

Attachment models in late-adopted children and their adoptive mothers: a clinical example

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Abstract

Attachment Theory highlighted the role of secure adoptive mothers in affecting the revision of late-adopted children's Internal Working Models respect to attachment (Steele, Hodges, Kaniuk, Hillman, Henderson, 2003; Pace, Zavattini, D'Alessio, 2012). Starting from a theoretical discussion on the importance of the quality of parenting, caregiving and reflective capacities of adoptive mothers, a discussion of a case of a child adopted at the age of six years was presented. The mother and her child were seen two times after six months of each other. During the first observation, at the time of adoption, the *Separation-Reunion Procedure* was administered to the child and the *Adult Attachment Interview* and *Reflective Function Scale* were administered to her mother. At the second step, the *Separation-Reunion Procedure* and the *Manchester Child Attachment Story Task* were administered to the child. We highlighted that the relationship with a "secure" mother, with a good reflective functioning, and her adopted child can be a facilitating factor for the transformation of child's attachment patterns, both behavioral and representational.

Keywords: late-adopted children, attachment representations, adoptive mothers, parenting during adoption, Internal Working Models

Attachment theory and adoptive experience

The perspective of Attachment Theory highlighted the importance of childhood attachment relationships in determining the Internal Working Models (IWMs), that are mental patterns which organize individual experiences, behaviors and emotions over time. Interactive experiences lived with caregivers during childhood contribute to create models of self, of other and of oneself in relation to the other that are internalized and reactualized with their children once they become parents (Bowlby, 1988). Some research studies reinforced the hypothesis of the continuity of Internal Working Models, which develop at the end of the first year of life and the idea that remain stable and continue from childhood to adulthood.

In recent years attachment literature points out that some important experiences with "significant others" model and promote a *discontinuity* of the attachment representations (Pace, Castellano, Messina, Zavattini, 2009; Dazzi, Zavattini, 2011). Research on adoption seems to support the second hypothesis (Steele, Henderson, Hodges, Kaniuk, Hillman, Steele, 2007). In fact, adopted children, exposed to

adverse and negative experiences of care, can live the adoptive experience as a second chance for recovery after previous adversity (Palacios, Román, Camacho, 2010) and reviewing their Internal Working Models (Steele, Hodges, Kaniuk, Steele, Hillman, Asquith, 2008; Pace, Zavattini, D'Alessio, 2012). These dynamics seem much more true in *late-placed* children, children who have coped with at least one broken relationship with an attachment figure (Van Ijzendoorn, Juffer, 2006). The previous experiences of late-placed children, however, is most likely characterized by several negative experiences and "cumulative traumas" (Howe, 2001).

Howe (2001) proposes to distinguish between three different "pre-adoption histories" that late-adopted children may have suffer:

1) good start / late-placed, that is those children who had, during their first two years of life, the experiences of positive childhood relationships with their caregivers. Then the situations got worse and the child lived experience of rejection, abuse, carelessness and neglect. Such experiences could affect the organizing of an attachment model partially "*secure*" with anxious aspects resulting from the loss of caregivers. During the adoptive experience, the fear of losing again to attachment figures, often may lead them to take addictive or complacency behaviors toward adoptive parents;

2) poor start / late-placed, it is those children who lived poor quality of care characterized by experiences of neglect, sexual abuse, physical abuse and neglect from their birth until the time of adoption. These children may develop "*insecure*" attachment patterns both "*resistant*" and "*avoidant*", and "*disorganized*". The "*resistant*" children show hyperactivation of the attachment behavioral system with a representation of the other as inconsistent and unpredictable, and a representation of the self as unworthy of care and affection. These children, in most cases, had a childhood characterized by neglect and abandonment, and have internalized, therefore, a model of parents emotionally not constant from which they can suddenly be neglected and abandoned. As a result, the fear of further losses means that these children can often use, as a defense, attitudes excessively requesting, exasperating and possessive towards the new caregivers. "*Avoidant*" children, however, may show a deactivation of attachment behaviors, avoiding the physical and emotional closeness with the caregiver and showing emotional invulnerability. The attitudes of these children are the result of cold and detached relationship with the biological parents during childhood, that did not give importance and relevance to their requests and their care needs, making them feel unwanted and rejected. These parental attitudes may have generated in this children an image of self as not worthy of being loved. As a defense against these feelings of extreme emotional fragility, adopted children can avoid emotional contact and appear strong and invulnerable, repeating the relational model which they are accustomed to. Finally children with "*disorganized*" attachment patterns may show a confused sense of self and a

