Importance of Attachment in Adoption

RICHARD L. GASKILL, EDD , LCPC, RPTS, IMH-E[®] (IV)

ADJUNCT FACULTY WICHITA STATE UNIVERSITY

Dr Richard L. Gaskill

- Worked in Community Mental Health for 46 years
- Adjunct faculty at Wichita State University 27 years
- Former Fellow of the Child Trauma Academy
- Lectured on play therapy, therapeutic preschools, child development, & treatment of child trauma in the United States, Canada, and Australia over the past 30 years
- >Authored book chapters, research, & professional magazine articles on childhood trauma
- Regional Administrator's Leadership Award Region VI of DHHS in 2006.
- Kansas Governor's Exemplary Service Award to Children and Families 2014
- WSU College of Education's Champion of Education Award 2015
- Kansas Infant Mental Health Alice Eberhart-Wright Visionary Award 2017
- Child Trauma Academy Phyllis Rae McGinley Champion of Children Award 2018.
- Kansas Association for Play Therapy Luminary Award 2018
- Wichita State University Applied Sciences Hall of Fame 2020
- Association for Play Therapy Life Time Achievement Award 2022

Opening Thoughts

Issues at hand

- □ Attachment issues as they apply to the selection of adoptive parents
- U Weighing the benefits of one adoptive family over another
- Considerations of attachment to a foster family vs keeping siblings together in a placement
- Deliberations regarding attachment to prospective adoptive parents vs blood kin
- □ Staff training so they are competent to weigh these issues competently

Personal Note:

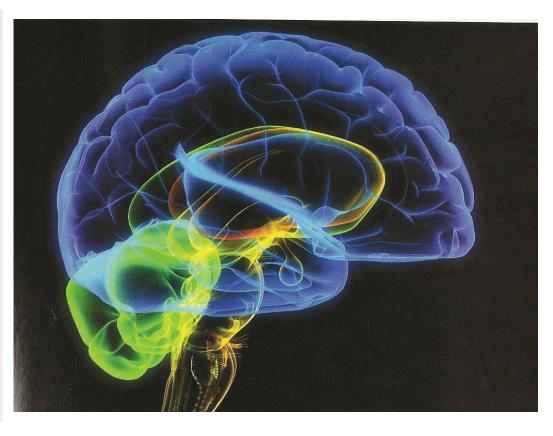
After 47 years in Community Mental Health; 1,000's of hours seeing foster children; writing reports, conferencing with social workers/judges/lawyers/parents/ adoptive parents, testifying in cases: I have no pat answers.

□ There are no one prefect answer, no single rubric that resolves all problems, each case is unique

But, I hope to illustrate some principles and issues that may help make very difficult decisions

Key Fundamental Principle! (The Human Brain is Use Dependent)

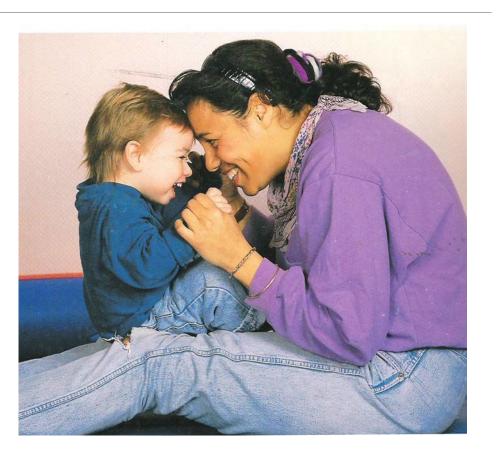
The brain develops and organizes as a reflection of developmental experience, organizing in response to the pattern, intensity and nature of sensory and perceptual experience Perry, 2010



The Transmission of Social Learning (Neurosociology)

The Human Brain Allows Us to Absorb the Accumulated and Distilled Experiences of Thousands of Previous Generations in a Single Lifetime.

Bruce Perry



Attachment

The active, affectionate, reciprocal, social, emotional relationship between parent and child.

These innate behaviors maximize their survival



Attachment

Attachment is the single most defining milestone of human social development.

Attachment is the socialrelational mechanism by which the human brain is programmed.



Attachment Sequence

•The attachment process develops gradually over the first 4 to 5 years.

•Attachment is a <u>neuro-social-developmental process</u>, tied to the maturation of the child's brain and relational experiences with the caregiver.

•Because of this process, the human brain is wired to recognize, seek out, and crave human stimulation.

•The human (primate) brain is biologically designed to organize through social experience (especially rapid in the 1st and 2nd year of life).

