

Curiosity, Pleasure And Play: *A Neurodevelopmental Perspective*

by Bruce D. Perry, M.D., Ph.D., Lea Hogan, M.Ed., Sarah J. Marlin, Baylor Medical Student

The human brain is an amazing organ. It mediates all of our thoughts, feelings and behaviors. It allows us to create, share and hope. It allows us to communicate and connect, to teach and to learn. The brain allows us our humanity.

In order to do all of these wonderful things, our brain must organize its 100 billion individual nerve cells (neurons) into efficient systems to sense, process, perceive, store and act on the continuous bath of sensations sights, sounds, tastes, smells and touch - in the environment. Furthermore, our brains do not just automatically pop into existence, capable of all these wonderful functions. The brain begins to develop in utero from just a few cells. Within a few short years it has grown to be 85% adult-size. The brain *grows* to become a dynamic ever-changing biological system which gives us the capacity to love, create, communicate or think. Our brain becomes a product of our genetic potential and our history of experience.

Experiences - repetitive, consistent, predictable and nurturing experiences - are required to express the underlying genetic potential of each child. It is becoming increasingly clear that it is the experiences of early childhood that play a key role in determining the foundational organization and capabilities of the brain (Schorer, 1997; Perry, 1994).

The experiences, environments and opportunities we provide our children help determine their strengths and vulnerabilities. If the child's world is chaotic, violent and emotionally or cognitively impoverished, his potential will remain unexpressed. If the child's world is safe, nurturing and rich in social, emotional and cognitive opportunities, he or she will flourish. Central to a child's healthy development is the opportunity to act on his natural curiosity - to explore, to play and, thereby, to learn.

Play, more than any other activity, fuels healthy development of children and the continued healthy development of adults. This is a bold statement. To judge this statement, we must consider what play is and how the human brain develops and changes.

What Is Play And Why Is It Important?

Play takes many forms, but the heart of all play is pleasure. If it isn't fun, it isn't play. We play from birth on - we play using our bodies (e.g., building with blocks) and our minds (e.g., fantasy play). We use words to play (e.g., jokes, wit, humor), and

we use props (e.g., blocks, toys, games). While the exact nature of play evolves, becoming more complex as we grow, play at all ages brings pleasure. And with pleasure comes the powerful drive to repeat the pleasurable activity. And with repetition, comes mastery. Mastery brings a sense of accomplishment and confidence. The more comfortable a child feels with the world, the more likely she will explore, discover, master and learn. This cycle starts with curiosity.

Curiosity, a neurobiological feature of many primates, drives exploratory play. Play can satisfy curiosity as the child explores her environment, thereby expanding her catalogue of experience. When the child explores, she discovers. A wonderful cycle of learning is driven by the pleasure in play. A child is curious; she explores and discovers. The discovery brings pleasure; the pleasure leads to repetition and practice. Practice brings mastery; mastery brings the pleasure and confidence to once again act on curiosity. All learning - emotional, social, motor and cognitive - is accelerated and facilitated by repetition fueled by the pleasure of play.

Simple principles of neurodevelopment match the observations related to play that have been made by academics, clinicians and parents over the years. Neurodevelopment, while very complex, has a number of core concepts and principles that can illustrate the central, crucial role of play in healthy development.

Neurodevelopment Principle One: Sequential Development.

The brain, at birth, is undeveloped. During its development it organizes and grows in a sequential fashion, starting from the lowest, most regulatory regions of the brain and proceeding up through the more complex parts of the brain responsible for more complex functions. Healthy development of one region/capability is dependent upon the healthy development of lower brain regions that take place earlier in the process (see Figure 1). Play during development, therefore, parallels this sequential neurodevelopmental process. In early childhood, when the brain is developing motor-vestibular capabilities, for example, there is much more large motor play than in adolescence. Play opportunities for the child must be provided in an appropriate sequence and matched to the child's level of neurodevelopment. In turn, this matching process is dependent upon adequate assessment of the child's development in the key areas of physical/motor, behavioral, emotional, social and cognitive domains.

