

A PUBLICATION OF
NATIONAL COUNCIL FOR ADOPTION

ADOPTION ADVOCATE

Nicole Callahan, *editor*
Chuck Johnson, *editor*

December 2014

NO.
78

The Post-Adoption Life: Supporting Adoptees, Birth Parents, and Families After Adoption

BY KRIS FAASSE, SARAH HORTON BOBO, AND ANGELA MAGNUSON

Introduction

Adoption. A special way for a family to be formed, and yet born of loss. A journey to navigate, with both joys and challenges. Not a one-time event, but a defining and ongoing experience.

As adoption service providers, we need to recognize that adoption is a lifelong experience and acknowledge the challenges for those touched by it. We need to be creative in finding opportunities for adoptees, adoptive family members, and birth family members to find and remain connected to vital and ongoing support from the adoption community. We want to change the perception that something must be “wrong” when a challenge arises and instead equip individuals to anticipate these needs. The goal is for all individuals impacted by adoption to feel empowered to ask for help and have their needs acknowledged and met.

There are many key areas and services to consider in developing a comprehensive view of post-adoption support. Some of the areas discussed in this article are based on common statements made by different individuals touched by adoption.



National Council
For Adoption

225 N. Washington Street
Alexandria, VA 22314
(703) 299-6633
www.adoptioncouncil.org

Acknowledging Loss and Revisiting Grief

“I thought that after a period of adjustment everything would be fine.”

Members of the post-adoption triad experience a range of losses, and grieving those losses can vary in intensity and in timing throughout one’s lifespan. Since there is no formula, no linear grief checklist, and no way to foresee the future, expecting the unexpected means maintaining communication and proactively seeking resources and support.

Early in placement, unmet expectations is a common theme of adoption-related challenges – expectations about the family’s adjustment or the child’s needs, expectations an older child may have about what it means to be in an adoptive family, or expectations for the birth parent about grieving, support, or contact with their child. All members of the triad can benefit from purposeful acknowledgement of both concrete and ambiguous loss. Processing grief throughout the post-adoption journey helps individuals develop healthy coping strategies and minimizes the potential for maladaptive behavior. Family therapy, support groups, and grief counseling can all be beneficial, and are good options to have ready prior to adoption finalization.

To prepare older children for adoption, a welcome book for the child that displays the adoptive family’s daily routine as well as expected people and places may increase the child’s understanding and minimize culture shock. After placement, grief rituals, such as releasing balloons with notes inside to loved ones or bedtime prayers for those a child is missing, can be good bonding experiences. Also, closure visits for children and birth family entering a closed adoption can be profoundly beneficial if facilitated by a trained, adoption-competent therapist.

Throughout the adoption journey, lifebooks are particularly helpful for children of all ages as they experience or revisit losses at new developmental stages, just as adults often look at photos of lost loved ones. Pictures and personal stories help preserve their memories, good or bad, and can be reviewed frequently to promote feeling awareness and communication. In open adoptions, encouraging the child and birth parent to create shared memories through stories, pictures, and traditions offers the opportunity to celebrate their connection rather than mourn its loss.

At times, members of the adoption triad may experience phases of intensified grieving. New loss can compound past loss. As a child grows in an adoptive family, thoughts and feelings may be triggered by school projects about family history, holidays, family gatherings, changing homes

Early in placement, unmet expectations is a common theme of adoption-related challenges.

or schools, losing close relationships, introducing a new sibling, or even a new developmental stage. It's important for parents to track and anticipate these moments. A family can discuss any observed patterns with their child and help prepare him with healthy coping strategies for future potential triggers.

Adoptive parents and birth family members may also revisit grief and loss. Some parents struggle with their children becoming independent adults. Other parents may experience perceived loss in status if their child pursues searching for birth family. Birth parents may experience mixed emotions of joy and grief during the pregnancy and birth of another child. When these moments arise, connecting with others within in the adoption community can provide a safe environment in which to express thoughts and feelings that others may struggle to understand or validate.

