

THE IMPACT OF ATTACHMENT THEORY ON INTERNATIONAL ADOPTION

Implications of A Christian Worldview

*"Unthinking confidence in the unfailing accessibility and support
of attachment figures is the bedrock on which stable and self-reliant
personality is built."
---John Bowlby*

Introduction

This paper is presented in order to fulfill three primary purposes. First, the participant will be introduced to descriptive statistics and reports from previous studies on the prevalence of international adoption. Second, a basic overview of attachment theory will provide a working knowledge of key ingredients necessary for the healthy development of a child. Third, the implications of attachment theory will be applied to the issues surrounding transnational adoption. Lastly, implications from a Christian worldview will be provided in relation to attachment theory.

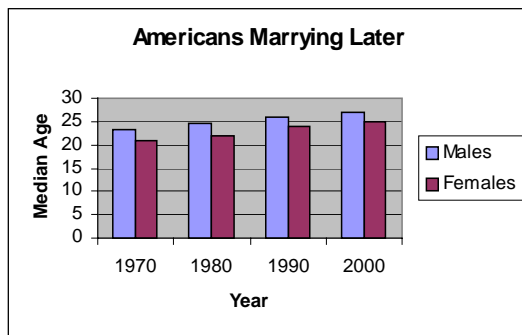
International Adoption

The idea of international adoption is not a new one. The practice of international adoption can be traced back to the Old Testament (Esther 2:7; I Kings 11:20). More specifically, it can be found in the second chapter of Exodus, beginning in verse ten. Here, Moses was gently laid into a basket by his mother and placed into the Nile River. This was done in order to avoid the impending slaughter of Hebrew male infants by the Egyptians. The pharaoh's daughter, while bathing in the Nile, discovered the infant child and adopted him

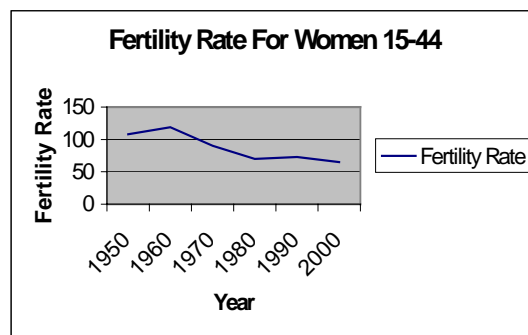
into the family (The NIV Study Bible, 1985). Paul uses adoption in reference to becoming a child of God (Romans 9:4). Within this framework, adoption takes place as people repent of the sin that separates and by God's grace are welcomed into the family of God. From the past to the present, and across all boundaries, the God-given mandate to care for orphans continues, whether domestic or foreign (James 1:27).

International adoptions have increased steadily over the last several decades. Families are seeking to adopt children for a variety of reasons including: infertility, religious faith or altruistic tendencies, as well as a desire to expand one's family. It is estimated that somewhere around 5.3 million couples are affected by infertility within the U.S. (Begley, 1995). Males and females are getting married later (figures 1.01-1.02) and there is a declining fertility rate with the typical family having 1-2 children (Kapstein, 2003; Macionis, 2004). So,

Figures 1.01-1.02



U.S. Census Data & the CDC



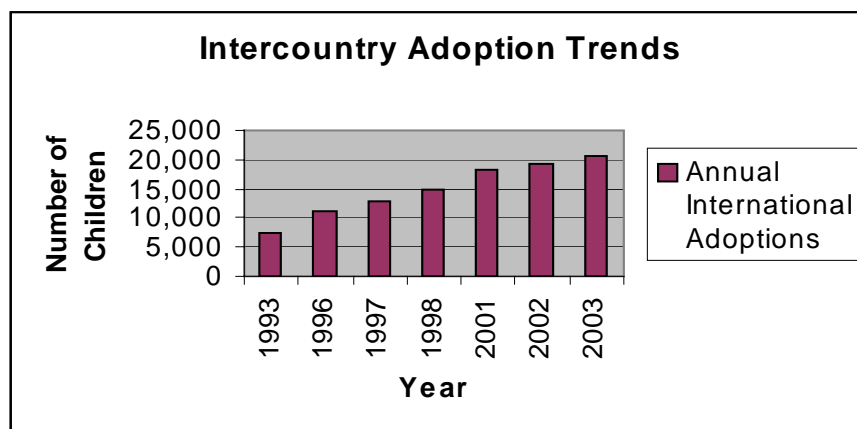
U.S. Census Data & the CDC

one can assume that there are many families within the U.S. seeking alternative means for establishing a desirable family unit.

