

Family Life is Paramount in Healing

1. Introduction and Objectives

1.1 Introduction

Welcome back to the National Adoption Competency Mental Health Training for Mental Health Professionals. This lesson is: Family Life is Paramount in Healing.

1.2 Section 1: Lesson Objectives

At the end of this lesson, you will be able to:

- Identify and describe the developmental stages and challenges of the adopted individual's and adoptive family's life cycle.
- Recognize the need for family systems work, with parents as primary agents of healing and the experts on their child.
- Identify and describe goals for family work and strategies for engaging families.

1.3 Family Life is Paramount

As discussed in the guiding principles, the family is the primary healing environment for children. Helping parents provide the kind of nurturing parenting that their child needs is central to therapeutic help.

The children and youth you will be working with may have delays in typical development. It is important to work with both the child or youth and their caregivers to identify meaningful supports to help them reach their potential.

Parents must be partners in addressing the mental health needs of their children. They need to learn to:

- Understand their child's needs and behaviors
- Interrupt dysfunctional patterns of interaction
- Respond effectively and consistently to their child's needs, and
- Facilitate children's development

2. The Adoptive Family Life Cycle

2.1 The Adoptive Family Life Cycle

Adoption scholars have identified critical developmental tasks confronting adoptive families as they work through core adoption issues at each stage of psychosocial development.

These are overlaid with the usual developmental tasks of life stages for individuals and families.

2.2 Understanding Adoption Developmentally

The adoptee's understanding of adoption emerges developmentally.

Click on each picture to learn more.

Preschool: The preschool child learns about their story through the telling of the story by their parent, but doesn't understand the meaning of, and inherent differences, in adoption.

Elementary: The elementary age child begins to understand the loss in adoption and struggles with feelings of sadness as well as "differentness." They may experience negative peer reactions to adoption as well.

Adolescent: The adolescent adoptee may struggle with identity formation and individuation. The adolescent quest for identity and their adoption experience moves them in seeking a deeper understanding of who they are in relation to both adoptive and birth families.

Young Adult: The young adult adoptee may have deeper desire for genealogical connection as they approach marriage and parenthood and in deciding whether or not to search for birth parents if they are not known.

Trigger Events: Sometimes life events such as a divorce or death of a parent can trigger resurfacing of certain adoption-related issues. Other common trigger times are the child's birthday, Mother's Day, problematic school assignments on autobiographical information such as family trees, and insensitive reactions from others or the media.

2.3 Tasks

You might have parents assess where their child is in terms of mastery of developmental tasks in adoption.

Primary developmental tasks for adoptees include:

- Learning one's adoption story
- Coping with loss
- Searching for answers about one's origin and the reasons for relinquishment
- Coping with adoption stigma
- Integrating adoption into one's identity
- Validating affiliation with two families
- Searching for one's birth family

Adoptive parents also have corresponding key tasks to support their children's understanding of their personal adoption story:

- Open discussion of adoption with the child
- Helping the child mourn and honor their losses
- Providing realistic information about the adoption story
- Helping the child to cope with adoption stigma
- Integrating being an adoptive parent into one's identity
- Supporting the child's dual family membership
- Supporting the adoptee's desire or disinterest in searching for birth family

2.4 Realities of Challenges

Adoptive parents may learn about the challenges of adoptive parenting in preparation classes, but they may not come to embrace them until later.

Listen to this quote from an adoptive mother of an 8-year-old boy adopted from Guatemala:

"For me, the most important part of the preparation groups that I attended before actually adopting my son, was the realization that this would not be quite the same as raising a child born to me, there were different issues I had to think about... I wanted my son to be as happy about being adopted as I was about adopting him, that was selfish and naïve. I've come to realize that it's normal for him to feel confused and even sad about not knowing his birth parents, sharing and helping him with this sadness is my responsibility."

3. Engaging and Supporting Parents

3.1 Engaging and Supporting Parents

As reflected in the Guiding Principles, this work is about building and strengthening families.

Too frequently, mental health professionals spend much of their time in individual work with the child or youth, and parents are left feeling unsure of what's happening, and how to be more effective in their parenting.

In working with adoptive and guardianship families, therapists need to engage parents and build a relationship with them. Parental engagement is a powerful predictor of positive outcomes.

3.2 Effective Interventions

Early and effective interventions for children and their parents help to prevent compounding of problems throughout their development.

