad. The mother was overwhelmed.” By watching what happened during this stressful time, the therapist was able to make changes in the family’s routine after school. They arranged for the younger child to be doing something else so mom could spend time with the older brother. The mom and the younger child received massage therapy, which really helped with their anxiety. The brothers did therapy together to talk about each of their brain’s worked differently.

While providing in-home services at The Baby Fold, Kathleen used Theraplay quite a bit to help build attachment. “On a given day, I would see two or three clients in their home. I would provide emotional support to parents as they tried to transition to therapeutic parenting, help with school issues, and plan and implement Theraplay sessions. It was a lot of playing of games to reduce stress and help the child accept the parent as a caretaker and in charge.” For one game, Kathleen would have a child stand on a stack of wobbly pillows. In this scenario, the parent has to support the child, and the child learns to accept support from the parent.





Another option was having parent and child toss popcorn or cereal into each other's mouths. Kathleen explains, "It's fun and it requires eye contact, which builds attachment."

She adds, "We do this in-home because we are teaching parents how to incorporate Theraplay activities at home throughout the day to create what Karyn Purvis—co-creator of Trust-Based Relational Intervention—called an 'attachment and sensory-rich environment.'" Kathleen notes that providing the services in the home made it easy for parents to see that they could regularly do the same types of activities on their own. She explains that this repetition is key: "Dr. Bruce Perry also encourages the repetition of these types of activities for healing and developing the brain. Repetition helps create healthy brain pathways."

Right now, there is a wait for list for families to receive in-home services, but the ASAP agencies provide support while families wait. Kathleen explains that the program can offer respite care, support groups, and training right away, and staff can work with families to access community-based services.

ASAP's in-home counseling services can be offered for 12 months. (START is typically shorter—typically about three to six months.) Extensions are possible, up to 24 months, and families can also re-enter the program as long as their case has been closed for six months. After they have completed in-home services, ASAP support groups are a great option. Kathleen explains, "It's really important for families to be able to stay in support groups and maintain connections with other parents who have been helping them. And parents who have been through the ASAP in-home services provide wonderful peer support to other families who haven't yet gotten services."

Learn more about Illinois ASAP at <https://pathbeyondadoption.illinois.gov/resources.html>