Intercountry adoptions came about largely as a response to the overwhelming number of children orphaned or abandoned as a result of World War II, the Korean War and the Vietnam War (Masson, 2003). Although international adoption practices may have begun as a humanitarian effort, the trend continues to spiral upward. In 1993, there were 7,348 intercountry adoptions finalized in the U.S. By 1997, this figure had grown to 12,743. In

2003, there were 20,443 transnational adoptions within the U.S. (refer to figure 1.03).

Figure 1.03



U.S. Department of State: Office of Children's Issues (2003)

Transnational adoptions are not limited to one particular country or region. In fact, adoptions from China have increased dramatically between 1985 and 1998 (Rojewski, et al., 2000). Between 1989 and 2003, there were approximately 40,598 Chinese adoptions finalized in the United States (U.S. Department of State: Office of Children's Issues, 2003). In addition, there is a growing number of Korean adoptions. This is especially noticeable in the 1980's, where over 40,000 Korean native children were adopted by American families (Yoon, 1997). Kim (1995) found that approximately 100,000 Korean adoptees now reside in the United States.

There is a growing interest in Eastern European adoptions. Many of these adoptions are centered on the regions of Romania and the Soviet Union. To date, there are approximately 38,391 Russian children residing in America due to adoption placements (U.S. Dept. of State: Office of Children's Issues, 2003). When considering Romania, there have been approximately 8,294 children placed in adoptive care within the U.S. (U.S. Dept of State: Office of Children's Issues, 2003). Because of the growing interest, there has been an influx of

studies targeting Eastern European adoptions. As has been the case with studies

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focusing on Korean and Chinese adoptions, most of the studies have been focusing on post-adoptive adjustment. Thus, these studies are addressing concerns centering on the age at placement, length of time spent in orphanages prior to placement, orphanage conditions (i.e. poor sanitation, worker to child ratios), the effects of child maltreatment, family structure, parental readiness, differences in intercountry adoption policies, adoptive agency structure, and attachment and psychosocial dimensions as they pertain to the adjustment of children placed through intercountry adoptions. (Yoon, 1997; Chisholm, 1998; McGuinness, 1998; Kramer, 1999; Finzi and associates, 2000; McDonald and associates, 2001; Simmel, 2001; Grob, 2003; Judge, 2003).

Non-Regulation of Intercountry Adoption

When considering intercountry adoption, it is interesting to note that this practice has been largely unregulated until only recently. Historically, this gave rise to abuse and misuse within the system. Often, there have been reports of baby trafficking or the selling of babies (Hollingsworth, 2003; Kapstein, 2003; Varnis, 2001). Without regulations, documents were falsified, children kidnapped, and children were housed in less than acceptable orphanages (Kapstein, 2003; Nicholson, 2002). Without international policies to provide guidelines for intercountry adoption transactions, a myriad of inconsistencies emerged.

It was not until the United Nation's passing of the Hague Convention on Protection of Children and Cooperation in Respect of Intercountry Adoption of 1993, that service guidelines were instituted internationally. However, many countries still have not ratified this legislation. The United States did not ratify the legislation until the passing of the Intercountry Adoption Act of 2000. China and Russia followed suit within one year after the U.S. ratified the Hague Convention (Masson, 2001).

Description of Attachment Theory

Within the Child Welfare system, attachment theory has significant implications for the work that takes place between the adoption professional and the family. In addition, it is relevant to prospective adoptive parents. For this reason, this work will be dedicated to providing a critique and analysis of the theory, with the ultimate goal of building a more comprehensive understanding of the theory and its role within the practice of adoption. More specifically, an understanding of the theory will provide a framework for addressing the various issues that arise during transnational adoptions.