Listen to adoptive parent, Deb Schugg, describe the contrast between her first experience in seeking help for her adopted children, where the children were seen individually while she waited in the waiting room, and her experience with a new adoption-competent therapist.

[Video Transcript]

DEB: To say it was like night and day is an understatement. We had a therapist who was an absolute godsend. She really understood all the nuances, all of the complexities of adoption, of children growing up in a family they aren't born into. She had personal and professional experience in adoption; she had specialized training in the issues surrounding adoption and permanency and so she really, really got it.

And for starters, she included me in the therapy, so we were in there together. And she was helping to kind of coach and facilitate me doing the healing with my kids because she recognized that I'm the one, and my husband is the one, who's living with them 24/7. And they're not going to just heal during that 45-50 minute session once a week.

But we started doing a lot of attachment work, which I didn't understand at the time; I didn't really know what it was. And I can remember having some of it feel kind of awkward and not knowing quite how to do some of that stuff, with lotion on my little girl's hands and holding her like she was a baby and like, "Really? Is this really what we're supposed to be doing?" And she's like, "Yeah, trust me." But I did trust her because I saw the difference. She really got it and she understood.

When my kids were sharing something that was happening and I knew that their version was absolutely not accurate, she taught me how to just wait with that, and to trust her. That she knew what she was doing. It didn't mean that she believed what they were saying hook, line and sinker; it meant that she was getting lots of other helpful information about how they were feeling by the way they were describing it.

So she taught me a lot. She taught me not to talk so much. She's like, "No, Debbie, you talk, talk, talk, talk, talk, talk. No. The kids are not learning through your words." She spent a lot of time checking in with me when we'd first go so that I could, you know, cry or rant or brag or whatever it was, about what was going on that week. And then we would welcome my child into the room and then we would do that family work together.

But I largely credit her with keeping our family together, because we had some very, very difficult times with some really, really big behaviors that I think would have unraveled a lot of families. But having somebody who really got it and having a safe place to take that without being judged was hugely helpful.

[END OF VIDEO]

3.3 Checklist Engaging and Supporting Parents

Some key aspects for engaging adoptive families include the following. Click each button to learn more.

Recognize: Professionals need to recognize that the parents ultimately know their child better than anyone else.

Empower: Professionals should join with and empower the parents to find solutions to challenges. Family therapy is the preferred mode in working with adoptive and guardianship families, although some sessions may involve the youth and parents separately.

Inform: If individual therapy is also part of the treatment plan along with family therapy, the parents should be kept abreast of the focus of the work, updated on the child's progress, and guided as to how they can be working on specific issues at home.

Embrace Strengths: Joining with parents also means recognizing their strengths. Professionals can help them see the positives in what they are doing well and embrace the strengths in their child.

Validate: An extended period of active listening and validation of their experiences is often needed to engage family members. It is important to convey messages of acceptance and empathy, to normalize their situation, and to instill hope that things can get better.

Reinforce: Provide positive feedback to children and parents on their efforts to implement changes.

Reassess: Acknowledge when therapeutic guidance has not been successful, take responsibility when intervention strategies have not been adequate, and be open to reassessing and implementing new strategies for helping the family.

3.4 Exploring Parents' Past Experiences

Mental health professionals need to explore with parents their past experiences of seeking help. Some adoptive or guardianship parents not only blame themselves for their children's difficulties, but also feel that professionals with whom they have worked have been judgmental toward them.

In fact, one study found that parents who felt disrespected by prior mental health providers were six times more likely to doubt the usefulness of future treatment and to identify more barriers to treatment (Kekorian, McKay, & Bannon, 2006). Too often those therapists without an adoption lens have viewed the child's behavioral challenges as stemming primarily from inadequate parenting.

After experiencing a mental health professional with an understanding of adoption issues, parents' comments such as, "Finally, there was someone who understood and didn't see me as a bad mother" illustrate the critical importance of an accepting and non-blaming approach.

3.5 Struggling

Adoptive parents or guardians who are really struggling may need to vent without being challenged or focusing on solutions.

You can help them understand that they are not the cause of many of their child's difficulties, and they can be a force for positive change.

Remember children often come into their families with their histories of maltreatment, deprivation, and multiple losses which will have an impact upon the family.