representation of the other as frightened / frightening. These children were in contact with parents who themselves had experienced, trauma, bereavement or abuses not resolved during childhood and then, as adults, revealed themselves still traumatized and frightened by their painful life experiences. This parental irresolution can often frighten and traumatize the child himself who, as a defensive strategy, can show attitudes either aimed to a strong emotional control that leads him to deny any need to trust and rely on significant other or may adopt strongly punitive attitudes towards himself feeling, often, the cause of the abandonment of his parents. Such mechanisms could lead to the use of survival *controlling* strategies or type caring or type punitive (Pace, et al., 2009);

3) institutional care, or children who have been institutionalized since birth and who have not had the experience of a loving relationship with a significant caregiver. These children, as the poor start/late-placed who have experienced extreme deprivation, can develop or absence of an attachment bond or indiscriminate search of comfort and care.

The institutionalization seems to be one of the most traumatic experiences that adopted children in middle childhood may have lived and this is even more serious as occurs early in the child's life. The institutionalization, in fact, is the main etiological factor in the onset of *Attachment Reactive Disorder*. Studies available in literature show that this disorder can be associated with a delay in cognitive development or with a severe relational disorders (Balbernie, 2010). Then, it seems not to be the age of late-adopted children to affect their future development rather than the time of exposure to potentially traumatic experiences. Due to their negative life stories these children may lose trust in attachment figures, may have serious difficulties to create new bonds, and can develop “*insecure*” attachment representations.

Parenting in adoptive families

Taking into account the psychological fragility of late-placed children, a high level in the quality of parenting seems to be particularly important. Adoptive parents should have personality traits and abilities of understanding the child's emotional states higher than the biological parents. Literature shows five dimensions concerning the quality of parenting of children living in adoptive or foster families:

1) *to promote confidence in the availability*, or parents should have the ability to keep the children constantly in mind even if they are not physically present, should be aware that the child is dependent physically and emotionally, they should show early concern and availability for the future, they should communicate verbal and non-verbal willingness. If the parent expresses a sensitive caregiving the child can gain confidence in the availability of the caregiver, he can reduce his anxiety and he is more free to explore, grow up and develop;

2) *to promote the Reflective Function*, on the one hand the parents help children expressing their needs and feelings, containing and contextualizing the chaotic thoughts and emotions, on the other hand they help them in making sense of themselves and others, giving them a more systematic and manageable version of the world. In this way, children should improve the ability to reflect on their experiences and talk about their difficulties and they should be able to regulate emotions and behaviors and to move toward greater interpersonal and social competence (Kretchmar, Worscham, Swenson 2005);

3) *to promote self-esteem*, or parents should be aware of the importance of fully accept children, both when children give negative feedback and when they refuse the affection and warmth. It is essential to speak with pride and satisfaction about the progress and activities of the children and to show confidence in their abilities, thus increases self-esteem and promotes a more balanced view of themselves;

4) *to promote the autonomy and self-efficacy*, or the adoptive parents must promote autonomy by communicating to children the message that their ideas and wishes are taken into account and that they can choose whether or not to develop a set of skills. In this way, it increases the trust of these children work in individual and group and it grows the ability to negotiate and to compromise;

5) *promoting family membership*, parents should be able to include the child in a family where there are no biological ties, they must recognize the extent to which children feel they belong to their families of origin while they are including the children.