In order to bring about a clearer understanding of the theory and to assist practitioners and/or others concerned with assessing its usefulness, a few key issues will be addressed. First, the reader will be introduced to the purpose of attachment theory. Second, a thorough delineation of the theory will be presented which will touch on the following areas: history, goals, population and techniques or methods.

Purpose

The purpose of attachment theory should be differentiated between that of the psychoanalytic and social learning theories. The purpose of attachment theory is to ascertain the impact of and the quality of the bonding relationship between child/parents and to explore the implications of such attachments on future relationships and interactional skills. Attachment theory is concerned with the bonding experience that takes place between the child/parent that is based primarily on security, proximity and safety (Bowlby, 1958). Bowlby (1958) stated that attachment seems to emanate from a biological desire for proximity or closeness. In addition, it may meet a survival need, whereby children seek

the protection of their caregivers (Bowlby, 1958). The type or quality of the bond can have lifelong implications.

In contrast, Psychoanalytic and Social Learning theories view the relationship or bond between child and parent as resulting from secondary drives

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(Cassidy, 1999). Therefore, relationships would be viewed as being solely resultant from being fed by the parent/significant caregiver, or from the pleasure that is derived from having hunger drives satisfied (Cassidy, 1999).

In exploring the purpose further, participants are expected to gain insights into the consequences of positive versus negative attachments. The child that forms a healthy/secure attachment feels free to explore his/her environment and later uses the attachment framework in future relationships even into adulthood (Ainsworth, et al., 1978). Whereas, those that form negative attachment bonds (i.e. avoidant, ambivalent or disorganized) experience difficulties in initiating or maintaining social relationships and are at higher risk of developing psychopathology (Ainsworth, et al., 1978; Cassidy, 1999). John Bowlby pointed out that there is a "strong causal relationship between an individuals experiences with his/her parents and his/her later capacity to make affectional bonds" (Bowlby 1979). A historical review of the theory may be necessary at this point to gain further insights into the foundational premises and origins of attachment theory.

History and Background

Attachment theory began during the foundational work by John Bowlby. Bowlby was originally trained in the Psychoanalytic school of thought (Bowlby, 1958; Bretherton & Munholland, 1999). Bowlby (1958) began work on the new theory, because he was not satisfied with the approach taken by psychoanalytic and social systems theorists regarding parent and child relational bonds. It was difficult to accept the notion that such bonding could be the result of secondary drives. Ego psychologists and object relations theorists saw the child's earliest

relationships as having the greatest impact on the development of mental health problems and illness. It was not until John Bowlby's focus on attachment, that studies would begin to center on the association between close relationships and subsequent behavioral disorders (Greenberg, 1999). Bowlby's newly proposed theory was rejected and viewed as unorthodox by Psychoanalytic theorists. As

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a matter of fact, attachment theory did not become recognized as a valid theory until the latter 1970's and early 1980's (Cicchetti, et al., 1995).

Bowlby (1958) introduced the idea that children developed a behavioral system that was comprised of a variety of cues that are intended to illicit a response from the parent or significant caregiver. Accordingly, behavioral systems include responses of the child or individual related to locomotion, feeding, reproduction, caregiving, attachment, exploration, sociability and fear/wariness. According to Bowlby (1958), the attachment of the child to the parent allows the child freedom to explore his/her environment. Through a healthy attachment, the child "develops toward increasing self-reliance over time" (Marvin & Britner, 1999). Through such security, the child eventually becomes "progressively less dependent upon the parent to provide protection" and thus has developed an internal working model (IWM) from which to base future interactions (Marvin & Britner, 1999).