Maintaining Connection with Adoption Community

“When I realized I was in a place where I really needed help, I was so discouraged. I no longer knew where to turn.”

As years pass, some individuals become less involved with their adoption agency or adoption community. This may be a result of moving, changes with agency staff, or challenging circumstances which can cause some individuals to retreat.

As adoption service providers, we should intentionally cultivate opportunities to be available and reconnect with birth parents and adoptive families. There are many ways to check in with previous clients long after formal services have ended: sending a personal email on a child's adoption day; providing a post-adoption newsletter; and offering special events such as a family respite events, birth parent retreats, or adoption camps.

Adoption-focused conferences are also a powerful resource for educating participants and building relationships. Many different types of conferences take place annually: some that mainly target adoption professionals, some focused on triad members, and others geared for both. These conferences typically attract individuals at various stages in adoption – from those early in the process to the seasoned parents with multiple adopted children. Conference participants often report that they get as much out of the networking opportunities as they do from educational sessions. Refresh (www.occ.org/refresh), an annual conference in Seattle, is a unique event that blends education along with many energizing opportunities for adoptive parents. National Council for Adoption (www.adoptioncouncil.org) has a conference every year with a special track for current and

prospective adoptive parents. The Child Welfare Information Gateway also maintains a conference calendar at www.childwelfare.gov/calendar.

Support groups can also offer a multitude of benefits, and are constructed to meet different needs. Some individuals are looking for a socially oriented group to connect with others who have similar adoption experiences. Others prefer more educational, structured meetings. Groups that bring together individuals at various stages in the adoption process can also offer great benefit. Providing opportunities for expectant parents and birth parents to meet gives all an opportunity to share concerns that are ongoing or have already been experienced. It can be encouraging to see others how others have responded to challenges and to have the opportunity to participate in an empathetic environment.

Online support groups can also be a valuable resource to help connect individuals who may be geographically isolated or otherwise unable to attend an in-person group. The North American Council on Adoptable Children has a searchable database with 900 adoption-related support groups from across the United States and Canada at www.nacac.org/parentgroups/database.html.

Openness

“When I first started considering adoption, the idea of openness was scary. But now, while it takes work, I can’t imagine having it any other way.”

Domestic infant adoptions today generally involve some kind of contact between birth and adoptive families. Openness is also becoming more common in permanency plans for older children who are adopted out of foster care. Even in some international adoptions there may be an openness plan from the beginning. While communicating with the child’s biological family isn’t always possible at the time of placement, for many families it could be an option in the future, and for this reason it is important to educate and support families in understanding and maintaining openness.

At the heart of openness in adoption are relationships – relationships between birth family members, adoptive family members, and adopted individuals. No true or meaningful relationship is without its challenges and conflicts. Thinking about relationships with friends and family, the most satisfying ones usually have a higher level of emotional investment, which endures through both good and bad times. Relationships between birth and adoptive families have challenges, too. People may have different expectations of what the relationship should look like, especially in the beginning. Painful feelings of loss or grief may also affect these relationships.

Agencies can provide assistance in mediating these challenges, especially if there are difficulties concerning safety, respect for privacy, or boundaries. Mediated contact through an agency, even for a brief period, can offer both families an alternative to cutting off all contact with each other in the heat of emotion. Even in states where communication or contact agreements are not legally binding, there is a moral and ethical obligation to support the commitments that have been made regarding communication. In the long run, everyone touched by adoption stands to benefit from the investment of time, patience, and commitment to the relationship.

Training and Education

“We went through all of the classes you required and thought, ‘that’s not going to happen to us.’ And now we know, it can and it did.”

We spend a great deal of time working with individuals during the adoption process to provide education and training on adoption-related topics. As valuable as this is, it is also just theoretical until the adoption has taken place. When a child actually goes to live with the family, reality hits. Ideally, all the training and information from books, videos, and courses will come flooding back into everyone’s awareness. Practically speaking, it’s more likely that families will want to revisit much of their original training on attachment and bonding, child development, grief and loss, and other issues. Taking another look at a recommended article or video post-adoption may result in a whole different level of meaning and retention than it did prior to adoption.