Schaffer, 1966; Zeanah & Gleason, 2014

Create an Attuned State

Caregiver meets child's basic needs

Caregiver is calm, open emotional state

Through eye contact, mutual gaze, facial contact

Creates a harmonic meeting of minds (mirror neuron system)

Neural activity synchronizes in right cortex

EEG's are actually synchronize

Heart rates synchronize

Hormonal system synchronizes

Critical to later self-regulation

Children who don't experience this have trouble forming healthy attachments with own parents, later relationships, and own children



Attachment Sequence

•When successfully completed, attachment represents a **consolidated cognitiveaffective representational model** of relationships for the rest of the child's life.

•This allows the child to anticipate, appraise, participate, and plan future relationships.

•The attachment process becomes progressively stable and more resistant to change by age 5.

•The child is now capable of replicating this primary social experience with his or her own children. Schaffer, 1966; Zeanah & Gleason, 2014

ATTACHMENT CATEGORIES

	Observations of Mom	Children's General State	Child When Stressed	Parent Response	Child Regulation	Adult Attach Interview	Fulfillment of Child's Needs: Why child acts the way they do
Securely Attached (60% - 70%)	Autonomous Emotionally Available, Effective, Clear perspective of child's needs	Secure: Explorative, Active, Happy	Secure: Goes to parent for comfort, seeks proximity, easily soothed, returns to play	Responds quickly with comforting behavior, Consistent, Predictable	Child accepts comfort, resumes play	Detailed memory, balanced perspective, narrative coherency	Believes trust needs will be met
Anxiously Attached (10% - 15%)	Enmeshed – Ambivalent: Inconsistently available	Anxious, Insecure, Angry	Anxious – Ambivalent: Goes to parent, seeks proximity, not easy to sooth, not quick to play	Sometimes responds sensitively with comfort, sometimes neglectful, inconsistent	Not easily comforted, remains upset	Excessive verbal output, intrusions, pressured, preoccupied, idealizing, or enraged	Can't rely on needs being met consistently and must always be working for attention
Avoid Attached (15% - 20%)	Dismissing, Distant, Rejecting	Doesn't explore much, emotionally distant	Avoidant: May not appear upset, does not seek proximity, rejects parent	May respond without comforting the child. Distant, Disengaged	Upset is less obvious, but does not end quickly	Dismissing – Denial, Minimizing, Idealizing, Lack of recall	Believes needs will not be met
Disorganized Attachment (5% - 10%)	Disorienting, Frightening, Frightened, Sexualized	Depressed, Angry, Completely passive, Nonresponsive	Disorganized, Dissociates, Acts oddly, Does not go to parent for soothing	May respond passively, Does not appear comforted or soothed by parent	Child's disturbance is lasting, Difficult for child to go back to earlier activities	Disoriented, Conflictive behavior, Unresolved loss of parental relationship	Severely confused with no structure to have needs met

So What is the Impact of Adoption

• Adoption is often a joyous and exciting occasion

 It can also be a life long challenge for adoptees, birth parents & extended families, adoptive parents & extended family members

• Members of the adoptive constellation may experience issues surrounding:

- 1. Loss
- 2. Rejection
- 3. Grief
- 4. Identity
- 5. Intimacy
- 6. Mastery and control

Child Welfare Information. Gateway (2019)

Adoption and Attachment Across the Lifespan

Historically research only focused on infancy and early childhood adjustment

- •Research indicates young children are capable of reorganizing and adapting to new caregivers after early disruptions.
- •Generally, consolidate attachments to their new caregivers in a few months
- •The children display substantial recovery of attachment quality
- •However, children with histories of pre-adoption adversity remain at risk of insecure attachments.
- •Early experiences in the attachment relationship do not singlehandedly determine later attachment patterns!

Raby & Dozier, 2018

Adoption and Attachment Across the Lifespan

Attachment patterns among adults adopted as children

- Early adversity appears to have limited effects on adopted individual's sense of security with their adoptive parents.
- However, it appears adopted individuals construct a representation model of their new attachment relationships that is increasingly independent of the early pre-adoptive experiences
- Simply put, that was then, this is now

Adoption and Attachment Across the Lifespan

Conclusions:

- A genetic contribution to attachment can not be ruled out, especially in early infancy
- Environmental experiences seem to explain inconsistencies in adoptive parent-infant pairs.
- The adoptive parent's attachment presentation shapes attachment patterns of adoptive children; as it does for biological children
- These patterns are contributory to recovery of attachment quality for children with early adverse histories.