The IWM is a schema or cognitive framework that is developed based on prior experiences and expectancies of the parent's response to the child's behavioral system or the child's compensatory behaviors resulting from the parent's lack of sensitivity to behavioral cues (Bretherton & Munholland, 1999). This then becomes the attachment structure from which the child bases future interactions. The behavioral system is activated when the child feels threatened, fearful, anxious, or at other times when the child feels a need for comfort. For instance, as a child explores his/her immediate environment, and experiences an anxiety-provoking event, the fear system is activated, thus resulting in crying. This behavior is intended to make the parent aware of the need for close

proximity. If the parent is sensitively responsive to the child's behavioral system, the child develops a healthy or secure attachment. However, if the parent is non-responsive, an avoidant attachment may result. If parents are inconsistent in their responsivity, the child may develop an ambivalent attachment (Pederson & Moran, 1995).

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Population

Based upon the foundational work of Bowlby and the extension of his work by Mary Ainsworth, the applicability of the theory is widespread. It is often referred to as being a life span approach. Thus the clinical application of the theory would focus on exploring issues such as fears, separation anxiety, marital/relational problems, trauma, and grief as having possible roots in early attachment experiences. Being a life-span approach, it would view problematic issues with adults and children as stemming from attachment deficiencies.

Goals

This brief discussion on the clinical population can better be explained by reviewing the goals of attachment theory. The goals of attachment theory ultimately aim at identifying problems that may be rooted in early attachment experiences and to provide appropriate intervention strategies, which seeks to build trust, and provide safe environments for exploration. Ultimately, it is an approach that provides alternative strategies for empowering the client/adoptee to overcome previous attachment related issues. A more specific description on the goals of attachment theory will be provided in the following paragraphs.

Greenberg (1999) specifies four possible goals for attachment theory. First, it is to "provide a critical developmental framework for understanding how early and continued close relationships affect the cognitive-affective structures that children use to construct their expectancies, views of the world, and coping strategies." (Greenberg, 1999). Second, it is to understand more clearly the psychopathology that can develop among children when there is an "absence of

a significant attachment relationship, significant distortions in the quality of care, or traumatic disruptions or losses of attachment in childhood" (Greenberg, 1999). Third, attachment theory would view adult related issues as centering around thoughts, emotions and expectations about affectional relationships (Behavioral Systems) as being elicited when experiencing stress, injury, or when frightened. Therefore, the ultimate goal would be to assist the adult in reclaiming

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psychological and physical wellbeing (Greenberg, 1999). Lastly, attachment theory is a valuable approach for improved services to children in the areas of family (parental caretaking), adoption, foster care and even institutionalized care for children. This is done by informing practitioners, foster/adoptive parents, and policy makers on the implications of attachment theory to a knowledgeable understanding of client related issues and future intervention or preventive planning. Now that the goals of attachment theory have been reviewed, what strategies or techniques are implemented to accomplish these goals? Further discussion on this issue will be covered in the section below.

Techniques/Methods

As is the case with any theory, usefulness and application to practice is essential. In what ways can the goals of attachment theory be fulfilled? The following discussion will concentrate on the various techniques and/or methods that are most commonly used in assessing attachment or addressing attachment related disorders among young children.

One of the most commonly used techniques in assessing attachment style or determining the quality of attachment is that of using the "strange situation." In using the "strange situation," the practitioner sets up a situation whereby the parent, child and a stranger are present in the same room. The parent is then cued to leave the room at a particular time and the child is left in the presence of the stranger. At this point, the therapist observes the behavioral response of the child to the departure of the parent (Ainsworth, Blehar, Waters, & Wall, 1978)

In securely attached children, there may be short bouts of crying, and searching for the parent. However, this child will generally resume play within a short period of time. When the securely attached child is reunited with the parent, the child is receptive and recognizes the parent's presence. This child is easily consoled. Following the reuniting of the parent and the child, the child may again begin to explore the environment (Ainsworth, et al., 1978).

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When separated from the parent, the avoidantly-attached child may not show any distress during parental separation. Often, this child will become more responsive to the stranger than to the parent. When the parent is placed back into the "strange situation," the avoidantly-attached child will avoid looking at the parent and may even ignore his/her presence. (Ainsworth, et al., 1978).