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Sequential Neurodevelopment and Play

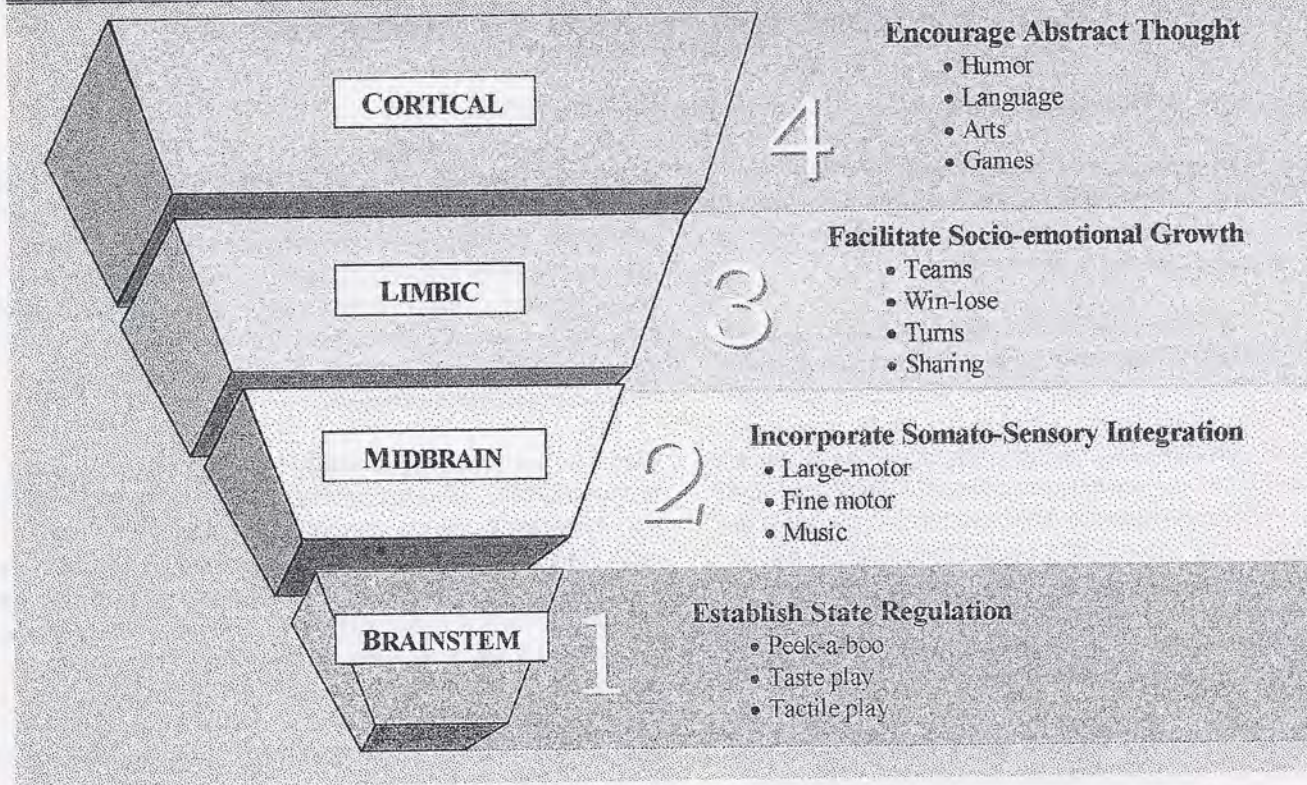


Figure 1: The Hierarchical Structure of the Human Brain: The human brain is organized and develops in a hierarchical fashion. The lowest and most simple areas develop first, followed in sequence by more complex areas that mediate more complex functions. Babies play at the nipple, toddlers practice motor skills, and fantasy play encourages socio-emotional and cognitive development. As children grow, the complexity of play grows. Solitary, parallel, dyadic and then group play develops in sequence with the developing social capabilities of the child. At each stage of development, it is play and the repetitive elements of play that help organize neural systems which will ultimately mediate more complex motor, social, emotional and cognitive skills.

(Continued from page 9)

Neurodevelopment Principle Two: Use-dependent Development. The normal organization of any brain area or capability is 'use-dependent.' Neurodevelopment is dependent upon the presence, pattern, frequency and timing experiences during development. The more patterned activity (e.g., music, reading, conversation), the more the brain regions responsible for these tasks will organize and be functionally 'healthy'. The implications of this are profound. Patterned repetitive activity results in patterned neural activity that changes the brain. These experiences help build in the neural capacity to better perform those functions (i.e., hearing language helps develop speech and language capabilities; practicing piano develops fine motor and rhythm-reading capabilities and reading increases capacity for verbal comprehension and abstract reasoning). Children exposed to consistent, predictable, nurturing and enriched

experiences will develop neurobiological capabilities that will increase the child's chance for health, happiness, productivity and creativity. Conversely this means that the child with neglect, chaotic, and terrorizing environments will have significant problems in all domains of functioning (see Perry 1995; 1997).