A Systemic Review Of The Effects of Adoption for Foster Children's Well-Being

- Children adopted from foster care experienced more negative outcomes than children adopted privately or internationally
 - Higher rates of mental Illness
 - Behavioral problems
- Largely due to greater pre-adoptive risk factors
- •Once adopted: foster children experienced:
 - A decrease in behavior problems
 - An increased positive cognitive functioning
- •Due to the adoptive home contributing
 - Increased parental warmth
 - Family cohesiveness

Doubledee, 2015

Adoption, Attachment, & Relationship Concerns: a study of adult adoptees

- •Adoption may be a risk factor for relational difficulties later in life. (small effect size)
- •When attachment is used as a predictor Adoptive Status is not predictive
- •Other factors impacted adoptee's sense of security
 - Relationships with adoptive parents
 - Reunions with birth mothers
- This study suggests most adoptees are relatively well adjusted
- Practitioners should not assume that adoptees invariably face major adjustment problems.
- This study points to the importance of family relationships which influence adjustment
- <u>Relationships with adoptive parents is clearly important.</u>
- The adoption experience may be thought of as a "lifelong process"

Things to think about

1. Look at the relationship abilities of the individuals

- 2. Consider the best attachment option first.
- 3. Add on opportunities in the best interest of the child
- Can the biological parents participate in an open adoption
- Can the siblings also be adopted by the adoptive family
- o Siblings are involved/visitations
- 4. What is the best sequence of options you can manage for this child
- 5. What services need to be in place to ensure the best chance for success with each option
- 6. Build in supports for the child and family for years

Thank You:

For the Opportunity to offer Input

References

•...

Brandt, K., Perry, B. D., Seligman, S., Tronick, E. (2014). Infant and early childhood mental Health: Core concepts and clinical practice. Washington D.C.: American Psychiatric Publishing.

Brazelton, T. B. & Cramer, B. G. (2018). The earliest relationship: Parents, infants, and the drama of early attachment. New York: Routledge.

- Doubledee, R. (2015). The effects of adoption on foster children's well-being: A systemic review: Thesis presented to the graduate school at The University of Missouri-Columbia.
- Feeney, J. A., Passmore, N. L., & Peterson, C. C. (2007). Adoption, attachment, and relationship concerns: A study of adult adoptees. *Personal Relationships*, 14. 129-147.
- Fonagy, P., Steele, M., Steele, H., Leigh, T, Kennedy, R. (1995). *The reflective self, and borderline states: The predictive specificity of adult attachment in interview and pathological emotional development*. Psychnet.apa.org Child Welfare Information
- Gateway (2019), The impact of adoption. Washington, DC:US, Dept of Health and Human Services, Administration for Children and Families, Children's Bureau
- Kandel E.R. (1998). A new intellectual framework for psychiatry. American journal of psychiatry. 155 (4):457-469.
- Ludy-Dobson, C. R., & Perry, B. D. (2010). The role of healthy relational interactions in buffering the impact of childhood trauma. In E. Gil (Ed.), Working with children to heal interpersonal trauma: The power of play (pp. 26–43). The Guilford Press

Maldenado – Duran, J. M. (2002). Infant and toddler mental health. American Psychiatric Publishing.

Raby, K. L., & Dozier, M. (2019). Attachment across the lifespan: Insights from adoptive families. *Current Opinion in Psychology, 25,* 81– 85. <u>https://doi.org/10.1016/j.copsyc.2018.03.011</u> Perry, B.D. (1996.) Incubated in terror: neurodevelopmental factors in the cycle of violence. In (EdOsofsky) *In search of solutions* New York: 124 – 148 Guilford Press

Perry, B. D. (2009). Examining child maltreatment through a neurodevelopmentallLens: clinical applications of the neurosequential model of therapeutics, *Journal of Loss and Trauma*, 14:4, 240-255

Perry, B.D. (2010). Neurosequencial Model of Therapeutics Core Principals. Child Trauma Academy, Houston, Tx

Schaffer, H. R. (1996). Social development. Oxford: Blackwell Publishing.

Smart, M.S. & Smart, R. C. (1973). Infants: development and relationships. New York: MacMillian Company

- Siegel, D. J. (2001). Toward an interpersonal neurobiology of the developing mind: Attachment relationships, "mindsight," and neural integration. *Infant Mental Health Journal: official publication of the world association for infant mental health*, 22(1-2), 67-94.
- van der Kolk, B.A. Fister, R.E. (1994) Childhood abuse and neglect of self-regulation. *Bulletin of the Menninger Clinic* Spring 94 Volume 58, Issue 2, page 145

Zeanah, C.H. (2000) Handbook of infant mental health: 2nd Ed New Yok: Guilford Press