It is often beneficial to provide a training at which prospective adoptive parents and post-adoptive parents can participate together. This allows prospective adoptive parents to hear about the experiences of those already parenting, and also gives post-adoptive families an opportunity to revisit some of the key topics from their pre-adoption training.

Another creative technique for keeping people engaged in ongoing education is through participation in adoption book clubs. These can be provided in person through an adoption agency, or via online resources such as adoptivefamiliescircle.com or creatingafamily.org. There are always new adoption-related books coming out, and keeping up can be a challenge. Having a book club not only benefits parents – it’s also a great resource for professionals.

There is no shortage of opportunities to continue post adoption education through online resources. Blogs, websites, and social media outlets exist to keep people connected and engaged in discussing changing information and learning about new resources. There are many resources available for birth

families, adoptive families, and adoptees. As with all things web-based, some of these resources are more accurate than others. Developing and maintaining resource lists with recommendations of preferred sites is a valuable service that agencies can provide. Magazines, newsletters, and documentaries can be another valuable source for ongoing information and education.

Adoption Parenting Practices

“We are looking forward to ‘firing’ you guys and want to get on with being a normal family.”

It’s essential to prepare families, giving them both realistic expectations and effective tools. It’s been said that parenting an adopted child is often different from parenting a biological child, for a variety of reasons. The most common difference, however, is in the attachment and bonding process. We sometimes find that this attachment process is rushed as families move forward with the daily tasks of living, perhaps forgetting that attachment can build slowly for adopted children – particularly those that have experienced trauma, abuse, neglect, or did not have previous secure attachments. Under these circumstances, challenges can quickly emerge, and purposeful efforts to develop secure attachment falls lower on the list of priorities or gets lost in focusing on increasing structure and correcting behavior.

Regardless of a child’s age at placement, the foundation for all other parenting tasks is building connections and instilling trust within the child. Without a solid sense of trust and safety in the caregiver, a child is less likely to accept the family rules, achieve appropriate physical and social-emotional development, and form genuine, healthy relationships. A child who has experienced trauma needs to feel safe (not simply be told he is safe) in order to reprogram his instincts from *fear-without-direct-threat* to *safe-unless-direct-threat*. Parenting techniques that emphasize nurturing rather than harsh discipline are often more effective with these children, as they apply attachment-building interaction simultaneously with establishing structure.

Trust-Relational Parenting Intervention® (TBRI), developed by Texas Christian University’s Child Development Institute, considers a child’s physical, emotional, and developmental needs, and promotes a balance of structure and nurture. Alternative parenting techniques are also offered in *The Whole Brain Child*; authors Siegel and Bryson explain how to help a child integrate language, feelings, and behavior in order to develop self-regulation and effective decision-making skills rather than react with survival instincts. Both TBRI® and *The Whole Brain Child* provide principles and techniques that transcend a child’s age, behaviors, and needs and both can be used with all children in the family.

Regardless of a child’s age at placement, the foundation for all other parenting tasks is building connections and instilling trust within the child.

Bethany Christian Services and other adoption-competent mental health professionals often utilize a trauma-informed modality or play therapy, such as Theraplay®, to encourage attachment and help the child to work through past traumatic events. In addition, trauma-informed therapy may be beneficial for educating families on how to shift maladaptive stress-response behaviors to more appropriate coping skills and self-regulation.

When attachment and bonding are difficult, there is also increased risk of depression for the adoptive parents. Karen Foli, researcher and author of *The Post-Adoption Blues: Overcoming the Unforeseen Challenges of Adoption*, has found that one common variable for depression in adoptive mothers is unmet expectations, not just of the child but also of themselves and their support network. If an adopted child already struggles to trust caregivers, a parent's depression symptoms may be perceived as a rejection or indication that the parent is unable to care for them. Survival instincts play out through the child's misbehavior or emotional distance that in turn exacerbates the parent's depression, creating a vicious cycle.