Some authors (Dozier, Sepulveda, 2004) have stressed that the "foster mother" should have a more therapeutic than parenting function. When the child shows anger, denial, or push away the adoptive parents, the caregivers should understand the pain, suffering and fear of abandonment that underlie these attitudes. Adoptive parents should show the child a love and a presence emotionally constant, in order to ensure that the child can internalize a new relational model with a loving, sensitive and caring parent which is opposed to the idea of a cool and detached parent, rather than abusive, lived prior to adoption. Given the difficulties that adoptive parents deal with, the *security* of their Internal Working Models appears to be a protective and guarantee in stressful situations and emotional problems (Santona, Zavattini, 2005). Adoptive parents who come in contact with a difficult child should be able to identify the state of mind with respect to attachment of the child, knowing the relational experiences he has lived, and be able, therefore, to approach the child adequately taking into account the specific difficulties of his state of mind with respect to attachment. Other important features should be the ability to balance the loving with authoritative behaviors in the education of children. In particular, it is important that

parents transmit to their children the ability to handle the frustration and enjoy the thrills and positive affect (Pace et al., 2012).

The adoption, therefore, may allow the child to experience a "secure base" that will enable him to change the first Internal Working Models that are shaped from the first negative experiences and possibly turn them into "*secure*" models. Recent studies have confirmed this hypothesis, stating the positive influence of mother's Internal Working Models of attachment to the responses of the adopted child (Verissimo, Salvaterra, 2006). In particular, "*secure*" mothers are more likely to have children who show an increase in coherence, with positive representations of self, others, and relationships. In contrast, adoptive mothers with a state of mind "*Unresolved*" have children who show higher levels of aggressivity in completion story task (Kaniuk, Steele, Hodges, 2004).

In addition, several studies (Barone, Lionetti, 2012; Pace et al., 2012) have highlighted how late-adopted children in contact with "*secure*" parents show a progressive change in the direction of security in the representation of self, others, and relationships.

A caregiver with a "*secure*" attachment model, which shows sensitivity and understanding towards the child's needs of caring is a parent who is able to mentally "contain" the emotional state intolerable for the child. In this way, he is able to respond with an attitude of physical care that helps to recognize the mental state of the child, but also to modulate emotions and feelings experienced as unmanageable. Several studies have pointed out that a good reflective capacity and a mother's "*secure*" attachment model are considered a good predictor of both metacognitive ability and the child's attachment security (Fonagy, Target, 2001).

In summary, an *Adult Attachment Interview* (1) "*secure*" attachment model, a good level in the quality of parenting, and a good ability to better understand the mental states of traumatized children in adoptive mothers allow late-adopted children to create positive interactions with their new caregivers and can be a mediating factor for the revision of attachment patterns of these children.

The case of Roxana

We report an example of a case of a child from Romania, adopted when she was six years old. About her pre-adoption history we know very little. Adoptive parents say that Roxana has been institutionalized since the age of thirteen months because the mother could no longer take care of her and brothers. The adoptive parents, referring to an association that deals with international adoptions, went to Romania and lived there for a month before they had all the permissions useful to take the child with them in Italy. In Romania, the life for both parents was not always easy, in addition to the enormous cultural and linguistic differences, they had many difficulties to obtain visas they needed. After few days of arrival in Italy the two parents of Roxana were contacted to participate in a research project of Sapienza, University of Rome. This project investigated, in a longitudinal perspective, attachment representations in

adopted children and adoptive mothers. This work wanted to investigate, in line with the studies previously quoted, the influence of adoptive mothers' Internal Working Models of attachment on the Internal Working Models of children (Pace et al., 2012). We also wanted to see whether the mothers' sensitivity, responsiveness and metacognitive ability could be considered protective factors for the adopted children. Therefore, the observations of Roxana and her mother consisting of two meetings, one at the time of adoption and the other at a distance of six months from the first. These two meetings were intended to investigate whether changes in the Internal Working Models of the child emerged according to the relational experiences with the foster mother.

