

Open Letter to Rt Hon Rachel Reeves MP, Chancellor of the Exchequer

Re: Urgent Action Needed on the Adoption & Special Guardianship Support Fund (ASGSF)

Dear Chancellor Reeves,

We write as adoptive and kinship parents and carers whose children's early-life trauma deeply affects our children's wellbeing and our family lives. We wish to express our profound alarm and frustration over recent government decisions regarding the Adoption & Special Guardianship Support Fund (ASGSF).

The abrupt reduction of 60% to the ASGSF announced on 14 April 2025 - from £7,500 (£5,000 for therapy and £2,500 for specialist assessments) to a mere £3,000 total, alongside scrapping match funding for the highest-need cases, has caused immediate and harmful disruption to vulnerable children and families nationwide. These cuts were made without warning, consultation or evidence base.

Adding further distress were comments made by Ms Sarah Johal, National Adoption Strategic Lead & Head of Adoption England*, in her *Community Care* interview on 20 May 2025. Her suggestion that adoptive families feel "entitled" to therapeutic support "whether the children need it or not," alongside proposing we should instead be "skilling up parents" rather than providing specialist therapy, was profoundly hurtful and revealed alarming ignorance and disconnect at the heart of government policy-making on adoption support.

Why Language Matters

Words from senior policymakers shape public perception and policy. Regional Adoption Agencies (RAAs) often portray adoption simplistically and positively, obscuring the complex realities families face. Labelling dedicated carers as "entitled" or "unskilled" unfairly stigmatises us, deters potential adopters, and distracts from addressing traumatised children's genuine needs.

The Reality Behind the Rhetoric

The truth about adopted and kinship children is stark:

- Nearly 1 in 4 adopted children have self-harmed or attempted suicide, with 75% experiencing serious mental health issues post-adoption.
- Over 27% of care-experienced children are affected by Foetal Alcohol Spectrum Disorder (FASD) and other neurodevelopmental conditions. 75% are exposed to alcohol in utero.
- Care-experienced children have significantly higher rates of school exclusions and poorer educational and employment outcomes.
- They are four times more likely to have criminal convictions by age 24.
- Adoption UK's Barometer found 75% of adopters feel obtaining support is a constant battle, with rising numbers of families in crisis and children re-entering care. Crucially, 82% found ASGSF-funded support positively impactful.
- Experts recommend a minimum of 36–50 hours of trauma-informed therapy annually for meaningful improvement, yet many children with high needs require up to 100 hours.

The new ASGSF cap prematurely ends essential therapeutic interventions (*Golding, 2007; DfE, 2018; CoramBAAF, 2024*).

- Many adoptive families face severe financial hardship, remortgaging homes or taking loans to maintain essential therapeutic support (*Newcastle University and Belay Foundation research*). Recent Kinship research shows 45% of kinship carers lose employment when taking responsibility for a child, highlighting the financial impossibility for families to fill this gap.

The Roots of Trauma

Most adopted and kinship children have experienced trauma, including abuse, neglect, domestic violence, and separation. Around 80% of adopted UK children carry this developmental trauma, profoundly impacting their emotional regulation, attachment, and psychological wellbeing. Comprehensive and sustained therapeutic support is vital for their long-term stability.

Critical Lack of Lived Experience in Leadership

Adoption England's senior team largely comprises former social work managers, without any psychological therapists (psychotherapists or psychologists), adoptees, and with just one publicly identified adopter. This absence of embedded lived experience and clinical insight disconnects policy-making from reality, allowing insensitive language like "entitled" to persist unchecked. Genuine representation from adopters, kinship carers, adoptees, those raised in kinship families, and clinicians is essential to prevent harmful policy errors.

The Proposed Pilot

Under a hastily announced pilot, an undisclosed portion of the ASGSF will be devolved to just five regional adoption agencies (RAAs) for local allocation. Ministers have provided no detail on the therapeutic interventions available or evidence for these, budgets, safeguards, or appeals processes for funding refusals.

Immediate Concerns Regarding the Pilot

The proposed pilot demands clarity and transparency to avoid unintended harm:

1. How much of the ASGSF's £50 million budget is diverted to pilot sites? Is the £3,000 therapy cap applied within pilot areas?
2. **Ring-fencing:** Funds must be legally protected from diversion.
3. **Clinical Governance and Appeals:** Independent oversight and clear appeals processes must remain to maintain fairness.
4. **Data-Driven Decisions:** Pilots must demonstrate measurable improvements in stability and outcomes.
5. **Genuine Co-production:** Families and clinicians must actively co-design from the outset, not be consulted after decisions are made.

What Families Urgently Need

To prevent further harm and uphold promises made to adoptive and kinship families, the following measures must be urgently enacted:

- Adequate, inflation-linked funding for the full sequence of comprehensive trauma-informed care (sensory regulation → dyadic attachment → trauma processing).
- Transparent outcome reporting, including placement stability, re-entry into care, and school exclusions.
- A permanent and transparent parent-and-carer panel empowered to challenge funding decisions, oversee decision-making, and shape future ASGSF policies.

What Families Need Moving Forward

- Establish the ASGSF or an equivalent as a permanent, ring-fenced fund.
- Ensure all VAAs, RAAs, and ASAs are OFSTED regulated.
- Allocate ASGSF funds solely to regulated, non-profit agencies.
- Conduct robust, long-term evaluations of therapy providers, using recognised psychometric measures, leading to NICE guidelines for treating trauma in care-experienced children.

A Personal Plea

Our children are not “over-served.” Therapy helps them heal, form critical emotional bonds, and thrive. These cuts are not mere budget adjustments, they represent broken promises, risking lasting harm and significantly increased public costs.

Chancellor Reeves, we urge you to pause these damaging cuts immediately, fully fund and legally protect therapeutic support for 2025–26, and genuinely involve families in shaping future policies. Our children's wellbeing, stability, and futures depend on decisive action now.

We would welcome the opportunity to discuss this further and share our experiences with you directly.

Thank you for your urgent attention.

Yours sincerely,

Action Against ASGSF Changes Campaign Group - Clare Solomons, adoptive parent and campaigner; Euan Preston, adoptive parent, chair of The Potato Group and campaigner; Stephanie Mitchell, adoptive parent and campaigner.

Lisa Mainwaring, adoptive parent and campaigner.

**For clarity, Adoption England is the Department for Education-funded body coordinating England's 31 RAAs and advising ministers on adoption policy.*