Attachment representations and adoption: associations between maternal states of mind and emotion narratives in previously maltreated children

Miriam Steele, Jill Hodges, Jeanne Kaniuk, Saul Hillman & Kay Henderson
London

Abstract This paper reports on associations observed between Adult Attachment Interviews (AAIs) obtained from adoptive mothers, and emotional themes appearing in doll play narratives obtained from their recently adopted children. The children, aged 4 – 8 years, carried into their adoptive placements a history of consistently serious maltreatment, including neglect and abuse. Results reveal strong and significant influences of maternal state of mind regarding attachment upon their adopted children’s story-completions. Mothers whose AAIs were judged insecure (either dismissing or preoccupied) were likely to have adopted children who, three months after placement, provided story-completions with higher levels of aggressiveness as compared to the stories provided by children adopted by mothers with secure-autonomous AAIs. Children whose adoptive mothers provided AAIs indicative of unresolved (as opposed to resolved) mourning regarding past loss or trauma provided story completions with higher scores for emotional themes such as ‘parent appearing child-like’ and ‘throwing out or throwing away’. Results also include a qualitative section that provides narrative excerpts of maternal AAIs and children’s story-completions. Discussion concerns the contribution these findings make to the literature on intergenerational transmission of attachment patterns, and the implications these findings have for child clinical work and social policy.

Keywords Attachment; emotion narratives; maltreatment; adoption; Adult Attachment Interview or AAI.

Introduction

There is strong and compelling evidence, from both psychoanalytic case studies and developmental research, of intergenerational patterns of attachment (Fraiberg et al., 1975; Steele, 1990; van IJzendoorn, 1995). Yet until recently the evidence of psychosocial links between adjacent generations (i.e. from parent to child) was based exclusively on studies of children linked genetically to their parents. Thus, researchers
have collected measures of child characteristics such as temperament or learning difficulties (van IJzendoorn et al., 1992), or have obtained assessments of both mothers’ and fathers’ representations of attachment (e.g. Steele et al., 1996), in order to demonstrate that the observed links between the infant—parent attachment and parental characteristics cannot be reduced to child characteristics or to the child’s relationship with the other parent. In this way, social transmission of attachment patterns across generations has been demonstrated. The claim that a parent’s worries, fantasies, hopes and dreams influence their child’s social and emotional development is hardly controversial and generally assumed by child psychotherapists. But against the background of books (weak on science but huge on popular appeal) suggesting that parental influences upon children are vastly over-estimated (e.g. Harris, 1998; Pinker, 2002), there is urgent need for studies which document the important influence caregivers have upon their children’s emotional well being. One important way of examining such social transmission is studying children and their carers who are genetically unrelated (e.g. Dozier et al., 2001; Stams et al., 2002).

The present study belongs to this literature. We report here upon the observed links between representations of attachment among adoptive mothers, obtained immediately prior to placement of a late-adopted maltreated child, and the emotion narratives provided by these children within three months of the placement. Why might we expect to see evidence of links between independently collected emotion narratives of parent and adopted child so soon after placement? In predicting an overlap between the adoptive mothers’ responses to the AAI and their newly placed children’s responses to a range of attachment story-completion tasks, we were drawing on the conceptual understanding that these two tasks shared some similar features. As well, previous research has shown meaningful and statistically significant overlap between Adult Attachment Interviews of mothers and story-completions of their genetically linked, and raised from birth, children (Steele et al., 2003). Below, we briefly review this evidence in the context of elaborating on the AAI and one widely used approach to coding children’s story-completions.

The AAI and attachment story-completion tasks

Both the AAI and attachment story-completion tasks are interview techniques where the respondent’s audio-recorded narrative (the story stems are also video-recorded) is the focus of close scrutiny by trained raters. Both tasks demand that the respondent consider what they might do (or have done) when faced with emotionally challenging situations that are part of everyday childhood experience, including emotional upset, physical hurt, separation from parents, parental discipline, and rejection/exclusion. Further, in both tasks there are specific prompts that invite the respondent to express how they think a parent ought to behave in response to a child’s misdemeanours. And, finally, both interview methods tax speakers’ capacities for providing an emotionally balanced and coherent story that may be seen to represent a resolution to frequently occurring dilemmas in routine family life.