Administred instruments

Here, then, is a brief description of the instruments that were administered to Roxana and her mother. The mother was administered the *Adult Attachment Interview* (AAI; Main, Goldwyn, 2002), a semi-structured interview that is able to capture the attachment representations in adults with respect to their childhood experiences. It consists of 20 questions on the relationship between the subject and his/her caregiver during childhood; is also asked to support these descriptions with specific memories. Is asked to reflect on how attachment experiences have influenced his/her adult personality and are investigated any experience of grief and trauma. The transcripts are assigned to the category "*Secure-Autonomous*" (F), "*Insecure-Dismissing*" (Ds), "*Insecure-Preoccupied*" (E), "*Unresolved-Disorganized*" (U), "*Can not Classify*" (CC). The *Reflective Function Scale* was applied at the *Adult Attachment Interview* transcripts (RF; Fonagy, Steele, Steele, Target, 1997), an instrument that measures the ability of the respondent to understand the mental states underlying behavior, their changes and their nature often defensive. The coding of this scale is based on several indices: the awareness of the nature of mental states, the explicit attempt to clarify the mental states underlying behavior, mental states in relation to the interviewer. This scale gives scores from high to low relative to mental functioning and is encoded on an ordinal scale from 1 to 9.

The *Separation-Reunion Procedure* (SRP; Main, Cassidy, 1988) was administered to the child; this is a procedure based on the model of the Strange Situation Procedure. It provides that the child lives two episodes of separation and two of reunion from the mother, and both are coded. The first coding concerns the scoring of the scale of avoidance and security. The second coding classifies the reunion behaviors in one attachment pattern. The final classification of behavioral attachment patterns, shown by children in preschool and school age, provides three categories: "*Secure*" (B) "*Insecure/Avoidant*" (A) and "*Insecure/Ambivalent*" (C). In addition, we have two sub-categories: "*Insecure/Controlling*" (D) and "*Insecure-Unclassified*" (U).

During the second meeting the child is subjected again to the *Separation-Reunion Procedure*. She was also given the *Manchester Child Attachment Story Task* (MCAST; Green et al., 2000), only during the second observation because of the difficulties of Roxana in speaking Italian well during her first period in Italy. In fact,

the *Manchester Child Attachment Story Task* is an instrument that consists of a story completion procedure. It provides the evaluation of a semi-structured situation game. It allows to identify the internal representation of attachment relationships in children of pre-school and school age. The task consists in four vignettes (the nightmare, the injured knee, stomach ache and losing the caregiver in a shopping center) which is believed to activate the attachment system. The interviewer uses a set of dolls, the child should choose the doll representing herself and the doll that represents her mother. Even in this case the final classification is given in categories "Secure" (A), "Insecure/Avoidant" (B), "Insecure/Ambivalent", "Disorganized" (D) and "Can not Classify" (CC).

Discussion

The mother's Attachment Model:

The mother's *Adult Attachment Interview* has been attributed to the category *Secure/Autonomous*. The woman seemed comfortable in telling the story of her past and in reporting her childhood experiences. The interview, in fact, is rich in specific episodes reported to the childhood relationship with the significant figures. Although life experiences described are not always positive there is a clear ability to accept and to process past experiences. The language appears to be consistent and fluid. She is able to recognize the effects of past experiences on her adult personality, to enhance relationships with parents during childhood and to express a balance and acceptance even while describing the negative aspects of her parents.

Here is an extract of the interview, which highlights this aspect:

"My father worked a lot, I never saw him, and when he was there he was lacking in affection. I wanted to play with him when I was little but I think he was acting this way because he had learned it from the way he was treated by his parents, that the father's task is to provide a material security to his family. It was his way of showing us that he kept us"

The mother's Reflective Function score:

Regarding the Reflective Function Scale, the Roxana's mother gets a score of 6, then, she shows a good reflective capacity. The woman, in fact, is able to properly express their mental states, has a clear understanding of her limitations in the ability to understand herself and others, explicitly recognizes that different people may perceive differently a given behavior or a given situation, recognizes the developmental aspects of mental states.