3.6 Understanding Survival Strategies

As discussed in a previous lesson, children and youth with early adverse experiences will often demonstrate negative or challenging behaviors or survival coping strategies that reflect underlying emotional struggles. Let's look at some of these in more detail.

Click on each section to learn more.

Survival Behaviors: Survival behaviors may stem from a child's need to defend against feelings of powerlessness, fear of closeness, lack of felt safety, low self-worth, or rage related to past maltreatment. While such behaviors often helped children survive in the past, they may persist long after the child is in a safe, permanent family. It is these behaviors that often, if not better understood and addressed, can risk the permanency of the placement. As we discussed with Zoe, your clinical focus will need to help families to understand the origin of these behaviors, help them to manage and learn not to personalize them.

Understanding Behavior: Parents need help to understand the emotional meaning underlying survival behaviors. This will help them have realistic expectations and not see these behaviors as evidence that the child is "bad" or that they are "bad" parents.

Benefits of Reframing: Reframing can help parents become more emotionally attuned to their child's unique needs and can foster hope in their ability to support change in those behaviors.

Reframing Resource: The handout, *Reframing Behavior Problems as Survival Behaviors*, provides an overview of the link between behavior problems in adopted children and underlying emotional issues. It also includes tasks for working with children and with parents in addressing these issues.

3.7 Deb Schugg

Listen to Deb Schugg, the adoptive mom we heard earlier in this lesson, talk about how considering the emotional needs underlying negative behaviors helped her to parent more effectively.

[Video Transcript]

DEB: So we get a lot of pressure, and I know parents still get a lot of pressure from the outside--from neighbors, extended family, teachers, coaches, their faith community. Anybody and everybody--the people in the grocery store that think they have a right to give you advice about your parenting. That you're indulging your child; you're spoiling your child by coming in with empathy and compassion and trying to understand what they're feeling and tapping into some of these grief responses and stuff around losses that they have. When they feel like you need to just--really you know they should be in trouble for what they're doing.

And so I would get a lot of, "Really? You're going to let her go horseback riding after what she did at school yesterday?" And I would say, "Yes. Yes. Because she needs it and that's helping her heal." Right? And so it's very counterintuitive to switch up the way you're approaching behaviors, but the big win is that the behaviors start to dissipate because you're meeting the need.

And so as parents we try harder and harder and harder to extinguish these behaviors because the behaviors are a huge problem--for us, for our kid, for everyone. And we want our kids to grow up to be good citizens and not behave that way. And we have a lot of our identity invested in it. But when we stop addressing the behaviors and start looking at the needs, and then we meet those needs, then the behaviors extinguish themselves because they're no longer needed.

[END OF VIDEO]

3.8 Reframing Exercise

Let's look at an example.

Six-year-old Andrew had been in a pre-adoptive home for six months with an infertile couple who had no other children. The couple reported that they could no longer parent Andrew. His history included emotional and physical neglect for his first four years, and he had often missed meals and been hungry.

When asked about Andrew's difficult behaviors, they reported that he would come in the kitchen 10 minutes before dinner was ready and demand food. The mother showed him the food she was cooking and asked him to wait a few minutes, but Andrew would have a severe temper tantrum. The dad would send Andrew to his room until he calmed down, further delaying dinner.

3.9 Andrew's Behavior Reflection

How would you help these parents better understand Andrew's behavior, and what new parenting approach might address the underlying emotional issues?

3.10 Andrew's Behavior Response

The adoption competent therapist serving this family provided the following treatment strategies. Let's see how they compare with the ones you may have listed.

- Discussed the impact on Andrew of being denied food over his early years and how he may need to test in this new home whether he would receive food when hungry.
- Provided psychoeducation about the impact of early neglect and the impact of attachment insecurity, fear, and a lack of trust.
- Guided the parents to provide small healthy snacks in a bowl in the refrigerator that Andrew could get anytime.
- Encouraged less rigidity around snacking before meals.

What was seen as naughty behavior was now understood as a natural response to early deprivation through the denial of food.

4. Attachment Matters

4.1 Attachment Matters

Fostering a secure parent-child attachment is foundational to child development and well-being. Many families whose children had early adverse experiences will require support from you to strengthen these attachments.

4.2 Emotional Challenges

Even for a child or youth who was placed with their adoptive parents for years as a foster child, the transition to adoption with the family may create new emotional challenges related to giving up their expectation of returning home, intense grief, and divided loyalties.