In the case of the Adult Attachment Interview, at the end of a rigorous coding, each interview transcription is assigned to one of four categories: (1) insecure-dismissing;
(2) insecure-preoccupied; (3) autonomous-secure; (4) unresolved with respect to past loss and/or trauma (see Hesse, 1999). When AAIs from primiparous mothers were compared with their children’s narrative story-completions at age 5 it was confirmed that mothers whose AAIs were typified by coherence, autonomy and a valuing of attachment (i.e. indications of adult attachment security) had children demonstrating similar narrative qualities (Steele et al., 2003). Such children provided story-completions that depicted the kind of routine events that might happen in everyday family life, and caregivers who provide help in the face of distress or who are able to set limits. Where parents’ attachment narratives had been previously observed to be strikingly lacking in coherence and correspondingly insecure (dismissing or preoccupied and/or unresolved) we observed elevated levels of reference to attachment figures who were inconsistent, ineffective or overly (physically) punitive in setting limits. Representations of children, in story-completions where effective parental limit setting is absent, are more likely to involve depictions of sadness, anger, confusion and aggression. Similar results between maternal AAIs and children’s story-completions have been observed in two other studies, one British (Goldwyn et al., 2000) and one German (Gloger-Tippelt et al., 2002). To be sure, emotion narratives have been collected from maltreated children, and the trauma they have experienced is amply represented in the emotionally dysregulated and negative story-completions they provide (e.g., Robinson et al., 2000; Toth et al., 1997). Yet no study to date has compared AAIs and children’s emotion narratives in a sample of older adopted and previously maltreated children.

In the light of psychoanalytic theorising on the persistence of psychological structures formed early in life, we had reason to wonder whether the adoptive parent could make any early inroads on the child’s ability to integrate the new external object with the internalized (dysfunctional) object representation. Bowlby (1973) gave expression to the challenge faced by these children and the mothers who adopt them:

\[\ldots\text{once a sequence of behaviour has become organized, it tends to persist and does so even if it has developed on non-functional lines and even in the absence of the external stimuli and/or the internal conditions on which it first depended. The precise form that any particular piece of behaviour takes and the sequence within which it is first organized are thus of the greatest consequence for its future. (Bowlby 1973: 201)\]

Indeed, most clinicians and social workers can verify that with some children there is a strong tendency to provoke the new caregivers (either foster or adoptive) to behave negatively and often punitively towards them. While often perplexing to the parent, it makes sense if one puts into context the child’s representations of previous attachment figures which guide the child’s expectations of future attachment interaction. This behaviour can also be described, in Anna Freud’s (1965) frame of reference of defence mechanisms, as the need to ‘turn passive into active’ and as ‘identification with the aggressor’. Bowlby comments similarly when he says that ‘the aggressive child acts on the basis that attack is the best means of defence’ (1956: 6).

However, clinicians are aware of strong motivations not only on the part of the adoptive parent, but also in the child, to begin to build a new attachment relationship.
We were also aware that given the children’s background they may be hyper-sensitive to the attachment-related states of mind of their new attachment figures (the adoptive parents) as a way of grounding themselves and trying to understand something of the new emotional, cultural and physical environment in which they find themselves. This would be so, we assumed, as the children in the current report suffered from many disrupted attachment relationships, beginning with the loss of their birth family, which had then been followed by often repeated foster care placements. A consequential propensity to have an attachment system that is easily and readily (hyper) activated would make sense and would be consistent with the literature on the developmental impact of trauma. This work highlights the tendency for children who have endured consistently overwhelming experiences to react much more quickly, often with much less of a triggering source, to future experiences which are deemed frightening (e.g. Perry et al., 1995).

To reiterate, in the current report, we investigated whether there may be some early signs of the influence of the mother’s state of mind with regard to attachment which would be associated with their newly placed children’s state of mind with regard to attachment as expressed in their narrative story-completions. Specifically we wondered whether mothers who provide Adult Attachment Interviews rated as secure would convey that felt security to the child as compared to those mothers who provided narrative transcripts rated as insecure or unresolved with respect to past loss or trauma. If such results could be confirmed, the AAI as an identifier of competence in the parenting role would gain significant further support beyond what is so far established (Hesse, 1999; van IJzendoorn, 1995). In particular, the potential role of the AAI in facilitating prudent decisions in the selection and support of foster and adoptive carers might be highlighted. Given the extensive emotional and behavioural difficulties maltreated children bring with them into an adoptive placement (Cicchetti et al., 1995; Dodge et al., 1990), it would indeed be remarkable if adoptive mothers’ states of mind regarding attachment could be shown to influence the internal worlds of children with such adverse histories.

**Method**

**Sample**

The sample in this study consisted of 43 mothers who had a total of 61 children placed with them. The children ranged in age from 4 to 8 years with a mean of 6 years. 43% of the sample of children were boys and 85% were white. The children had all suffered from serious adversity including neglect, physical abuse, and sexual abuse. The number of carers they had experienced ranged from 2 to 18 different placements. Five children were placed with single adopters, the rest being placed within the context of a married couple. The mean age of the mothers was 40 years.

**The Adult Attachment Interview**

The adult patterns of attachment refer to different strategies adults rely on when faced with the task of making sense of their childhood relations with parents or caregivers, as is
demanded by the questions comprising the Adult Attachment Interview. The signal feature of the autonomous strategy is coherence and a strong valuing of attachment. The dismissing and preoccupied patterns each represent different forms of incoherence arising out of negative attachment experiences that appear not to have been integrated evenly into the adult’s sense of self. The dismissing strategy leads to global evaluations of a good or normal childhood that cannot be supported by relevant memories. The preoccupied strategy leads to global evaluations of a difficult childhood that are accompanied by an overabundance of memories and affects from childhood and adulthood that lead the speaker into feelings of current anger or a sense of resignation to difficulties that cannot be overcome. Finally, the unresolved classification which may be present in an otherwise dismissing, preoccupied or autonomous interview is applied when an adult shows signs of ongoing grief and disorientation concerning some past loss or trauma. Further, these strategies or patterns operate outside of awareness, playing a significant role in determining the speech an adult uses to answer the questions—particularly questions designed to ‘surprise the unconscious’ (George et al., 1985).