Play has a crucial role in providing the repetitive experiences that can improve and express the potentials in all areas of the human brain. Depending upon the nature of the play, growth and change in all parts of the brain can be facilitated. The more opportunities for enriched and complex play, the more repetition will take place. As we think about the importance of play we can never underestimate the need for consistent, predictable, patterned and frequent opportunities for play in a child's life. This means that the major providers of the experiences in the child's life - caregivers, teachers, and parents - must appreciate the role of play and pleasure in overall learning.

Conceptual Principle Three: Windows of Opportunity.

Much of this sequential and use dependent development of the brain takes place in early childhood. This means that of all the experiences throughout the life of an individual, the organizing experiences of early childhood have the most powerful and enduring effects on brain organization and functioning! Society does not capitalize on this window of opportunity in early childhood. Indeed, we typically wait until a child is so impaired and dysfunctional, acting out and failing in school, before we initiate services. Those few resources that are dedicated to early childhood tend to be inefficient and unfocused.

With play, we have an inexpensive and efficient means to help children develop. Proactive is better than reactive. Simple music and movement activities provided early in life for high-risk children, for example, appear to have powerful and positive impact on young children. We must teach young mothers and caregivers how important it is to play with their young children. The best toy for a young child is the invested, caring adult - someone to pay attention, to engage and to play with the child using words, song, touch and smile.

Play And Exploration

Play and exploration are crucial activities for young children. They help the child's brain develop in optimal ways. Child sensitive spaces, semi-structured activities and opportunities for exploration are safe, nurturing and enriched in developmentally appropriate stimulation and should be the core elements of all child-focused programs. Play and exploration grow the brain - healthy play and exploration grow healthy brains.

How Does Play Help Your Child Grow?

Through play, a child's sense of who she is can become more defined and integrated. As she learns about herself and the world, she acquires a wide range of important developmental, social, and cognitive skills, as well as positive inner traits, that help form the basis for happiness, productivity and a healthy future. Play-related skill building tracks with neurodevelopment. As described in Figure 1, the brain organizes from the bottom to the top.

Gross motor skills, such as walking, kicking, or skipping, can be enhanced when a toddler pushes a toy grocery cart or an older child jumps rope. When a young child kicks a ball across the room, she is practicing coordination by balancing on one foot to kick with the other. She is additionally developing larger muscle control, tone and flexibility, qualities that may help her score the winning goal when she is old enough to play soccer.

Children can develop advanced fine motor and manipulation skills while playing as they use their fingers to build and color a

sign for a backyard tree house. When throwing and catching a ball, they are practicing hand-eye coordination and their ability to grasp. As they scribble with a pencil on paper, they are developing the muscle control and coordination needed to one day write a letter to a friend.

Children have opportunities to enhance their language skills through play by talking and singing with other children. A child's interactions with and repetition of his playmates help him master the semantics of language as he participates in spontaneous rhyming and word play. While having fun, he increases his play-related speech, his sentence length, and his vocabulary.

The child's cognitive, or mental, abilities can also be enhanced by play. A child's play often involves physical and mental trial and error, problem-solving tasks, and an ability to discriminate between relevant and irrelevant information. Play requires the child to make choices and direct activities and often involves strategizing, or planning, to reach a goal. Through pleasurable play, children often become motivated and perseverant, qualities that frequently may later translate into the classroom.

While enjoying their play, children can acquire a wide range of interpersonal/social skills, ranging from communication to co-operation. When children argue about who stepped "out of bounds" and agree upon a "do over," they are learning how to negotiate, compromise and work together. They are learning about teamwork when they huddle together and decide how they will position themselves for the next shot. The child gains an understanding about those around him and may become more empathetic and less egocentric. When playing with peers, children are developing a learning system of social rules, including ways to control themselves and tolerate their frustrations in a social setting.

Play Develops Skills

- | |
|---|
| • Creativity |
| • Teamwork/cooperation |
| • Communication/negotiation/compromise |
| • Developmental skills |
| • Goal setting |
| • Following rules/directions |
| • Self-reliance |
| • Empathy |
| • Social interaction |
| • Problem solving |
| • Self-expression |
| • Self-confidence |

(Continued from page 11)

Creating A Healthy Environment To Optimize Play And Learning

A child will play when she feels safe. And to a child, feeling safe has little to do with outlet plugs and childproof cabinets. A child's sense of safety stems from a calm and *predictable* world – one in which she knows what will happen next. This means her life is fairly consistent from one day to the next – and the adults in her world are predictable, consistent and, ideally, attentive, attuned and attached. She knows her caregiver is there for her to feed her, protect her and comfort her. You can make a child's world more predictable by keeping her on a daily schedule. For example, she wakes, eats meals and bathes roughly at the same time every day. Significant changes to her daily routine (for example, frequent home moves) are kept to a minimum. Predictability will help eliminate the element of surprise. In an unpredictable world with no routine, children may be anxious. Anxiety kills curiosity. A child that feels safe and is in familiar space will be curious and will seek novelty. A child that is anxious or in an unfamiliar setting will be unwilling to try new things.

