Dr Nicola Taylor  MB ChB, MRCPsych, MMedSc, MClinEd, is a consultant general adult psychiatrist.

Disclaimer: This is an independent blog and ACAMH may not necessarily hold the same views.

Two years ago I wrote an article for The Bridge about my experience of parenting a little girl who had experienced early childhood neglect and had been adopted into my family four years beforehand. This additional narrative is a reflection of the progress my daughter has made since that time, the difficulties she still faces, what seems to help and hinder her wellbeing, and my concerns about, and hopes for, her future.

Firstly I will give a brief re-iteration of the background, which can be read using the link below*. I work as a psychiatrist, and I had a year’s experience of CAMHS psychiatry and I already had two thriving birth children when my adopted daughter came into our lives. None of this had prepared me for the challenges I faced when my daughter moved in.

Within a day of her arrival, aged 3, she was both threatening violence, and being actively violent to my birth children, my animals, and other children that we might meet, if she did not have my undivided attention. She told fantastic lies which would have been dangerous had the stories been believable. She was also oppositional in the extreme at home, but charmed other adults outside the home environment. For the first few months my girl pleaded inconsolably for her foster carers. I eventually took the situation in my own hands and invited them to see her.

When I wrote the initial blog two years ago, she still had some difficulties but overall had developed into a loving child who generally tried her best to do the right thing. I wrote that I believed that the following resulted in this progress; Attending a “Brain-based parenting” course by Dan Hughes and Jonathan Baylin, and training about the neurodevelopment of child trauma by Bruce Perry, helped me to understand my child and the reasons for her behaviour. I parented using Dan Hughes’ PACE model and later joined the National Association for Therapeutic Parents, a parents’ support group. A few months of Theraplay2 and Dyadic

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Adoption and attachment:
A parent’s perspective | Part 2

By Dr Nicola Taylor

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My child arrived in the household after a week’s handover from the foster family and she hadn’t been allowed to say “goodbye” to the family she had lived with for over a year because the social workers believed this would further traumatishe her. We were advised that the foster carers couldn’t have further contact for at least six months.
Developmental Psychotherapy were secured. Finally, the support to secure a separate diagnosis of ADHD, and commencing medication for the same, made an indescribable positive difference.

It is now two years later and my daughter continues to make progress. I am now very aware of the situations that she will find difficult, and which to avoid. I have also developed a “tool box” of methods of parenting that seem to work, and of practical ways to support her. I try, as best as I can (well - we are all human) to take a “no-nonsense” approach to her parenting whilst maintaining empathy. I have also decided to take a very open and honest approach with her. We talk openly about her difficulties as they occur, where each one may stem from, and how we might work on them together. However, what is constantly on my mind is that this little girl is growing up, and fast, and will need to develop the skills for herself to manage these situations.

I should offer some examples: my daughter, although much more securely attached than even two years ago, will wake every morning and say that she is unwell. She then tells me that she misses me at school and doesn’t want to go. I have read to her a wonderful book about a child with anxiety who has a “Wiggly Worry Worm”, which my daughter can relate to. My response each morning will be “every child has to go to school. Remember I will be thinking about you when that Worry Worm is in your tummy. Now get ready, it’s soon time to go”. I refuse to talk any more about it. She goes to school each morning and when I collect her, you would never know she has been anxious.

My daughter is very controlling. Play dates are kept short, so that they are a success. I give her “win-win” choices. If I make a choice about something, buying her a drink for example, she will decide she does not like the particular drink I chose. I never respond, and sure enough 5 minutes later she will have the drink.

Empathy development is ongoing, and an area in which she still struggles, and I repeatedly ask my daughter how she would feel in certain situations, and explain that that is how others feel. She is now more empathic, and an animal lover.

My daughter still finds change, surprise and “fun” experiences, such as holidays, hard. These bring out her worst behaviours. I think she must be the only child whose response to sitting on a beautiful tropical beach (snorkel set in hand and Nemo fish within 5 steps of the shoreline) to become angry and say “this place is disgusting!”. Changes are predicted for her, surprises are minimised, and we use distraction on holidays (plenty of screen and colouring time). We try and parent using “natural consequences” as far as it is safe, so she has a chance to learn from her mistakes, oh, and we use plenty of humour.

As my daughter gets older, her social difficulties have become more obvious, but with that has come more external support. School are very much on board now, and her school funding is generally spent on social skills groups or nurture groups. Ongoing dialogue with the school has allowed the teachers to help her.

I have to admit that I have concerns for my daughter’s future. She is desperate to be loved, and I predict that she will be vulnerable to exploitation as a young adult. I fear for her future relationships, and her ability to organise herself to hold down a job. I only hope that the foundations being put in place will be strong enough to support her in adulthood. She will need to be surrounded by people who care for her. She finds it too easy to reject people or seek rejection.

I know that my daughter has always been loved by members of her birth family, although for many reasons she could not be with them, and I believe that maintaining links with them has helped her to trust us, her adoptive family. This weekend we are looking forward to our first face-to-face contact with them... the start of the next chapter of my daughter’s journey.

Referring to:
*https://www.acamh.org/blog/adopter-and-attachment/

Glossary:
PACE model: An attitude or stance of Playfulness, Acceptance, Curiosity and Empathy; qualities that are helpful when creating emotional safety and when trying to stay open and engaged with another person. PACE is a way of thinking, feeling, communicating and behaving that aims to make the child feel safe.

Theraplay: A child and family therapy for building and enhancing attachment, self-esteem, trust in others, and joyful engagement. It is based on the natural patterns of playful, healthy interaction between parent and child and is personal, physical, and fun.

Dyadic Developmental Psychotherapy: (DDP) is the treatment of children who have experienced abuse and neglect and who demonstrate ongoing problems related to attachment and trauma.