The Adult Attachment Interview is structured entirely around the topic of attachment, principally the individual’s relationship to mother and to father (and/or to alternative caregivers) during childhood. Interviewees are asked both to describe their relationship with their parents during childhood and to provide specific memories to support global evaluations. The interviewer asks directly about childhood experiences of rejection, being upset, ill and hurt as well as loss, abuse and separations. In addition, the subject is asked to offer explanations for the parents’ behaviour and to describe the current relationship with their parents and the influence they consider their childhood experiences to have had upon their adult personality.

**The story stem battery and procedure**

The core of the child assessments was to ask them to respond to a set of story stems (see Hodges and Steele, 2000; Hodges et al., 2003) where they were given the beginning of a ‘story’ highlighting everyday family scenarios each of which contains an inherent dilemma. Children were then asked ‘to show me and tell me what happens next?’ This allows an assessment of the child’s expectations and perceptions of family roles, attachments and relationships, without asking the child direct questions about their own family, adoptive or biological, which might cause them undue conflict or anxiety. It also has the advantage for younger children of allowing both verbal and non-verbal means of communication. The latter is important as it allows children to display memories and expectations which are not part of verbally based memory, and which they may be anxious about putting into words. The stems are designed so as to elicit themes concerned with the child’s expectations of relationships between parents and children. These include such areas as giving affection and setting boundaries, as well as those most central to the construct of security of attachment, namely whether the child displays an expectation that parents will be aware when children need protection or comfort, and will respond appropriately to this need. They also elicit indicators of other important aspects of the child’s functioning such as the modulation of aggression, aspects of sibling and peer relationships, and certain defensive manoeuvres. The scoring of the story stems
covers a range of themes from the quality of the aggression, either coherent or extreme, representations of the child and adult as endangered or endangering, realistic mastery of the conflict and the process of responding to the narrative stem such as disengagement, changing the constraints of the story. Coding the children’s responses has been manualised and a training package is available for mental health professionals, of whom over 150 have to date been trained on the ‘Little Pig’ story stem protocol and coding system (Hodges et al., 2003).

Results

The results are organized into three sections; two quantitative in nature, and a third and final section qualitative in nature including verbatim illustrations from the narrative measures obtained. The first section of results looks at those themes in the children’s story completions which were most indicative of being placed with an adoptive mother whose Adult Attachment Interview was autonomous-secure as opposed to insecure. The second section of results considers those story completion themes observed to be uniquely associated to placement with an adoptive mother whose attachment interview was judged unresolved with respect to past loss or trauma. The third section of results provides excerpts from two adoptive mothers’ attachment interviews and their respective children’s story-completions.

1. Children’s story completions and autonomy/security in the adoptive mothers

In order to explore the possible influence of the adoptive mothers’ Adult Attachment Interviews upon the thematic content of the children’s story completions, scores derived from the children’s stories were grouped according to whether or not the mothers’ AAIs were classified autonomous-secure. The 43 mothers (for whom AAI data was available) adopted 61 children. Thirty-one (71%) of the mothers’ interviews were judged autonomous-secure, 10 (23%) were judged insecure-dismissing, and 2 (5%) were judged insecure-preoccupied. Of the 43 interviews, 9 (21%) were judged unresolved with respect to past loss or trauma. This distribution of secure, dismissing, pre-occupied and unresolved mothers, is very much in line with samples of non-clinical populations (Van IJzendoorn and Bakermans-Kranenburg, 1996), with slightly elevated levels of autonomy-security and unresolved interviews. Notably, with respect to those interviews judged unresolved, 2 were otherwise autonomous-secure, 5 otherwise insecure-dismissing, and 2 otherwise insecure-preoccupied.

Table 1 shows those story completion scores which differed significantly as a function of the mothers’ attachment autonomy/security.

The themes noted in Table 1 were highly correlated with one another, are conceptually similar and were found to load strongly on a primary factor accounting for 22% of the variance in children’s story completions. The reliability analysis for these nine scales suggested a very high internal consistency (Cronbach’s alpha = 0.90), and the nine items were thus summed to create a single score which might be called ‘aggressiveness’. Children’s mean values for this score differed significantly when
grouped by mothers’ Adult Attachment Interview status. The mean for children \((n = 16)\) whose adoptive mothers’ interviews were judged insecure (dismissing or preoccupied) was 2.9 (standard deviation = 2.0) whereas the mean for children \((n = 45)\) whose adoptive mothers’ interviews were judged autonomous-secure was 2.0 (standard deviation = 1.5, independent \(t\)-value = 2.0, \(p < 0.05\)). In other words, the seven themes shown in Table 1 were significantly more likely to appear in the story completions of children adopted by ‘insecure’ mothers as opposed to ‘secure’ ones.