They may withdraw and reject the adoptive parents' nurture, which often results in parents feeling rejected. Doing this attachment work is essential for parents to remain committed in the face of challenging behavior and to promote family stability.

4.3 Strengthening Attachment

The process of strengthening attachment with an older child who has experienced early adversities often involves helping parents find new strategies to connect with the child and provide nurture at times when the child is needy and open to accepting support, for example when they are sick.

4.4 Addressing Parents' Issues

It's important to identify and address emotional issues of parents whether it is their own unresolved losses and traumas or their reactions to traumas their children have experienced.

The handout, *“Assessing Attachment-Readiness and Capabilities in Prospective Adoptive Parents,”* was developed for social workers to use in assessing parents’ readiness for adoption during the home study process, but the questions it contains are also useful for therapists.

4.5 Exploring Parents’ Own Issues

Click each note to hear about some key areas that you may need to explore in your work with adoptive parents and guardians.

Assess Parents’ Childhood Experiences: Professionals need to assess the parents’ current relationships with their own parents and how significant childhood experiences have influenced their personality or outlook as an adult. It is also important to explore the parent’s own trauma and loss history and triggers. As you explore these early trauma experiences with parents, it is critical that you assess their ability to manage these histories.

Assess Parenting Capacity and Needs: Professionals need to work with adoptive parents or guardians to assess their capacity to parent a child with challenging behaviors and whether they have the capacity to learn new parenting skills that are nurturing rather than punitive when children misbehave.

Ability of Parent to Manage Their Own Responses: Before a parent can support a child’s feelings and behavior, they must be able to manage their own emotional responses. This is a foundation for all other aspects of nurturing parenting. Therapists need to explore with parents what parenting situations are most challenging for them.

Family Dynamics: Professionals also need to consider the family’s belief patterns and how they impact family dynamics.

Self-Image Considerations: Parents should consider the needs of their child if they are from a different background than their own. They need to understand the importance of their child having contact with peers and adults who are like them, ways of promoting the child’s positive self-image, and how to prepare their child for encountering people who judge them or act out against them. All of these issues will be expanded in future lessons.

4.6 Attachment: Why It Matters

The following video vignette illustrates the importance of parents developing insight into their own issues that influence interactions with their child in order to help children attach and heal.

[Video Transcript]

MICHAEL MONROE [ADOPTIVE PARENT]: What big [dog would?] you have, Ronald.

FEMALE CHILD: I want to have a huskie!

ANNOUNCER: Michael and his wife, Amy, say learning about attachment motivated them to change the way they parented.

MICHAEL MONROE: One of my boys--because I've got one who's prone to some real volatile eruptions of emotion--his feelings oftentimes were driving my feelings. So here's a child who has a difficult time regulating his emotions, especially when things don't go his way. And so he would blow up. And because I wasn't aware of what was going on with me, I would blow up. So rather than being one to help him calm down and bring everything under control, I'm actually adding fuel to the fire.

[TALKING TO SMALL BOY] Tell her how close you came.

ANNOUNCER: Doctor Siegel says these insights can benefit every parent.

DR. SIEGEL: First of all, as a clinician and a researcher I wanted to learn how to do that research on the adult attachment interview. But as a parent at the same time I thought, "I'd better really do some serious inner reflection so that I don't pass on what happened to me in my past to my child." So here's the real question every parent can ask themselves: "Do I love my child enough to take the journey, to look inward at what might be very painful, so that I can liberate myself from the past and allow my child to have the secure attachment that I long to have had?" That's the question each of us as a parent needs to ask.

[END OF VIDEO]

Source: The Karyn Purvis Institute of Child Development, Texas Christian University

5. Facilitating Communicative Openness in Families

5.1 Facilitating Communicative Openness in Families

In addition to looking inward, parents also need to have the ability to be open with, and support, their children in talking about adoption, aspects of their past, and the feelings they have surrounding their personal adoption journey. Children may fear hurting their parents' feelings when they raise questions or share painful feelings about their past and thoughts about their birth families.

5.2 Facilitating Communicative Openness in Families

You have an important role in facilitating communication throughout the family.