Lastly, some children experience extreme anxiety when separated from the parent. These children demonstrate such discomfort by clinging to the caregiver and will often be fearful of exploring his/her environment. When the parent leaves the room and is then reunited with the child, an ambivalently attached child will become angry and display resistive behaviors (Ainsworth, et al., 1978).

Within the "strange situation" or other settings, practitioners have utilized other measuring instruments to assess anxiety, fear and a variety of other factors experienced as a result of the behavioral systems being activated. Salivary measures involve taking small amounts of saliva so that cortisol levels may be measured, which provide direct information related to anxiety. The results of using cortisol levels has shown positive results in comparing the plasma level of secure and insecurely attached children (Hertsgaard, et al, 1995; Nachmias, et al., 1996). In addition, EKG's (electrocardiograms) may be utilized in order to assess the heart rate of children within the play environment or when placed into an anxiety provoking situation. This technique has also yielded

positive results within the clinical setting (Fox and Gelles, 1984; Stroufe and Waters, 1977).

Also, the Attachment Q-sort or (AQS) has been used to classify children outside the “strange situation” as either being securely, avoidantly or ambivalently attached. This method was designed by Mary Ainsworth to systematically measure the child’s level of attachment in a more natural setting (i.e. the home environment). In order to use the AQS, there must be two raters. The mother and the father can perform the rater role. Therefore, it provides for

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more flexibility. This measure has shown to have convergent validity with that of the “strange situation” (Ainsworth, et al., 1978; Belsky and Rovine, 1990).

An additional method that may be used to assess a child’s style of attachment is the AHQ (Attachment History Questionnaire). Again, this instrument allows the researcher flexibility in the study of attachment. This questionnaire can be completed by the primary caregiver of the child. It has shown to be both reliable and valid as a measure (Pottharst, 1990).

Another technique that is used in assessing attachment security is that of Doll play. More specifically, Bretherton and Associates (1990) developed a procedure, whereby children complete a set of five stories pertaining to spilling juice, hurting their knee, discovering a monster in the bedroom, parents depart and parents return. The therapist provides the child with the beginning of the vignette and the child is asked to complete the ending using doll play (Bretherton, et al., 1990). This provides insights into the IWM (Internal Working Model) of the child by gaining insights into their parent’s typical response to the child’s behavioral cues. Thus, it is helpful in establishing the attachment style of the parent, which in turn, influences one’s parenting approach.

Within a clinical setting, it may be necessary for the therapist to take a more active role. This may involve actually becoming an attachment figure for the client, in order to “provide a secure base from which the client can then

explore and rework his or her representational models of self, others, and relationships" (Berlin & Cassidy, 1999). Attachment –directed interventions may be employed by the therapist to gain insights into the parents' parenting and attachment style, and then later, help the parent(s) learn to be more responsive to their child's behavioral system (Berlin & Cassidy, 1999).

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Implications of Attachment Theory on Transnational Adoption

The life of the child placed internationally is quite complex. Often, there are a myriad of extenuating circumstances that add to the already difficult task of forming healthy attachment relationships. Many of the children have suffered extreme abuse, whether it's in the form of neglect, or in the form of physical or sexual maltreatment. In addition to the abuse, children are often abandoned by their parents and live on the streets (i.e. Russia, Romania, Guatemala, Africa). Many of the children in Africa have been abandoned due to the large number of adults dying from AIDS (Masson, 2003). These children also live in a state of extreme poverty, very different from that of the United States. This is worsened by the fact that many of the children placed for adoption are housed in dilapidated, poor, and overcrowded orphanages. These situations create many obstacles that may impede the healthy development of attachments.

The central beliefs and needs of children adopted internationally are not much different than those placed through domestic adoption. First, does the child feel worthy of being loved? Second, does the child feel competent enough to get the love needed? Third, does the child view others as being reliable and trustworthy? Lastly, are others available and willing to respond when needed? (Clinton; Sibcy, 2002).