When this composite aggressiveness score, based on the items shown in Table 1, was correlated with the 13 state of mind scores derived from mothers’ Adult Attachment Interviews, some suggestive results were observed. Most strikingly, this aggressiveness score correlated significantly with the rating of mothers’ insistence on the inability to recall their childhood, a linguistic form pointing to denial and repression, which is a signal feature of the insecure-dismissing interview pattern (Pearson’s \(r = 0.32, p < 0.01\)). In other words, a mother who maintains she could not recall her childhood was likely to have a child who could not contain his or her aggression. In the story completion task, similarly, children’s aggressive themes correlated positively with mothers’ derogation of their own fathers \((r = 0.24, p < 0.05)\). Or, one could say, a mother who disparaged her father, in the context of the AAI, tended to have a child with a more aggressive profile in the attachment story-completion task. Expression of aggression in the children’s stems was also correlated significantly and negatively so that these themes were less likely to occur if mother’s AAI had higher scores on the hallmarks of an autonomous-secure interview pattern, i.e. ratings of coherence of mind \((r = -0.21, p < 0.05)\) and coherence of transcript \((r = -0.21, p < 0.05)\). In other words, mothers who were truthful, relevant, and thoughtful when discussing their attachment histories tended to have children who tended not to use aggression as a theme to resolve the conflict inherent in the story-completion task.

2. Children’s story completions and unresolved mourning in the adoptive mothers

In order to explore the possible influence that an adoptive mother’s Adult Attachment Interview being classified unresolved might have upon the thematic content of the children’s story completions, scores derived from the children’s stories were grouped according to whether or not the mothers’ AAIs were classified as unresolved. Table 2
shows those story completion scores which differed significantly as a function of the mothers’ interview being rated as unresolved.

Ratings of each of the themes shown in Table 2 and observed in children’s story completions were grouped according to whether adoptive mothers’ attachment interviews were unresolved ($n = 11$) or resolved or simply lacking past experiences of loss or trauma ($n = 50$). Statistical analyses, in the form of Independent t-tests revealed the pattern of significant results shown in Table 2. This suggests that unresolved mourning in a parent may exacerbate the emotional worries of a recently adopted child.

When ratings of the themes shown in Table 2 were correlated with the interval scale rating of mothers’ unresolved mourning positive correlations were observed in the predicted direction for parent appearing child-like ($r = 0.30$, $p < 0.05$), adult aggression ($r = 0.21$, $p < 0.05$) and throwing out or throwing away ($r = 0.25$, $p < 0.05$). Mothers’ lack of resolution of mourning scores correlated negatively, i.e. their children were less likely to show realistic mastery ($r = -0.19$, $p < 0.10$) and less likely to show sibling or peer helps ($r = -0.17$, $p < 0.10$). These correlations reflect a tendency for children adopted by mothers with prior loss or trauma difficulties to appear less able to use an organised strategy to deal with the conflict depicted in the story.

When we examined the children’s pre-placement history we found that the children placed with the mothers whose AAIs were unresolved (or insecure) were not significantly different in terms of the adversity they had faced i.e. physical abuse, neglect, domestic violence. In fact there was a trend that showed that the children adopted by ‘unresolved’ mothers were the least damaged in the overall group.

3. Narrative excerpts

In order to highlight some of the features of the Adult Attachment Interviews and Story Stem narrative assessments, two cases will be presented. The first, whom we call Mother 1, had endured a very difficult childhood and was rated as having a dismissing state of mind regarding attachment, and as being unresolved with respect to loss. Excerpts of the interview provided by Mother 1 are given below. She had placed for adoption a 6-year-old girl we shall call Daughter 1. We present a short vignette from her story stem assessment. The second case is of Mother 2 who provided an Adult Attachment Interview which was rated as autonomous-secure, and she had a little girl aged 6 years placed with her called Daughter 2.
Mother 1 – Adult Attachment Interview

This mother had a very difficult childhood as her own mother suffered from a chronic illness until she died when Mother 1 was 10 years old. Mother 1 was raised by her maternal grandmother with whom she described the relationship as ‘rocky’, ‘volatile’ ‘uncommunicative’, ‘generous’ and ‘bit of a temper’. When probed for memories of these adjectives Mother 1 recollected how her Grandmother would often get angry with her and not speak to her for 6 or 7 weeks and, according to Mother 1, it was not always clear why. She did give an example for why she described the relationship as one in which grandmother had ‘a bit of a temper’. Mother 1 said ‘I learned the word “trollop” at school and called her one and she would hit me round the legs with a wet tea towel, but I mean I did push her quite a lot really.’ Mother 1 seemed to indicate that while her Grandmother had a temper, it was her own provocative behaviour that was to blame.