“With play, we have an inexpensive and efficient means to help children develop.”

A child's environment should also be rich in sights, sounds, smells, tastes and touch. Environments rich in sensory experiences stimulate the child's brain and give him/her new information about the world. For a child, a sensory-rich experience could be as simple as the smell of blueberry muffins baking in the kitchen or the touch of a velvet pillow to the face. It is important for caregivers to recognize the importance of sensory experiences to a child. Caregivers should also recognize that too much stimulation could overwhelm a child. For example, one toy with bells and whistles might be interesting to a child, but many noise-making toys might over stimulate him/her. Caregivers should note that television is not considered a sensory-enriched experience for a child.

In today's world we often underestimate the importance of play. We over schedule our children with educational or structured activities that often inhibit spontaneous, curiosity-driven exploration. In the end, if we want to help our children meet their potential, we must allow children to have free time, spontaneous play and safe and enriched play and learning environments.

For more information on this and related topics:

Visit these web sites;

<http://www.ChildTrauma.org>

<http://Scholastic.combruceperry>

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Editor's Note: Dr. Perry will be the keynote speaker at the HAAEYC Fall 2001 Conference.

**REFRIGERATOR NOTES
POINTS TO REMEMBER ABOUT
PLAY WITH YOUR CHILD**

- Follow your child's lead.
- Pace at your child's level.
- Don't expect too much—give your child time.
- Don't compete with your child.
- Praise and encourage your child's ideas and creativity; don't criticize.
- Engage in role play and make-believe with your child.
- Be an attentive and appreciative audience.
- Use descriptive comments instead of asking questions.
- Curb your desire to give too much help; encourage your child's problem-solving.
- Reward quiet play with your attention.
- Laugh and have fun.



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Parents and Children “Having Fun”

What is the value of play? Why is play important for children?

- (1) The most obvious benefit from play is that it aids physical development. When children run, jump, skip, yell, and laugh, it contributes to their good health and the development of gross motor skills as well as perceptual motor skills.
- (2) Play is a learning situation for children and parents. Play is an opportunity for children to learn who they are, what they can do, and how to relate to the world around them. Through play, children are able to discover and explore, use their imagination, solve problems, and test out new ideas. Through these experiences children gradually learn how to gain control over their environment, and they become more competent and self-confident. How often have you heard a child proudly say, “See what I did?” Play allows children to push the limits in a positive way, to extend what they’ve learned as far as they can. It gives children the freedom to fail and make mistakes, and the opportunity to explore the limits of their skills.
- (3) Play is a means of emotional expression. Children live in a world where they have little power and few legitimate opportunities to express emotions such as anger or dependency. Fantasy play can reduce feelings of fear, anger, and inadequacy, and provides experiences which enhance children’s feelings of enjoyment, control, and success.
- (4) Through play, children can communicate thoughts, needs, satisfactions, problems, and feelings. An adult can learn a lot about a child’s feelings of joy, hope, anger and fear by watching, listening to, and talking with a child at play.
- (5) Play is a place for children to try out roles such as mother, father, aunt, teacher, and doctor. Role playing gives children a chance to see the world from other points of view, and helps them become less egocentric.
- (6) When children play in a supportive environment, they can be creative. They are free to try out their imagination, explore the impossible and the absurd, and develop confidence in the value of their thoughts and ideas. During make-believe play, boxes, blocks, and articles of furniture can become houses, palaces, or entire kingdoms; doll figures can turn into mothers, children, and even monsters.
- (7) Play develops the basic skills for social interaction. Children learn how to cooperate, share, and be sensitive to the feelings of others during play.

For the child, play is not frivolous—it is an opportunity for growth and development in almost every area. But it takes practice for children to become competent, creative, and self-confident in their play. It is important for adults to actually participate in play activities with children, and to create a supportive environment so that children will engage in a variety of play experiences.

