

# Center for Family Development

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## **Attachment Facilitating Parenting**

**Arthur Becker-Weidman, Ph.D.**

Many adopted and foster children have had very difficult and painful histories with their first parents. These children have experienced chronic early maltreatment within a caregiving relationship. Such a history can lead to the development of Complex Trauma, disorders of attachment, and Reactive Attachment Disorder. Children with histories of maltreatment, such as physical and psychological neglect, physical abuse, and sexual abuse, are at risk of developing severe psychiatric problems. These children are likely to develop Reactive Attachment Disorder. Approximately 2% of the population is adopted, and between 50% and 80% of such children have attachment disorder symptoms. Many of these children are violent and aggressive and as adults are at risk of developing a variety of psychological problems and personality disorders, including antisocial personality disorder, narcissistic personality disorder, borderline personality disorder, and psychopathic personality disorder. Therapeutic Parenting is often necessary to help these children heal. This approach to parenting is often not familiar to most parents and requires a significant amount of work and preparation. Attachment facilitating parenting is grounded in attachment theory and is based on a set of principles that include:

- o Sensitivity
- o Responsiveness
- o Following the child's lead
- o The sharing of congruent intersubjective experiences
- o Creating a sense of safety and security

The effective implementation of these principles requires parents who:

- o Are strongly committed to the child.
- o Have well developed reflective abilities
- o Have good insightfulness
- o Have a relatively secure state of mind with respect to attachment

This type of parenting is consistent with Dyadic Developmental Psychotherapy, which is an evidence-based and effective treatment for children with trauma and attachment disorders . Many foster and adoptive parents find their children's behaviors strange, frightening, disturbing, and upsetting. They often don't understand why

their child behaves as the child does; "after all, my child is now safe, doesn't he get it?" It can be difficult to appreciate the depth and pervasiveness of the damage caused by earlier maltreatment.

Therapeutic parenting based on Dyadic Developmental Psychotherapy relies on helping parents understand what is causing the child's behaviors. Looking deeper in order to understand what is motivating the child. All behavior is adaptive and functional; however sometimes the behaviors that were adaptive in one environment are ill-suited for the new home. If your first parents were neglectful, unreliable, and inconsistent so that you were often hungry and left alone for long periods of time, hoarding food, gorging, and going to "anyone" for help is adaptive. When that child is placed in a foster or adoptive home with caring, responsive, sensitive parents, that same behavior is no longer adaptive. By understanding what is driving the behavior and appreciating the child's fear, anxieties, shame, and anger, the new parent will be better able to respond to the emotions driving the behavior rather than the surface behavior or symptoms. Unless the underlying emotions are addressed with sensitivity and within a safe, unconditionally loving, and supportive home, the behavior or symptoms are not likely to stop...they may change into other problems, but if the underlying cause remains, then the problems will surface again and again.

Let's discuss the principles required. These principles are more fully elaborated elsewhere.

**SENSITIVITY.** Because children with trauma and attachment disorders are often unable to describe their internal states, emotions, or thoughts, it becomes the job of the parent to do this with and for the child so that the child learns to do this. Of course, this is precisely what one does with a newborn, toddler, and child. We often help children manage their internal states by doing that with them. When a baby cries, we pick up the baby, comfort the child, and by so doing, regulate the child's level of arousal. Over time the infant becomes increasingly proficient at doing this independently. The parent of a foster or adopted child must be sensitive to the internal states of their child so that the parent can respond to the underlying emotions driving behavior.

**RESPONSIVENESS.** Once the underlying emotion is identified, the parent must respond to this need or emotion, with sensitivity. By meeting the child's need (to feel safe, loved, cared about, for food, drink, joy, etc) the child will internalize new and healthier models of relationships and parents.

**FOLLOWING THE CHILD'S LEAD.** By this I mean that the parent will need to respond to the child and follow the child's lead in the sense of providing what the child is needing (comfort, affection, support, structure, etc) and at the child's pace. It is very important to move at the child's pace to create the necessary sense of safety and security that these children need.

**THE SHARING OF CONGRUENT INTERSUBJECTIVE EXPERIENCES.** Intersubjectivity refers to shared emotion (also called attunement), share attention, and share intention. You can understand this if you think of playing a board game with your child. When you are playing some game together and enjoying the experience, you are sharing emotions (joy and a sense of competence), sharing attention (focusing on the game), and sharing intention (playing by the rules, both trying to win, having fun, etc.). Or another example, when talking about the death of the child's loved grandparent, you both may share the same emotions (grief), both are recalling memories of the grandparent (shared intention and attention). It is the sharing of congruent intersubjective experiences, experiences in which all three elements are the shared, that helps the child heal and learn about intimacy and relationships.

**CREATING A SENSE OF SAFETY AND SECURITY.** Safety comes first. Unless the child is physically, emotionally, and psychologically safe, healing cannot occur. So, it is the job of the parent to create safety and security for the child. This then allows for the exploration of underlying feelings, thoughts, and memories. Without an alliance there can be no secure base. Without a secure base there can be no exploration. Without exploration there can be no integration. Without integration there can be no healing. Unless the child feels safe, exploration is not possible.

So, what sort of parent is needed? We know from extensive research, that one of the best predictors of placement stability is the parent's commitment to the child. Therefore, building or rebuilding parental commitment is an important first step. Unless there is strong commitment, the child cannot feel safe and, as discussed above, safety is the most important first step in helping a hurt child heal.

Reflective capacity is also vital to placement stability and to the healing of adopted and foster children. The parent must be able to reflect on the child's underlying emotions, how the past may be re-enacted in the present, and what in the parent's own past is being triggered by the child. A well-developed reflective function is necessary if the parent is to respond to the child in a healthy and healing manner. We all have buttons. The job of the therapeutic parent is to understand one's buttons so that these can be disconnected so that when pushed, nothing happens.

Insightfulness is related to reflective capacity.

A parent's state of mind with respect to attachment is the best predictor of the child's. If the parent has a Secure state of mind with respect to attachment, then the adopted or foster child is more likely to develop a healthy and secure pattern of attachment and heal. We know that when young children are placed in a foster home, the child will begin to develop a pattern of attachment that is the same as the foster parent's state of mind with respect to attachment. Obviously, in older children, this is a more difficult task. In the general population, about 60% of the adults have a secure state of mind with respect to attachment. For parents who have an insecure state of mind with respect to attachment, they can still learn to parent effectively with help.

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