When asked to elaborate on why she chose the adjective ‘generous’ to describe her Grandmother, Mother 1 gave several examples of how her Grandmother would give her money, for birthdays or having done well in school. The generosity seemed represented in her mind only in terms of monetary value, rather than affection or being generous with her time and psychological investment.

When asked what happened when she was ill as a child she reported that when she was 8 or 9 years old she had the chicken pox and was left on her own with her grandmother checking her at lunchtime and late afternoon. Mother 1 offered these descriptions without reflecting upon the lack of nurture; instead she insisted that she was homesick at camp because things were so good at home. These examples provide the evidence for the rating of high idealisation of her attachment figures, with very little recall of actual memories that would convincingly support her evaluation of her attachment relationships as being ‘good’ ones.

Regarding loss, when Mother 1 was asked to provide an account of what happened when her mother died, she entered into a discourse pattern that was rather like a free-form fall into the past, including excessive attention to detail, and a displaced bereavement reaction, all suggestive of an ongoing absorption in this significant childhood loss experience. Mother 1 told of how she learned of the loss:

I can remember, I think it was Thursday, a Thursday night, and she’d gone into respite care in Town A, and we got this phonecall and my Dad said we’ve got to go and my Grandma got in the car, and I got in the car and we went to this hospital and I actually, we then we came back and my Grandma and Grandpa were staying and they brought me home and I can remember seeing the lights sort of in Town B on the way back and I knew she’d died when was quite funny and then on the Friday, I went to school on my own cos there was a Lollipop Lady and I could walk to school and come back on my own and my Dad was standing at the top of the drive and I thought ooh that this doesn’t bode well, and erm you know he just told me, and I just remember thinking well that’s a bit inconvenient cos I’m going out tonight, will I be able to go now and he said, well you can’t go now and then I remember the Saturday he said we’ve got to go to Town C to buy you something to wear to the funeral. I remember the outfit I had and then I remember everyone
bringing us cakes and stuff and I can remember that I didn’t particularly get upset I didn’t really I didn’t really cry you see, at all I didn’t cry I got a little bit upset at the crematorium cos I thought gosh you know that box is going into some fiery furnace. I was far more upset when my cat died the next year. I was nearly hysterical about that but I was just relieved I thought oh gosh I won’t have people looking at me now when we got to the shops and stuff and there won’t be a mother in a wheelchair. . .

This section of Mother 1’s Adult Attachment Interview forms the basis for rating her as unresolved with respect to the loss of her mother. She provides much more detail than one would normally expect in response to the question asking the individual to describe the circumstances surrounding the loss. It is as if she gets lost in the detail and so caught up in it that she can’t quite re-orient herself to the task at hand. Further evidence for her unresolved state is her odd comment about not really reacting to the death of her mother, especially when compared to the death of her cat. Her description of her reaction to the death of her cat as ‘hysterical’, one year after her mother’s death, points to another possible route to a classification of unresolved, as highlighted in the rating manual (Main and Goldwyn, 1987), namely the re-direction of the grief from mother to cat. This reference also contributes to the dismissing classification as it is highly derogating of attachment related issues, namely that she would like to claim that her mother’s death did not have much of an impact on her, or only did so in a positive way. All of this suggested a confused inner emotional life for Mother 1, where it might be hard to pay appropriate attention to the emotional needs of her adopted daughter.

We turn next to a story-completion provided by her daughter in the story stem or emotion narrative task.

Child 1: Burnt Hand Story

The interviewer sets up the following story involving the Playmobil figures of a mother doll and a child doll. ‘Mummy’s cooking the dinner, Susan comes up and says “I’m hungry”; mother says “Dinner will be ready soon, it’s not ready yet.” Susan says “I can’t wait” then touches the frying pan and burns her hand . . . Show me and tell me what happens next . . .’ (note: I = interviewer, C = child)

C: Her hand is hurt.
I: It hurts. What does she do?
C: Say, ‘Oh no!’
I: Who says ‘Oh no!’?
C: Touch it.
I: She touched it. OK and she puts the saucepan in there so what happens? What does Mummy do?
C: (has child doll say) I’m hurt. (mother doll) says ‘Oh’.
I: What does Mummy do?
C: (child shows mother doll carrying girl doll) saying ‘Mum, Mum. ‘
I: She’s saying. ‘Mum.’ What does Mummy do?
C: ‘It hurts.’
I: She says it hurts well does Mummy do anything about it?
C: She washes her hand.
I: Is it better now? Is it better?
C: No.
I: It’s still hurt?
C: Yeah.
I: And what happens about the food which went on the floor?
C: No one touches it.
I: She didn’t touch it.
C: Jane said. ‘Touch it?’
I: So Jane touched it now, and what happened when Jane touched it?
C: ‘Jane touched it.’ She says. ‘Mummy.’
I: What does Mummy do?
C: Child shows Mother doll hitting girl doll.
I: Mummy’s hitting Jane is she?
C: She throws Jane away.