CHECKLIST FOR EVALUATING ADULT/CHILD PLAY INTERACTIONS

A. When you play with a child, how often do you encourage the child to:

	Almost Always	Sometimes	Almost Never
1. Attempt to solve problems?	_____	_____	_____
2. Play independently?	_____	_____	_____
3. Be creative and inventive?	_____	_____	_____
4. Express feelings and ideas?	_____	_____	_____
5. Engage in pretend or make-believe play?	_____	_____	_____
6. Participate in both boys' and girls' play activities?	_____	_____	_____

B. When you play with a child, how often do you:

1. Direct or structure the activity?	_____	_____	_____
2. Create the rules of the game?	_____	_____	_____
3. Criticize and correct the child's mistake?	_____	_____	_____
4. Force the child to finish the project?	_____	_____	_____
5. Allow participation only in sex-appropriate activities?	_____	_____	_____
6. Feel uncomfortable with a child's expression of fear or helplessness?	_____	_____	_____
7. Compete with the child?	_____	_____	_____

CHECKLIST FOR EVALUATING ADULT/CHILD PLAY INTERACTIONS, Page 1

	Almost Always	Sometimes	Almost Never
8. Become engrossed with your own play, and ignore the child's play?	_____	_____	_____
9. Ask a lot of questions?	_____	_____	_____
10. Impose your own ideas?	_____	_____	_____
11. Give too much help?	_____	_____	_____
12. Prohibit pretend play?	_____	_____	_____
13. Demand perfection?	_____	_____	_____
14. Place emphasis on the ultimate product of play rather than effort?	_____	_____	_____

- C. What interferes with your ability to play with your child?**
How often do you play with your child alone?
Do you feel this play time is valuable?

Evaluating your responses to the items on this checklist will highlight some of the ways you can improve your play interactions with your child. For example, if you checked "Almost Never" on some of the items in Part A, you should make a deliberate effort to encourage these behaviors in the future. If you checked "Almost Always" or "Sometimes" on some of the items in Part B, you should try to eliminate these behaviors. Your responses in Part C may indicate that you need to schedule more play time with your child, or that you need to change some of the circumstances or attitudes that are interfering with your ability to participate in play activities.

REFRIGERATOR NOTES ABOUT PRAISING YOUR CHILD



- Catch your child being good—
don't save praise for perfect behavior.
- Don't worry about spoiling your children with
praise.
- Increase praise for difficult children.
- Model self-praise.
- Give labeled and specific praise.
- Make praise contingent on behavior.
- Praise with smiles, eye contact, and enthusiasm.
- Give positive praise.
- Praise immediately.
- Give pats and hugs and kisses along with praise.
- Use praise consistently.
- Praise in front of other people.
- Praise and encourage the "process" of children's
learning, not just the finished product.
- Promote your child's recognition of change and
progress.
- Label child's feelings about personal
accomplishments.

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EXAMPLES OF WAYS TO GIVE PRAISE AND ENCOURAGEMENT

"You do a good job of . . ."
"You have improved in . . ."
"I like it when you . . ."
"Good for you for . . ."
"Good idea for . . ."
"You've done a good job of . . ."
"See how _____ has improved in . . ."
"You're doing very well."
"Look how well he/she did . . ."
"That's a perfect way of . . ."
"Wow, what a wonderful job you've done of . . ."
"That's correct, that's the perfect way to . . ."
"I'm so happy you . . ."
"It really pleases me when you . . ."
"You're such a big girl for . . ."
"Good boy for . . ."
"Thank you for . . ."
"What a nice job of . . ."
"Hey, you are really sharp; you . . ."
"That's great, it really looks like . . ."
"You're doing just what Mommy wants you to do."
"My, you are minding Daddy so well."
"My! That . . . was so nice."
"That's very nice (or good) for . . ."
"Mommy's very proud of you for . . ."
"Beautiful! Fine! Great! Gorgeous! Tremendous!"
"How thoughtful of you to . . ."

Some Physical Rewards

A pat on the arm or shoulder
A hug
Head rubbing
Squeezing the arm or waist
Giving a kiss



EXAMPLES OF BEHAVIORS TO PRAISE AND ENCOURAGE

- Sharing
- Talking nicely
- Complying with requests
- Good eating behavior at dinner
- Going to bed after the first request
- Playing quietly
- Solving a problem
- Turning down the television
- Doing chores
- Coming home from school on time
- Getting up promptly in the morning
- Making it through the night without wetting the bed
- Making the bed
- Picking up clothes
- Putting toys away
- Walking slowly
- Doing homework
- Getting dressed
- Being thoughtful
- Being patient
- Being kind to another child or adult

Coaching Children in Cooperative Play With Peers

Join children and their friends when they are playing and “coach” them in good play skills by noticing and praising on their cooperative efforts. For example:

Making Suggestions: “Wow, that was a helpful suggestion to your friend.”

Expressing Positive Feelings: “That’s a friendly way to show how you are feeling.”

Waiting: “Super! You waited your turn and let him go first, even when you wanted to be first.”

Asking Permission: “That’s very friendly to ask him if he wants to do that first.”

Complimenting: “What a friendly compliment. I can see she feels good about that.”

Taking Turns: “You let her take a turn—how very helpful.”