The premise of attachment theory has helped practitioners, parents and other caretakers to identify and develop services to enhance the attachment bond of international adoptees. Currently, agencies now focus on pre-adoption counseling and/or educational services that help to make the prospective parents aware of attachment related issues and the special needs status of the child. Through this process, parents come to understand the child's individual attributes, behavioral proclivities, and the necessity of responding to the child's signals (Broberg, 2000). Parents are also encouraged to explore their own personal childhood attachment representations. Within a counseling setting this

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allows for behavioral changes necessary to alter mental schemas related to previous attachment dysfunctions. This is crucial when taking on the task of parenting children who have the potential for developing an attachment related disorder.

Agencies have developed more systematic procedures for enhancing early attachment between the parent and the potential adoptee. The separation time between an identified adoptable child and the potential adoptive parents has been reduced. In many cases, the adoptive parents spend about two to three weeks in the host country in order to finalize the process and to allow an initial period of attachment.

Finally, various risk factors are considered that can often disrupt the child's ability to adjust and form attachment bonds. As mentioned previously, many of the children have lived in an institutional setting for 6 months to 5 years prior to adoption (McGuiness, 1998). Also, many of them have low birth weight and some may have health or mental problems. Depending on the age of the child, potential adoptive parents must be educated on the cultural differences and the sensitivities necessary to create an environment conducive to the development of healthy attachments. In addition, the emotional stability of the potential parents must be considered. This includes receiving a child that matches the emotional readiness of the parents. Some parents are better suited

to address the more severe emotional or physical needs of children (Maffat & Thoburn, 2001; McDonald, 2001; McGlone, et al., 2002). Studies have shown that families that are well attuned to the child's needs, who have positive attitudes and coping abilities are likely to succeed in developing strong relationships with their children (McGuinness, 1998; Kim, 1999; Judge, 2003). This serves as a buffer against some of the various factors that may impede early attachments.

Families of intercountry adoption have grown over a period of many years. Many of them have formed networks based on the specific needs of their

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family. This serves to meet the emotional and physical health of each family. The emotional health of the parents through supportive networks, have provided the impetus for change at the agency, federal and international level. All of this serves to enhance the transitional experience of the foreign born adoptee.

Implications of A Christian World View

One of the foundational beliefs about God that is held by those who profess to be a follower of Christ, is that God expresses unconditional love that is frequently relayed through a consistent and dependable character. We all want to experience this love.

Unfortunately, so much today competes for and tears at our love in relationships. And over time these relationships can become challenging and even seriously flawed. When these relationships sour, our sense of well-being can sour as well, we pull inward to protect our hearts. Distancing takes root. Empty yet expecting, we'll work to fill the holes in our souls with other things like work, play, or entertainment, which may become other "lovers" to give us purpose, meaning, and value. Before long, we only intensify our aloneness, magnify our broken selves, and maybe even deny our God and cause more hurt to "others." The persistent cry is simply for someone to love us, to hold us tight. Our need for relationship is even more powerful than our need for food. In today's time-starved world, we need each other more, not less

(Clinton & Sibsby, 2002).

When faced with troubled times, often people seek refuge and safety in God. From this sense of security, Christians walk confidently through life (Clinton & Sibsby, 2002). However, the very thought of separation from God produces feelings of loneliness and despair. It is this same belief that each individual seeks in developing attachments or relational bonds with others (Clinton; Sibsby, 2002). It is from within this same framework that parents (peers, family, etc.) help to develop strong affectional bonds. As children feel a

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sense of proximity or closeness to the parents based on their responsiveness to the child's IWM, the child will experience a sense of safety, which will provide a secure base from which to explore. Anytime that the child experiences fear or anxiety, the security of the parent provides comfort (Ainsworth, 1978; Bretherton & Munholland, 1999; Clinton & Sibcy, 2002).

Becoming attuned to our own attachment representations can only help to make us more effective as people who are seeking to build relationships. Awareness of this theory can enhance the approaches taken toward our own children and may prepare us to take on the role of caring for those children whose cry for love can still be heard. This theory is but one piece of the puzzle from which God has made available. J Gresham Machen said that it is our responsibility as Christian Scholars to interact with modern thought and to connect this knowledge to the regenerative relationship with Christ, so that it may be used to His glory (www.markers.com/ink).

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