This narrative shows, on the one hand, the mother’s response as being quite punitive and rejecting of the child. On the other hand, the child shows early on in her narrative an acknowledgement of the hurt as mother ‘washes her hand’ thereby providing some semblance of help. However, this does not result in actual soothing or comfort for the child doll in the story, as what is portrayed is that despite the effort from the caregiver the hurt continues. The ending of the story involves physical punishment with the adult showing aggression and ultimately throwing the child away.

Mother 2 – Adult Attachment Interview

This Mother had a rather stable, straightforward childhood history. She grew up in a two-parent family, where she was the youngest of two children. The family often visited with grandparents and only moved house once. She provided positive adjectives to describe her relationship with her mother, ‘happy’, ‘playful’, ‘familiar’, ‘supportive’ and ‘light-hearted’ and these evaluations are well-supported by her memories. All of this is suggestive of an organized and autonomous state of mind regarding valued attachments. When asked to provide specific examples she recalled:

‘When we moved house, I was six and for some reason didn’t settle with the other children in the street, and in fact I had the impression that they weren’t talking to me. My mother was someone who would always listen to me, and if I went out to play and it didn’t quite work out I knew I could always come back and talk with my mother and then she would sit and play dolls or board games with me. Eventually I did make friends with them, and she went from sitting with me while we talked about the dolls, of which I had hundreds, like who was our favourite, to the point when the other girls would come over and she would leave us to play.’
This example provides an image of a mother who was sensitive to her daughter’s needs, knowing when to be there as a sympathetic attachment figure, when as a playmate, and when to withdraw so that her daughter’s peer relationships might develop and thrive.

In response to the probe as to why she described her relationship with her father as a ‘playful’ one, she said ‘I mean we used to do things together, like I remember annual events in the summer where we drive into the country to see, these sort of sports days or special fetes. I also remember once going to a mini-golf course and all of us competing and keeping score and really enjoying the outing.’ While these are more general recollections than specific memories, there is a sense in which father was involved in the family and enjoyed being so. While Mother 2’s relationship with her father was largely positive and probably secure, she illustrated her autonomous/secure stance by being able to describe some of the less than optimal features of the relationship. She offered the adjective ‘intense’ to describe her relationship with her father saying ‘I’m aware that I was very interested in getting his approval, that it was important to me. It was significant that I always made sure I did all my schoolwork as it was part of my understanding of what was important to my father and I’m sure I took it in, the strong message, that this is something I just have to do. There really was this expectation that we would always do well at school, from an early age and we did.’

When Mother 2 described the death of her father a year previously, she said ‘I was very upset, he had a stroke and degenerated very seriously during the past seven years. When he did die, I must admit some mixed feelings, because he couldn’t do anything anymore and it was just so sad. My Mum took care of him along with the nursing support she enlisted. It was hard for her to see that at the end he really was dying, but he had lost all his faculties. It was important that we were all there at the very end.’ This account is rather straightforward and simply tells the story of her father’s death. She conveys her own sad feelings and also comments on the loss from her mother’s perspective. Grief, while acknowledged, appears convincingly resolved.

The overall classification of the state of mind of this speaker, as indicated by the transcript, is autonomous-secure. She described her childhood history with a stance that shows she is valuing of attachment and has access to her childhood experience. She was able to point to elements of her childhood that were not so easy, namely her father’s rather intense pressure on her to succeed, but she did so with an understanding of the role that this played in their relationship and did so without derogating him or showing current anger for how he treated her. Her description of the circumstances and feelings regarding the death of her father was to the point, and did not convey any disorienting or disorganizing features. The interview transcript thus suggests the significant loss is resolved and unlikely to impinge in any intrusive way upon the parenting Mother 2 is likely to provide to her adopted daughter.

**Child 2: Burnt hand story**

The interviewer set up the following story with 2 Playmobil figures – Mother doll and child doll. ‘Mummy’s cooking the dinner, Susan comes up and says “I’m hungry”;
mother says “Dinner will be ready soon, it’s not ready yet.” Susan says “I can’t wait” then touches the frying pan and burns her hand . . . Show me and tell me what happens next . . . (note: I = interviewer, C = child)

C: ‘oh don’t be a silly girl.’
I: She says don’t be a silly girl.
C: She picked the pan up, put it on there. (shows adult doll putting pan on table)
I: Mummy picks up the pan and puts in on the cooker.
C: ‘Go there and sit in your chair you naughty!!’
I: So Mummy tells her to go sit on her chair.
C: So she did and everybody comes in.
I: They’re all sitting on their chairs. What happens then?
C: Then Mummy was still cooking the dinner. And then came over and took to the table and put it there. And then everybody says, ‘what’s wrong Susan?’ Susan says ‘I burnt my hand.’ ‘Oh no’, said Dad. ‘We have to take her to the hospital.’
I: The daddy takes Susan to the hospital.
C: (Has the Dad doll look at child doll’s hand) ‘ Oh what’s wrong? Oh Susan hurt her hand maybe it’s burnt so we need to put on some cotton’ and they go back home.
I: Is she o.k. now?
C: Yeah.