Sharing: “You are both doing it together. I can see you are team players.”

Agreement: “You agreed with her suggestion—what a friendly thing to do.”

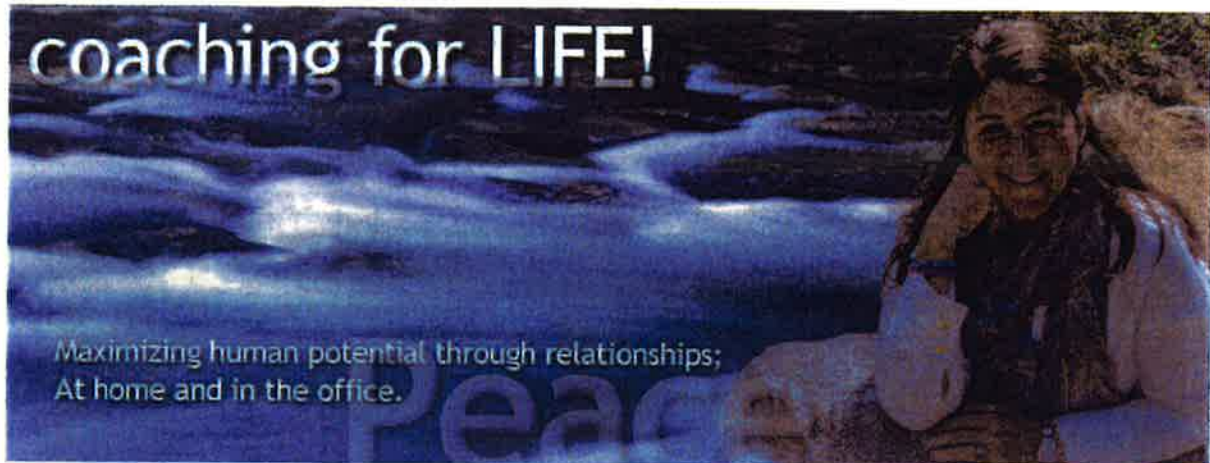
Using Soft Touch: “You are using gentle and soft touch with him. That is friendly.”

Asking for Help: “Wow! You asked him to help you—that is what good friends do for each other.”

Caring: “I can see you really care about her ideas and point of view. You’re a thoughtful person.”

Problem-Solving: “You both worked out that problem in a calm way. It looks like it feels good for both of you.”

Being Polite: “You were so polite in the way you asked her to wait—that’s very friendly.”



Healing the Trauma of Adoption:

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Most adults with whom I work, as clinicians or adoptive parents, tend to see adoption as a blessing, and in most ways it is.

But for the adopted children it is often a deep, unseen and unspoken wound. I want to speak for these children here, for just a moment~

I am writing this article/blog February, 2013, and just in the past two weeks I have encountered 4 parents who are struggling to understand why the child they adopted at birth is struggling with what looks like trauma symptoms. The children's ages range from 5-16.

Their parents are loving and concerned, not abusive or neglectful; yet their children are acting out in ways that are incomprehensible and confusing.

Daily, we see families with young children in our practice who have been adopted, who are acting out, or are unusually withdrawn; who appear out of sync, not typical; struggling socially, emotionally, behaviorally, and academically.

Test after test and assessment after assessment, medication after medication and treatment program after treatment program these children continue on in an obviously painful attempt to make sense of this life of theirs, their relationships, their sense of self and their world.

And parent after parent we hear a similar story; 'we adopted at birth or soon after, my child had no trauma, my child has been given every opportunity, every 'thing' and every chance to be like any other child. We have other children who do not act like this and we parent all of them the same. We love all of our children the same treat them all the same, what is 'wrong' with our adopted child'?

Many doctors and psychologists now understand that bonding doesn't begin at birth, but is a continuum of physiological, psychological, and spiritual events which begin in utero and continue throughout the postnatal bonding period. When this natural evolution is interrupted by a postnatal separation from the biological mother, the resultant experience of abandonment and loss is indelibly imprinted upon the unconscious minds of these children, causing that which I call the "primal wound." (Verrier, 1993, p. 1) *a must read for all adoptive parents~ ja*

All too often treatment providers who may be well intentioned and even well trained and experienced in 'adoption' may not be well trained or skilled in the neurobiological development of life prior to birth, and the 'trauma' of adoption for all adopted children.

Let me explain; in my 25 years of work in trauma, foster care and adoption, I have been both a foster parent (75+ children), and adoptive parent, as well have given birth to four beautiful children; and I have been a trauma therapist, immersed myself in the world of child welfare and mental health and for the past decade have been developing trauma informed and mindful approaches to working with a 'our' children.