Another concept that mimics depression symptoms is blocked care. In *Brain-Based Parenting*, Hughes and Baylin explain that while depression is caused by changes in brain chemistry, blocked care is state of "unmanageable stress." The authors explain four types of blocked care as chronic, acute, child-specific, and stage-specific. One of the challenges with blocked care is that both parent and child trigger each other's maladaptive reactions. If a parent perceives her child's behavior as rejection, this may trigger her defense response – dismissive, angry, punitive, or unavailable. Then the child, who has a history with trauma or abandonment, may perceive the parent's response as rejection. In these situations, it is important for the parent to receive support in his or her role as caretaker, which may mean seeking individual therapy to gain additional insight into his or her attachment style and learn how to keep providing nurturing care to a resistant child.

Some adoptive parents may be apprehensive to report their personal struggle with bonding or depression due to fear of judgment or a sense of shame. Normalizing and screening for depression and blocked care in post-placement visits enables adoption workers to connect the family to appropriate supports and services. Formal assessment by a physician is also recommended to assess depression and treat as needed.

We also encourage adoption agency staff to explore how stay-at-home mothers in post-placement are finding a sense of identity, success, and self-worth outside of raising their children. Finally, connecting the family with other adoptive families is strongly encouraged, as they will be able to offer a unique kind of validation, empathy, and compassion to one another.

Identity Formation

“Everything was fine until...it wasn’t.”

Adopted children may begin to struggle with their identities as they become aware of how families form in different ways and compare their histories with those of their peers. Other children might be triggered by questions posed by strangers that they don’t know how to answer.

Just as lifebooks help children process grief and loss, they also serve as documentation of a child’s history. Depending on the specific details of the history and developmental age, children should be aware of their full story in pre-adolescence. Miscommunication or missing information can complicate the already complex developmental tasks of adolescence. Parents are encouraged to take the lead in adding details to their child’s lifebook and reviewing them periodically with their child. Families can also work with an adoption-competent mental health professional to guide them through sharing difficult history and helping the child process any thoughts and feelings that may arise.

Once an adopted child has reached adolescence, parents may have trouble differentiating what may be typical adolescent behavior versus a struggle with adoption-related identity. A frequent scenario reported by adoptive parents is how their child adjusted well within the family, but began displaying disruptive or isolating behavior during adolescence. These parents express feeling caught off-guard and unprepared. They are grieving the loss of the child they thought they had, while the child is grieving the loss of birth family or struggling to integrate the aspects of adoption that impact her identity. In these instances, we suggest that families re-educate themselves about adoption’s impact on developmental tasks, and consult with adoption-competent professionals if necessary.

It’s common for adolescents to explore the idea of searching for birth family if they are not already in contact. Experts in adoption frequently express the need for adoptive parents to support their child through this process, and to understand they are not being dismissed or replaced. More recent pre-adoption training has emphasized the benefits of maintaining birth family connections. If openness has existed since the child was placed, the child grows into that relationship with a support system in place. However, when opening a closed adoption, we encourage families to proceed with sensitivity and caution, and in a way that includes the child in an age-appropriate way. Children may initially be more comfortable with letters and pictures to begin rather than direct, face-to-face contact.

For adult adoptees searching for birth family, Michael Grand, author of *The Adoption Constellation*, emphasizes the need for adoptive parents to support and provide any known information without taking control of the process. Many support groups and blogs provide a wealth of stories detailing various aspects of searches. But it is also important for the individual adoptee to understand that his search may not look like the experience of another.

Assessments and Interventions

“His behavior is challenging and everyone has a theory about why. How do we find the right answer?”