This narrative begins with some punitive remarks by the mother to her daughter. These are made in the context of the child being hurt but against the backdrop of her inability to wait. However the retributions importantly remain in the realm of verbal reprimands. While this child does not immediately have anyone tend to the hurt hand, she does, without direct prompting about what happened to the burnt hand, explicitly say that the hand is burnt and father immediately acknowledges the hurt and does something appropriate about it, i.e. takes her to hospital. This narrative received codes for the child seeking help, adults providing help and for the theme of domestic life – where the family sit down and Mummy continues to cook the dinner.

Discussion

The results presented focus upon findings that the evaluations of childhood experience, as assessed by the Adult Attachment Interview, of adopters of ‘hard to place’ children, were associated with themes in their children’s story stem narratives early in a new adoptive placement. The discussion will focus on two main areas of interest and speculation: (1) The question of how we are to understand the significant associations reported, evident so early on in the developing attachment relationship, between the adult adopter’s state of mind and the emotional themes in the story-completions of the newly placed child; and (2) the usefulness of structured assessment techniques for both children and adults and the implications for clinical and social work practice.

Firstly, given the adverse histories of the children in this study, it is somewhat surprising that within three months of being placed in a new environment, one can
discern significant influences upon the child as subtle as the adopter’s state of mind with regard to attachment. For clues as to the types of attachment-forming interactions between adoptive mother and child that may mediate this observed association between narrative assessments we look to research on infant–caregiver interactions. This is beneficial because of the growing research into the process of the formation of attachment relationships which has so far exclusively concerned work with mothers and their infants (Jaffe et al., 2001; Tronick and Cohn, 1989; Lyons-Ruth and Jacobvitz, 1999). While the children reported in this paper are obviously vastly different from a biologically related young infant–mother dyad, there may be value to paying attention to the careful work of the infancy researchers who focus in detail on the process by which attachment relationships develop.

It is now taken for granted that we are born with an instinctual propensity to relate to another. We are geared from birth to relate to our caregivers, to experience interpersonal subjectivity, for this is the essential foundation of our biological, psychological and cultural survival (Schore, 1994; Stern, 1985, 1995; Trevarthen, 1988). For the children who have been deprived of an enduring attachment relationship with their biological caregiver, and who then must endure many shifts with many different caregivers, the experience is vastly different. Not only have they suffered the loss of their primary caregiver, but in many instances this same caregiver was the perpetrator of abuse and neglect. These children may come to have many different kinds of representations of caregiving. Firstly, they may have conflicting representations of the same caregiver behaving in contradictory ways, i.e. nurturing at times, hurtful at others, or sometimes not seeming to have them in mind at all. As Bowlby (1980) commented, these various representations form multiple models in the child’s mind which require more psychic energy than a singular well functioning internal world made up of coherent representations. It could also be that for some of these children, they may suffer from having multiple models from two different sources. Multiple models may, for example, arise as Bowlby postulated from experiences of a caregiver who behaves in markedly contradictory ways, i.e. at times nurturing and at times abusive. Yet another possible source of multiple models may be seen to arise within the internal world of the child who has the experience of being perpetually in transition. Their representational worlds may contain elements including a range of diverse and possibly conflicting representations from many and often abrupt changes of caregivers, often occurring in a context of confusion and fear.

One of the possible costs, which has been highlighted by the infancy research, is the child’s hyper-vigilance to the state of mind of the caregiver. For the securely attached child, the need to know, understand and predict their caregiver’s next move, or how they might be thinking or feeling, helps to promote attachment security but need not be so highly developed or finely tuned. Main (1990) posits that for the securely attached infant, in the context of the separation–reunion stress of the Strange Situation, it is the whereabouts of the caregiver that is of concern, which involves little or no conflict. The insecurely attached child, by comparison, is ‘additionally controlled by the past behaviour of the attachment figure so that for these infants likely caregiver response as well as caregiver location must continually be taken into account.’ (Main, 1990: 179). This latter predicament requires more psychic energy and is likely to be highly common among late-adopted children. What is being asked of maltreated children, then, is very
different from those who are fortunate enough to grow up with an organised attachment system. When this takes a secure form, survival of the child is ensured by the caregiver who has them in mind and is able to provide appropriate care. According to Tronick (Tronick and Weinberg, 1997) normal mother–infant dyads’ interactions consist of a mix of interactions with matches of attention and affective state and ruptures of these interactions. Tronick hypothesises ‘that reparation of interactive errors is the critical process of normal interaction that is related to developmental outcome rather than synchrony or positive affect per se’ (Tronick and Weinberg 1997: 65). This then may be one of the critical elements in the relationships of caregivers with states of mind dominated by unresolved trauma or loss. That is, the availability of the adult to engage with a child, especially one that may be expressing challenging and negatively tinged behaviour, may leave too many of the ruptures untended. We know from some of Bowlby’s earliest writings on affect regulation and specifically on the ambivalence that must exist in every parent, that insecure parents find the child’s negative emotions, especially hatred directed towards the parent, the most difficult and meet such displays with a similar matched negative response, an averted gaze, withdrawal or display of concomitant anger (Bowlby, 1956).