I have watched families and marriages wither away under the stress of parenting 'our' children, I have watched countless children suffer through restraints, experience unintentional retraumatization in relationships with uninformed parents and providers and swallow cocktails of psychotropic medications that have no longitudinal research outcomes.

Perhaps most concerning, I am watching the macrosystem of care manifest the same traumatic outcomes as the very families and children who the macrosystem was created to serve.

I know that we fail to consider and give enough weight to the life of 'our' children prior to birth; what did 'our' children experience for the ten months of life before we came to save them; what did they feel in-vitro? Were they feeling the stress of an unwanted pregnancy? Was there talk between the parents of terminating the pregnancy? Was there domestic violence? Was there enough food for the biological mother? Were there drugs or alcohol shared between biological mother and child?

When planning or prescribing for these children consideration should be given to the possible in-vitro effects of being unwanted, or even having their existence threatened.

Was 'our' child fighting for survival even before birth?

Birth and Pre-birth trauma:

When I first saw J and her exasperated parents, she was a 15-month-old toddler. In the first 6 months after her birth, J's parents reported that J screamed more hours of the day than not, even while nursing. Her face would turn almost blue, her body appeared to be in convulsions and there was no effective way the parents could discover to soothe J. At 15 months, she still needed tight swaddling at night in order to sleep. J would break out in hives all over her face and neck when her parents left her for a much needed evening out, and even at times when her mom, who stayed home with her, would leave the room J was in if awake. When her pediatrician could find no medical reason for J's distress, he referred her parents to me.

As I developed a relationship with J's parents I began to explore the life of J prior to birth. With each new client, I complete a very thorough, historical intake of the **of both parents and their parents (as much generational LIFE information as I can gather)** and as much information about the pregnancy, birth and life of the child client as is available. I wanted to know all that I could know about J before she was born. *Although she wasn't an adopted child*, J's parents disclosed to me that they had talked often about abortion until they learned that mom had passed the stage of pregnancy for a 'safe' abortion, and then considered adoption; talking with several adoption agencies throughout the pregnancy and even at the time of birth. ***J's parents did not decide to keep J until she was 2 days old.***

Both parents said that it seemed like J never felt safe, was always afraid and that although they were very much in love with J now, that no amount of love felt like enough for their little girl. They described her as agitated, not easily soothed, not deeply connected to them and fussy. As she grew older, they described her as angry, hostile and aggressive, disrespectful and mean to them.

The story of J suggests the powerful effect of pre-birth experience on the developing fetus and newborn and gave me the push I needed many years ago to begin to consider the experience of 'our' adopted children's lives, prior to their life with us.

Adopted children have experienced the condition of being unwanted before they were born; often abortion was a real consideration. Many adopted children have biological siblings who remain intact with the biological family and struggle to make sense of 'not being chosen.' In addition, they may have experienced the loss of the mutual and deeply satisfying mother-infant bond that develops during pregnancy. These experiences can affect 'our' children in any of the following ways:

When the adoptee is separated from the birth mother, the child undergoes extensive abandonment trauma. This child will not consciously remember the trauma, but it will stay in her subconscious as she lived it. This issue of abandonment will be played out through life.

- **Adopted children will often abandon others (friends, parents, peers) as they were once abandoned.** Adopted children grieve the loss of their birthmother even at birth. This break in relationship is experienced by the adopted child in an emotionally and traumatic way. These **preverbal**, emotional and traumatic memories are held in the very cells of the adopted child and rooted in an **unconscious level of memory** forever. The issue of abandonment may continue to play out in relationships through the adopted child's life.

Adopted children are emotionally vulnerable at birth, like all children; and often remain emotionally 'out of sync'. 'Our' children's trauma of adoption is not responded to by most adoptive parents simply due to a lack of education and information shared with them. The majority of adoptive parents have not heard of the trauma of adoption and do not seek out trauma informed services or support. Few adoption agencies prepare parents with the depth of understanding necessary to mitigate early on the trauma manifestation of adoption.

Some adopted children carry anger toward the birthmother for abandoning him/her. Because the birthmother is often an unknown, mysterious person, our adopted child redirects his/her anger at others, most often at the adoptive mother. This anger can be seen in the temper tantrums of young children, or the 'out of the blue' acting out of the adolescent. Many adopted children with whom I have worked express feeling guilty about the anger and so suppress it. Suppressed anger surfaces as vacillating social, emotional and behavioral presentations at home and in school and can become extremely negative and even dangerous in some cases.