For example, during the interview when she was asked to express an opinion on the reason that pushed her parents to behave in the way she told, the woman replied:

"I think my father and my mother have never understood how I felt rejected by both of them, now, as an adult, I think at that time they have not realized how I felt, only now I can understand"

The attachment behavior of the child during the first and the second meeting: During the first meeting at the Separation-Reunion Procedure, the child has obtained a classification of an attachment behavior "*Insecure/Avoidant*". In fact, Roxana during the game although not very away from the mother, tends to focus on the task conducting and sometimes she does not respond to the questions addressed to her mother. Only towards the end Roxana shows affection towards her mother although very slightly. In fact, she seems to want hugging her, and remain with her for a few seconds and immediately come back to the games. During the second meeting of the Separation-Reunion Procedure, the behavior of attachment has been classified as "*Secure*". During the second observation, in fact, Roxana, sometimes, while remaining focused on the game, seems to be able to appreciate and feel comfortable when she is close to her mother. In fact, as soon as the mother return, the little girl hugs her, comes to her and gives her a kiss on the cheek.

The attachment representation in the child six months after adoption: Regarding the *Manchester Child Attachment Story Task*, administered at the second meeting, Roxana has obtained a "*Secure*" classification with respect to attachment to the mother. The stories of the child were always characterized by the presence of a responsive and sensitive maternal figure, ready to respond in a caring way to the fears and needs of care. The area in which Roxana, however, seems to be still lacking, even after six months of adoption is the capacity of mentalization. In fact, when the child is asked questions about her or her mother's mental state she gives answers very evasive. Probably, although Roxana has been able to internalize a model of dyadic interaction with a caring mother, only with more time she will develop the ability to reflect on her own and others' emotions, desires, hopes and expectations.

Conclusions

The example shows how the adoption can be a positive relational experience that likely to promotes the transition from an *insecure* attachment pattern, characterized by feelings of worry and fear of the other, and a *secure* pattern, characterized by an ability to trust and rely on the other, recognizing your own needs for care and nurturance. A child who has lived strong traumatic experiences, such as late-adopted children, comes into contact with a caring and sensitive parent only from the age of four/six years. Nevertheless, a figure which recognizes the emotional needs of the child and that emphasizes the affective aspects of the relationship will give the child the opportunity to review her traumatic and dysfunctional past history. In this way, the adopted child, experiencing new loving relationships, has the opportunity to change both the idea she has of herself as not worthy of being loved in order to begin to think of herself as in need of care and attention and the idea that the other is unpredictable and absent in order to begin to perceive the other as present both on the practical sense and, above all, on an emotional level. A "secure" mother is a emotionally present mother, who recognizes the importance of attachment

experiences and emphasizes the affective aspects of relationships, being able to accept the emotional needs of the child. The security of the Roxana's mother, we have had the opportunity to describe, has enabled the child to could rely and trust this mother. Roxana, probably, till then had been in contact with cold and emotionally detached caregivers and, as a defense, had locked and froze her necessity and her emotional needs.

In fact, during the first observation, Roxana showed no concern in absence of the mother, and when she returned, the child showed a detached attitude. The experience with a responsive, sensitive and "attentive to her needs' care" mother allowed Roxana to abandon her defensive behavior in favor of a balanced and coherent expression of her emotional needs and desires.

In conclusion, although with caution, it appears that a "secure" attachment model and a good Reflective Function in adoptive mothers may be the basis of a parental capacity to establish positive interactions and to understand the mental states that may be behind infantile, aggressive or rejection attitudes of this late-adopted children. It should be emphasized, finally, that the revision of the interactive patterns in late-adopted children is neither radical nor immediate, but seems to proceed in a gradual and progressive way. The security of the parents' Internal Working Models and their ability to reflect, together with the ability to give the child the opportunity to revise slowly negative representations of self and other, should be considered a factor that can facilitate the transaction to security (Steele et al., 2003).

Notes

1) AAI, Adult Attachment Interview (AAI, Main, Goldwyn, 2002) a semi-structured interview that is able to capture the attachment representations in adults with respect to their childhood experiences.

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