We know that in the case of infants whose mothers are rated as unresolved with regard to past trauma or loss there is a propensity for these infants to form disorganized attachment relationships (Main, 1990; Solomon and George, 2002; Lyons-Ruth and Jacobovitz, 1999; Schuengel et al., 2000). The underlying process by which the state of mind of the caregiver is conveyed to the infant is thought to be communicated via interactions which are frightening for the infant. It is interesting that according to the researchers studying disorganization the affect that is most often highlighted is fear. We see in the present study that unresolved parents carry a state of mind which conveys a lack of organization around the topic of the loss either with their excessive attention to detail, or phrases which make one doubt that they are certain the dead person is actually dead etc. Yet the affect in the interview is not always palpable fear, especially if the quality of the narrative seems to be organized around keeping feelings at bay by greatly distancing oneself from them. It is interesting, then, that the affects which are conveyed in the story stems of the children who are placed with them veer more towards aggression—a common feature among abused and maltreated children, especially those who have retaliatory fantasies. These children, by virtue of their histories, present as vulnerable in varying degrees. This vulnerability, when met with by the vulnerability inherent in the unresolved parent, heightens the vulnerability in both. These children also seem especially well able, perhaps through their own hypersensitivity, to be aware of the affective states of others. Indeed, their caregivers often report their great skill in ‘pushing the buttons’ of their caregivers. Bowlby, referring to ethological research, comments on the issue of vulnerability:

That protection from predators is by far the most likely function of attachment behaviour is supported by three main facts.

(1) From observations of many species of bird and mammal, isolated animals are much more likely to be attacked and seized than animals that stay bunched together with others.
(2) Attachment behaviour is elicited particularly easily and intensely in vulnerable animals (young, sick, old).

(3) Attachment behaviour is always elicited at high intensity in situations of alarm, which are commonly situations when a predator is either sensed or suspected.

(Bowlby 1973: 276)

Two points seem most critical in this quote, the one being the sense in which many of the children in the present study would have felt themselves to be isolated and lacking in the protection that comes from being part of a familiar and well enough functioning family group. And secondly, the sense in which the children's attachment behaviour would be likely to be elicited at high intensity especially during the early days of a new placement, when almost any experience would either be sensed or suspected as a threat, without necessarily being based in the reality of the new situation.

It is hoped that this study illustrates the usefulness of using measures, originating in developmental and clinical research and practice, in understanding special samples of children and their parents of interest to the child clinician. While the clinician may usefully describe an individual patient and/or family, the advent of bringing together larger groupings of specific clinically relevant populations may help elucidate areas of interest in terms of both theoretical and therapeutic understanding. For example, while an astute clinician would pick up a parent's difficulty and see that it was having an impact on their child, what we have learned in this study is that a parent who provides a narrative that indicates a lack of resolution of a loss or trauma has a unique influence upon their child's internal world.

We are not advocating here that the narrative measures we employed be used to rule out particular prospective adopters automatically, but those assessing adopters will need to be sensitive to the implications of this study. It is important to note that despite some of the children not developing as well as others, only one of the placements disrupted. That is, this study is one of growing attachment relationships and adaptation, and that the majority of these very difficult placements survived after 2 years is a positive achievement by any accounts. As we are all well aware, there is no long queue of absolutely optimal adults willing to take on the challenges of adopting a 'hard to place' child. It may also be the case that, in certain circumstances, a very suitable match might be found for specific children who may not be best placed with a secure, reflective adult. Here, our own research on successful adoptive placements of children with severe disabilities found that a high proportion of adopters were rated as insecure-dismissing on their Adult Attachment Interviews (Steele et al., 2000). While this initially felt like a perplexing finding, one could argue that with this specific group, having an adult whose defensive structure included idealising their own childhood history, keeping at a distance the negative elements and wishing to see only the positive, when transferred to the severely disabled child, would serve them quite well. For some of the children in our current study, where perhaps the damage is great, the reflective, secure parent would need a certain measure of reciprocity of positive interactions in order to build a secure parent–child relationship. Perhaps for some of the children, when this is too tall an order, an adult willing to invest in the child and provide a structured and well enough functioning home, might be their best bet.
With new government initiatives (Department of Health, June 2002) promising to provide adopters with support, it could be that the assessment techniques highlighted in this paper may be of use in helping to address and target needs in a more strategic way. While we are not yet at the point of understanding which therapeutic input might be of most benefit to an adult adopter who remains unresolved with respect to a previously suffered loss or trauma, we do know that they and the children placed with them will require additional support.

Anna Freud Centre
12 Maresfield Gardens, Hampstead
London NW3 5SH
UK
e-mail: miriamsteele@compuserve.com

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