It can be difficult for parents to sort through the various opinions that friends, family, and professionals have to offer about what causes challenging behaviors in children. It is important not to pathologize all challenging behaviors and to give adequate time for children and families to adjust to new circumstances. However, when problems persist over time, finding knowledgeable service providers who will look holistically at the child and her needs is critical to post-adoption success. Having a record of frequency, intensity, and any patterns connected with the behavior will also assist in getting a more accurate evaluation. It is tremendously beneficial for adoption professionals to be well-connected with a diverse array of service providers in their communities, so they are prepared to facilitate connections and provide recommendations. Parents should be advised to request copies of reports from any assessments that have been done prior to the adoption and maintain copies of all evaluations that are completed post-adoption.

The types of assessments that are needed and beneficial vary depending on the needs and age of the child. Initial assessments recommended for children adopted internationally are provided by the American Academy of Pediatrics at www2.aap.org/sections/adoption/PDF/InternationalAdoption.pdf. For children adopted out of foster care, a variety of assessments may have been completed prior to adoption, but adoptive parents might still need to seek additional evaluations from specialists to get a complete understanding of their child's needs. With domestic infant adoption, certain medical conditions may require early evaluations but many other potential areas of need may not be evident until the child reaches an older age.

When trying to understand the cause for challenging behavior or learning deficits, there are a few key assessments that can be particularly beneficial. A neuro-psychological assessment is an evaluation adoptive parents say is worth its weight in gold. Typically, neuro-psychological tests will examine a variety of skills and abilities, including:

It is important not to pathologize all challenging behaviors and to give adequate time for children and families to adjust to new circumstances.

- General intelligence
- Problem-solving
- Planning and abstract thinking
- Attention and concentration
- Learning and memory
- Language
- Visual and spatial perception
- Motor and sensory skills
- Academic skills

The results from the assessment can be used to tailor appropriate interventions for the child based on individualized areas of strength and need. This information can be helpful for parents, teachers, and service providers, and aid in long-term planning as well.

A commonly overlooked area when seeking evaluations is Fetal Alcohol Spectrum Disorders (FASD). While in recent years there has been growing awareness about the broad spectrum of effects caused by prenatal exposure to alcohol, FASD continues to go undiagnosed or be misdiagnosed by many medical and mental health professionals. Many mental health professionals may have not received training on the characteristics of FASD, as it was not included in the DSM until the 2013 publication of the DSM-V (which now has a category for neuro-behavior disorder prenatal alcohol exposure). Intentional advocacy on the part of adoptive parents or adoption professionals may be needed to create awareness about the need for this assessment and to educate professionals about the condition. The National Organization on Fetal Alcohol Syndrome has a resource directory that lists resources for diagnostic evaluations and other related services at www.nofas.org/resource-directory.

Sensory Processing Disorder (SPD) is another area that may be misdiagnosed or undiagnosed. Sensory processing disorder is a condition in which the brain has trouble receiving and responding to information that comes in through the senses. This can result in an individual being highly under- or over-sensitive to taste, touch, sound, smells, visual cues, etc., which can affect their behavior, adjustment, and school performance. The influence of difficult early pre- and post-natal environments can cause a child to have greater susceptibility to SPD. An evaluation by a knowledgeable occupational therapist can have a significant impact on a child's ability to succeed in activities of daily living. The SPD Foundation has a resource directory of providers available at spdfoundation.net/directory/index.html.

Conclusion

This article contains just some of the issues that may arise following an adoption. If you are interested in working collaboratively on post-adoption issues, consider participating in the Inter-Agency Post-Adoption Services Group founded by Holt International and Children's Home Society and Family Services of Minnesota in 2008. A variety of agencies now participate in the group, each one committed to providing quality post-adoption services to clients. The group dialogues and shares information regarding services at quarterly conference calls, and brainstorms ways to better serve all members of the adoption triad. If your agency is interested in joining, please contact Sunday Silver at Holt International: sundays@holtinternational.org. You can also find and share post-adoption events and resources at Adoption Parenting Pathways, a searchable database of adoption-related information, resources, and support, at www.adoptionlearningpartners.org/pathways/index.cfm.

