



## **Parenting to Promote Attachment**

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### **What is Attachment, Why Does it Matter, and Why are Institutionalized Children at Risk for Attachment Problems?**

#### 1) What is attachment?

Attachment is a special and enduring relationship between a child and a significant person or persons. It involves deep feelings of trust, pleasure, security, and mutuality

Attachment develops after many cycles of an infant having needs met by a loving, reliable, nurturing caregiver who is emotionally attuned to the infant's needs

Attachments are social, emotional, psychological, and biological in nature. First attachments create an operating model for how one understands one's self, other people, and the world at large

Within the context of a loving relationship, an infant learns:

- I am lovable, and have a joyous impact on the world
- I am competent at getting these people around me to meet my needs, and important enough that they want to
- I can trust these people to be there for me
- The world is a safe, nurturing, predictable, and good place to be.

Attachment processes stimulate biochemical and cellular changes in the developing brain. Overall brain development is profoundly influenced by attachment relationship experiences. Cognitive functioning, organization of ideas, and interpersonal capabilities rely on cellular pathways in the brain which develop as a result of early attachment relationships

## **What is life like in institutional care?**

Young infants lie on their backs, swaddled, staring at the ceiling; older infants and young toddlers lie in a playpen. Older toddlers and preschoolers wander around a playroom by themselves. There is little adult interaction, with little face-to-face verbal or social communication.

Caregivers are too few in number, and change in shifts, so crying because of pain or illness is not reliably met with a caring response. Food, diaper changes, etc come not when a child needs them, but when the schedule says it's time. Feeding practices are frequently unpleasant, and rarely social. When children do get food, it's never enough.

Some children experience physical, sexual, or emotional abuse in addition to neglect.

## **What Do Children Learn in this Setting?**

*It's every kid for himself.*

*Don't trust adults, because they don't do much that's useful anyway. They might be here now, but they probably won't be there next time you need them.*

*Eat as much as you can, whenever you can.*

*Be careful at night – you're really on your own then.*

These are lessons you'll need to understand, and teach your child alternatives to, after your adoption.

## **How do Children Cope With this Setting?**

Children develop strategies to manage the experience.

Some children need very little in the way of adult attention, and get enough to meet their needs. Others develop self-stimulatory activities to comfort or entertain themselves, or become very withdrawn

Children learn to manage pain in their own way. They learn to ignore it. They don't seek adult comfort when hurt. Children learn to always remain on alert for danger.

These strategies are adaptive in an institutional setting, but can get in the way of developing healthy attachment relationships once children move into a nurturing family environment.

## **How Can Parents Help Children Adopted from Institutional Settings to Develop Healthy Attachments?**

Think ahead before your child comes home. Think of your new child as a newborn psychologically, in an older child's body.

Maximize the amount of time you will be able to spend at home with your child. Use as much parenting leave and vacation time as you are able. Plan for quiet time at home, not busy activities or large celebrations. Prepare friends and relatives ahead of time – ask for short visits with small groups

Visits will need to be flexible, and respectful of your child's needs. Think about your own parenting style, and (if you are parenting with a partner) that of your partner.

Prepare ahead of time for child care needs if you will be returning to work. Visit sitters or daycare facilities, and assess their sensitivity to your child's new attachment needs. Pack attachment-friendly items to bring with you on your trip: think small, lightweight, and simple (and safe for young children – even older children may play with toys in a less mature way).

Take toys that have the possibility of reciprocity: a soft blanket, a cuddly baby doll, an inflatable beach ball, a toy car, bottles of bubbles. Take

Take books: tactile books, lift-the-flap books, a picture book of your home, your family, your dog.

Take food: plenty of formula for infants and toddlers; a bottle with plain nipples, and sippy cup without valve; plenty of small, safe, not-too-messy snacks for older infants on up (Cheerios, cereal bars, etc).

### **Parenting to Promote Attachment – Beginning Right in your Hotel Room**

Meet your child where he or she is emotionally and affectively. Try to identify your child's emotional state, and attune yourself to that.

Mirror your child's expressions, vocalizations, and level of excitement.

Recognize grieving in children. While you have looked forward to this day for a long time, your child experiences it as a sudden – and often unexplained – loss of everyone and everything she has ever known. Especially for children who have had significant attachment relationships, grieving may last for a few days or a few weeks, and often looks like unexplained crankiness, clinginess, or crying, as well

as regression of skills or behavior. As you comfort your child through her grief, she will transfer those attachments to you.

Look for and use opportunities to hold, snuggle, nurture, and soothe your child. The early attachment process revolves around physical touch, satisfying eating needs, and sleep needs. Social games such as peek-a-boo, and those interactive toys you packed, are nice for promoting eye contact and pleasant interactions without being intrusive or promoting anxiety.

You cannot “spoil” your child by holding her too much or by giving her too much attention!

### **When You Arrive Home – The First Weeks and Months**

Spend as much time at home together with your child as you can. *The most important thing your child needs to learn over her first months home is that she has a special relationship with you.*

Limit the number of people who get to hold, feed, and snuggle your child. Build concentric circles of relationships for your child, with parents at the center, then grandparents and other special family members and friends, then more casual relationships later. When people offer to help, ask them to help with household chores – shopping, cooking, etc. – so that you can spend more time with your child.

Children need the help of parents to integrate all of their new experiences - eating and sleeping are tasks where children are particularly vulnerable, and frequently need lots of support.

#### Eating

Most children eat huge amounts – let them!

Most children need to catch up physically, and all children need to learn to trust that parents can be counted on to provide another part of the attachment process.

Children need to learn that they can stop eating when they feel full, and trust that more will be available when they need it later. Older children may hide or hoard food – an adaptive behavior if you’ve learned that there’s never enough.

Leave healthy, safe, and not-too-messy snacks readily available and visible to your child. Show her that whenever she needs food, you will provide it for her.

Some children struggle with eating – may be from sensory aversions, and/or motor coordination problems resulting from unpleasant feeding practices experienced in the orphanage.

Start with what children will eat or drink, and gradually work up in texture and variety. In the context of warm and nurturing feeding practices, most children will begin to expand the variety and volume of their intake.

Children who struggle with eating for more than several weeks should be referred to a feeding therapist.

Children need to eat to grow. You don't want feeding to become a frustrating battle for parent or child; it needs to be nurturing and helping the relationship to grow.

### Sleeping

Remember that most children have never slept in a bed or a room alone, and maybe never in the dark.

Just as for adults, anxieties are much harder for children to manage when they're tired.

Remember that the world as your child knew it has just turned upside down. Meet anxieties around sleep with constant verbal and physical reassurances that, "whenever you need me/us, I'll/we'll be there." Sleep with your child if that comforts her.

Make sure that the setting is safe for a young child. Remove falling or suffocation risks.

If you don't want your child in your bed forever, then sleep in her room – it's easier to wean yourself out of her room than the other way around! A mattress on the floor of your child's room works well. Gradually wean yourself out of your child's bedtime and sleep routines, as she becomes more and more secure in her attachment to you over her first months home.

Provide as much support as your child needs, but as little as she lets you get away with. Your long-term goal is a pleasant bedtime routine, such as a story, a kiss goodnight, and then a full night's sleep for all – but this can only happen once she trusts that when she really needs you, you'll be there.

Helping your newly-adopted child to develop strong attachments is a labor-intensive endeavor, but it's a labor of love, and one with huge long-term rewards for parents and children alike.