Communicative openness in adoptive families involves many dimensions:

- Comfort talking with the child about adoption or guardianship.
- Comfort with the child's connections to another family.
- Comfort with the child's connections to their community of origin.
- Empathy with the child's feelings.
- Attitudes toward communication with the birth family.
- Empathy with the birth family.

5.3 Research

Research indicates that communicative openness in adoptive parents has a significant impact on their child's adjustment and well-being. Some interesting findings include these insights.

Click on each tab to learn more

1. Parents often underestimate the difficulty their children have in talking about adoption and overestimate their children's understanding about adoption and what has happened to them.
2. Adopted children experiencing more open adoption communication report higher self-esteem and have lower parent ratings of behavior problems.
3. Adopted adolescents who perceive greater communicative openness in their families report more trust for their parents, fewer feelings of alienation, and better overall family functioning.
4. The level of openness can vary between individuals in a family. Parents who adopt a style in which all opinions are valued and accepted are more successful in creating communicative openness.
5. The goal is for adoptive parents to create a family environment in which adoption is discussed openly and children are supported in finding answers to whatever questions are most important to them.

6. Need for Parental Support

6.1 Need for Parental Support

Given the stress impacting many adoptive families, social support is particularly critical for families parenting children with multiple challenges.

6.2 Ongoing Support

Often parents whose children require a significant amount of attention and care are emotionally exhausted, isolated, exhibit diminished feelings of competence, and family instability.

Marriages, friendships, and connections to extended families may be severely impacted and need to be strengthened. Parents may need support to take a break, seek respite services, and secure time together away from their children.

6.3 Parent Support

For families with children with significant challenges, therapy alone may not be enough.

In your role, you can assist them in building a support team of professionals and friends.

You can also help to connect them with other adoptive and guardianship parents who have had similar experiences.

This can be accomplished through parent support groups and mentors.

6.4 Collaborative Work with Other Systems

The reality is that work with adoptive and guardianship families often goes beyond the billable hour.

As an adoption competent therapist, you may need to shift to a more collaborative approach. This may include work with schools, child welfare, mental health, law enforcement, juvenile justice systems, faith-based institutions, tribal social services, and other supportive community organizations.

Multi-systems work often makes the difference in achieving major changes in children's adjustment and family well-being. For example, one adoptive mom reported that even though she was a teacher where her children attended school, it was so helpful to have her daughter's therapist attend the IEP meeting when significant changes were being requested. If in-person attendance is not possible, a letter or phone conversation may serve the same purpose.

Also, teaching parents how to advocate for their children's needs is important. This requires therapists to know about children's educational or other rights and the processes that are required to advocate for their child.

For one adoptive family, getting their child moved to a therapeutic school setting made all the difference in improving their situation.

6.5 Overcoming Barriers to Progress

Even when therapists provide excellent clinical services, not every family will find solutions to its challenges.

A number of barriers can impede achieving positive outcomes, such as:

- Insufficient parental commitment
- Severe challenges of the child, such as brain trauma
- Inadequate community resources, or
- Parental incapacity, such as with serious illness or aging

Therapists can sometimes help families to gain additional back-up supports or services to enable them to continue parenting or to find an alternative living arrangement for their child, while maintaining their role as parents.

For example, one parent receiving post-adoption services observed:
"[Before coming to adoption preservation services], we were unable to secure accurate diagnosis and treatment for our child. Numerous therapists were unable to help remediate our child's behavior, which grew more unmanageable. At adoption preservation services, our counselor understood aspects of our situation that others did not...We were helped to accept the fact that we were in a situation that we could not fix...that we weren't to blame for this, that what our child needed was more than we could provide. Arrangements were made for residential treatment, but we retain full parental rights."

7. Conclusion

7.1 Wrapping Up

In this lesson, we've discussed the role of the family as the primary healing environment for children with early adverse experiences. As a mental health professional, you can serve as a bridge to healing by providing adoptive and guardianship families with the tools and information they need to better understand and manage their child's behavior and their own parenting responses.

7.2 Learning Journal

Please click on the journal page to write down your reflections on this lesson.

7.3 Journal Reflection

Reflecting on this lesson, what are your key takeaways and how might you apply these in your practice?

7.4 Journal Response

Click the "Print Results" button to print and save your answers.

7.5 Conclusion

Congratulations! You have completed Family Life is Paramount in Healing.

In the final lesson of this module, we will explore some models and interventions for mental health treatment for adoptive and guardianship families.