Clearly, the diverse array of post-adoption support and services that might be needed cannot be the sole responsibility of one person, group, or organization. While there is growing awareness about the need for more adoption-competent clinical professionals and health providers, we have much work to do to develop broad sensitivity to the needs of individuals impacted by adoption.

BIBLIOGRAPHY AND RESOURCES

- Adoption Parenting Pathways Searchable Database: <http://www.adoptionlearningpartners.org/pathways/index.cfm>
- American Academy of Pediatrics: <http://www2.aap.org/sections/adoption/PDF/InternationalAdoption.pdf>
- Child Welfare Information Gateway Conference Calendar: <https://www.childwelfare.gov/calendar/>
- Elleseff, Tayana (December 2013). *Adoption Advocate No. 66: Recognizing FASD-Related Speech and Language Deficits in Internationally Adopted Children*. National Council For Adoption. Retrieved from: <http://www.adoptioncouncil.org/files/large/303580aaba94b2>
- Faasse, Kris (April 2013). *Adoption Advocate No. 58: Birthparent Issues of Grief and Loss*. National Council For Adoption. Retrieved from: <https://www.adoptioncouncil.org/files/large/1732cbb91ba9ef7>
- Foli, K., & Thompson, J. (2004). *The post-adoption blues: Overcoming the unforeseen challenges of adoption*. Emmaus, PA: Rodale Books.
- Grand, M. (2010). *The adoption constellation: New ways of thinking about and practicing adoption*. Ontario: University of Guelph.
- Hughes, D., & Baylin, J. (2012). *Brain-based parenting: The neuroscience of caregiving for healthy attachment*. New York: W.W. Norton & Company, Inc.
- National Organization on Fetal Alcohol Syndrome Resource Directory retrieved from www.nofas.org/resource-directory
- Purvis, Karyn, & Cross, David (July 2013). *Adoption Advocate No. 61: The Healing Power of "Giving Voice."* National Council For Adoption. Retrieved from: <http://www.adoptioncouncil.org/files/large/f7bb17e8fba418b>
- Refresh Conference: <http://www.occ.org/refresh/>
- Siegel, D., & Bryson, T. (2011). *The whole-brain child: 12 revolutionary strategies to nurture your child's developing mind*. New York: Delacorte Press.

Smith, K. (2012, Spring). Open Adoption Nurturing Relationships between Birth and Adoptive Families. Bethany Christian Services Lifelines, 18-20.

SPD Foundation Resource Directory: <http://spdfoundation.net/directory/index.html>

The American Board of Clinical Neuropsychology's Member Directory: <https://www.theaacn.org/findboardcertifiedcn.aspx>

The North American Council on Adoptable Children Database of Adoption-Related Support Groups: <http://www.nacac.org/parentgroups/database.html>

ABOUT THE AUTHORS

Kris Faasse, LMSW, ACSW is the Senior Vice President of Clinical Services for Bethany Christian Services headquartered in Grand Rapids, Michigan. In her 25 years of adoption-related practice, she has always worked with birth and adoptive families in open adoptions. She has written and trained on numerous topics, but the relationships involved in adoption is of special importance to her.

Sarah Horton Bobo, MA is the Director of Post Adoption Support and Education at Bethany Christian Services, where she focuses on supporting the delivery of post-adoption services through Bethany branches across the United States. Sarah has a Master's degree in Family Studies, and is dedicated to advocating for improved systems of care for parents and children.

Angela Magnuson, MA, LPC is a licensed professional counselor with a Master's degree in Marriage and Family Therapy/Counseling. Trained through Rutgers University's Certificate Program in Adoption, Angela worked for seven years as an in-home therapist with pre- and post-adoptive families. Currently, she is the lead staff for Bethany's Post Adoption Contact Center (www.bethany.org/pacc), a nationwide resource for anyone touched by adoption.



National Council
For Adoption

SUPPORT NCFA
DONATE ONLINE ►
www.adoptioncouncil.org