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Training Effectiveness: Adoption Competency

TAC students are asked to assess their pre- and post-training levels of competency on 35 core competencies. The training is designed to move students from beginning levels of awareness and knowledge to regular, effective application in practice. Analysis of data from students in 31 cohorts who completed training through summer 2015 shows that at the conclusion of training:

- Advanced practice level ratings increased from 36.80 percent of ratings to 83.40 percent with “regular application” increasing from 27.40 percent to 46.80 percent and “mastered” increasing from 9.40 percent to 35.60 percent;
- Beginning level ratings declined from 29 percent of ratings to 2.10 percent with “beginning awareness” declining from 9.10 percent to .20 percent and “beginning knowledge” declining from 19.90 percent to 1.90 percent; and
- Overall, beginning level ratings were reduced to 2.10 percent and advanced level ratings increased to 83.40 percent.

Migration of Ratings from Beginning Awareness to Application in Practice

All TAC to Date	Beginning awareness	Beginning knowledge	Know basics; beginning to apply	Substantial understanding; regularly apply	Mastered; can explain to others
Pre-training	9.10%	19.90%	34.20%	27.40%	9.40%
	29.00%			36.80%	
Post-training	0.20%	1.90%	15.50%	46.80%	35.60%
	2.10%			83.40%	
Change	-26.90		-18.70	+ 46.60	

TAC participants from 31 cohorts scored an average 41.6 points higher on post-tests than control groups of comparably qualified professionals not enrolled in the training.

	Average Pre-test Score	Average Post-test Score	Change
TAC participants (n=396 in 31 cohorts)	31.90	75.80	+ 43.90
Comparison groups members (n=153 in 13 groups)	32.70	34.20	+ 1.50
	Difference	41.60	

From analysis of respondent comments on the most important learning and how the learning has been applied in practice, eight major themes were identified – all consistent with primary learning objectives of the TAC:

1. Understanding grief and loss and how it affects all members of the adoption kinship network.
“This training has greatly reinforced the need to address grief and loss head on and not just as an aside to dealing with attachment issues or trauma related issues.”
“It may sound simple, but the most important thing that I feel I learned is that there is grief in all forms adoption regardless of the age the child disrupted.”
2. Learning the ways trauma in early years affects attachment to the adoptive family.
“Grief and loss as the underpinning in adoption and how we want to build attachment opportunities between a child and their prospective adoptive parents.”
“The impact of grief/trauma on brain development and cognitive functioning. Impacts what I'm looking for in interventions and service providers.”
3. Understanding the critical role of the brain and neurobiology in behavior and relationships.
“The neurobiology information has been the most helpful. I have used it with a family and their support network to do some psychoeducation around how trauma had affected the children. The feedback from the family has been very positive.”
“A better understanding of the physiological impact of trauma on the brain. This has helped me be able to explain to potential adoptive parents that children do not choose to misbehave but are unable to self-regulate from the trauma. They function from the brain stem--reptilian brain rather than the cortex and reasoning. Rather than seeing a child as "defiant" we need to look at the child as fearful and functioning from a survival mode.”
4. Learning about birth parents; gaining a better understanding of birth parents as well as their lasting impact on adoptions.
“Reaffirmed that even though the birth parent is physically absent, their psychological presents (sic) is always there.”
“Birth parents feelings are taken into consideration more”
5. Understanding adoption is a life-long process.
“I think it has been most helpful to remember that adoption is a life-long process and to help clients to see this as normal – that issues continue to arise and need to be addressed.”
6. Using additional evidence-based interventions.
“The use of alternate therapies. I have two clients utilizing neurofeedback. Their families are seeing real success.”
“I am aware of more treatment intervention modalities and will be able to better refer clients to therapists.”

7. Changing preconceptions and attitudes of the clinicians.
 “This program challenged me to look at some entrenched views/ways of looking at how I work...reinforcing some things... replacing others with more current/evidence based methods.”

“For me, the workshop on openness was an eye opener because I have historically been very opposed to openness in adoption. It has forced me to reconsider what I believed to be best practice and really think about what will ultimately be best for the child.”

“Although I think I was sensitive before I am even more sensitive and perhaps less rigid about supporting contact in some cases with birth parents after adoption. Last week I had a fourteen year old child who has been in and out of foster care since she was ten years old, tell me she would rather live with a drunk mom than be in foster care or be adopted. To me this speaks to the depth of the bond that children feel but cannot always express or even understand.

8. The need to address adoption issues directly.
 “I keep coming back to the importance of families being able to talk openly about adoption, openly acknowledge birth families in a positive and respectful way, and for families to help their adoptees with issues of loss and grief.”
 “The most important thing I learned was to be reminded to bring up conversations surrounding these issues rather than just simply being aware of them, and I'm doing that more consistently.”
 “It has enabled me to have improved boldness and confidence in working to directly address adoption questions, issues, and concerns with clients.”

Quality and Relevance of Training

TAC students provide feedback on each training module; the feedback includes ratings of six indicators and narrative responses on the most and least relevant information, recommendations for improving the module, and additional comments. Feedback data from students have been used extensively to further refine the TAC curriculum. Average student ratings through October 2015 across 38 cohorts reflect consistently positive average ratings of TAC quality and relevance. Ratings are reported in the table below:

Student Module Feedback Rating Criteria <i>Rating scale: 1 = strongly disagree; 2 = disagree; 3 = agree; 4 = strongly agree</i>	All TAC Avg. Modules 2-12 through October 2015
a. Workshop learning objectives were clearly stated and achieved.	3.19
b. Instructor presented the material in an organized manner.	3.24
c. Methods of instruction used were effective.	3.19
d. Instructor responded effectively to participants' questions and comments.	3.33
e. My knowledge and understanding of the topic has improved.	3.45
f. The workshop content was relevant and helpful to me professionally.	3.46