Many adopted children defend themselves against further loss by shutting out others, attempting to avoid the pain of yet another abandonment. They fight the closeness of relationship with the adoptive parents and siblings. This is often an unconscious attempt on the part of the adopted child and many express an undercurrent of feeling unwanted, unworthy, and of no value. This low level of esteem and lacking sense of self can manifest in poor peer relationships, poor social skills and negative behaviors of stealing, lying, setting fires, fighting, using drugs, or running away. On the other hand, **some adopted children work to become the 'perfect child' so there will be no reason for abandonment by the adoptive parents.**

Identity development and self esteem are often struggles experienced by the adopted child. The task of identity development during preadolescence can be more painful for the adopted child. The adopted child will often have many

questions about their biological family: how they live, where they live, perhaps wanting to make contact, why they were not 'kept', and may struggle to see the role of the adoptive parent as such, up to and including denouncing the adoptive parent's role and making requests to live elsewhere. It is common for 'our' children to question the influence of traits, inherited vs acquired and attempt to determine who is more important, the biological or the adoptive parent.

The adoption experience is life-long and the effects on the adopted person certainly will vary. I have provided a few for supportive consideration. Many of these affects are experienced as painful for the adoptive parent who is unaware of the impact of adoption trauma. A deeper understanding of the adoption and pre-adoption experience helps prepare us for a more effect response to 'our' children.

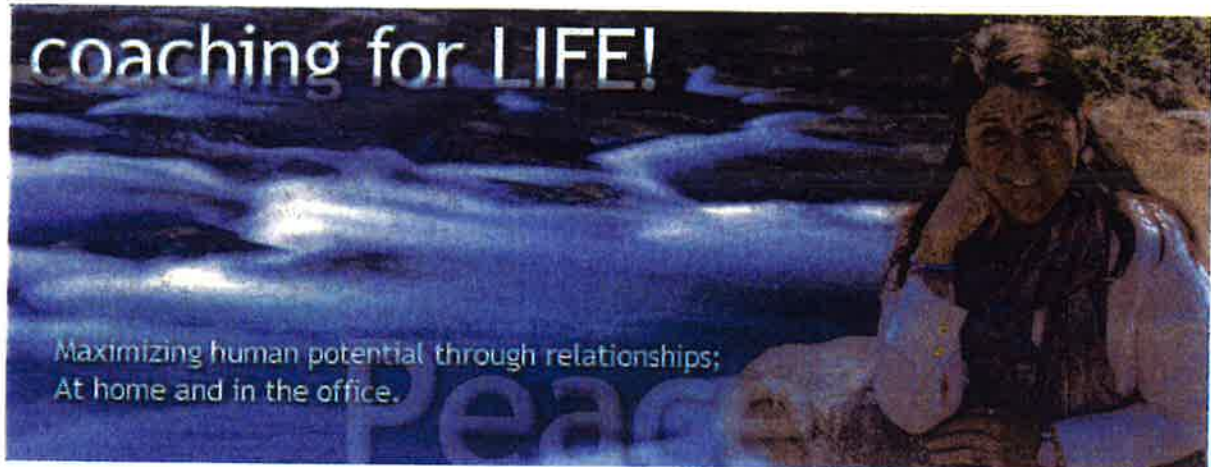
An adoption coach may be helpful if you find yourself struggling to understand the relationship you have with your adopted child. You are not alone, reach out if you need help~

Jules

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For more on our mindfully based and trauma informed paradigm for healing visit me at
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We provide monthly teleconferences in Integrative Healing of Trauma for no charge. You can register at the site above.



Their Anger Will Not Become My Anger

*Featured in Adoption Today by Juli Alvarado
March 2011*

Their anger will not become my anger~

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Adoption, and foster care, is a labor of love. Sometimes it is an easy labor of love and all goes well! Other times there are struggles that not one of us could have anticipated at the time we decided to foster/adopt. Understanding the foster/adopted child is imperative to our ability to successfully parent them and remain sane. There simply is a difference between parenting our foster/ adopted children and our biological children. Period.

Like many new and enthusiastic adoptive parents, I simply could not see how parenting a foster or adopted child would be any different than parenting my four biological children. I was doing that rather well and felt I had what I needed to bring more children into our family. My belief was that love would conquer all! What I have learned along the way is that it is so much easier for me to give love than for many of my children to accept it.

To accept love, there must be trust and safety. Many of our children live with the truth that abandonment by a parent is an absolute possibility~and therefore struggle to trust and feel safe with the adoptive parents. The anxiety of living in a relationship where there is not complete trust throws the mind/body system into a constant state of low level anxiety. This constant anxiety impacts one's ability to modulate their social, emotional and behavioral life. We see children acting out, socially immature and emotionally regressed.

I work with many well intended, loving, generous, giving families with a foster/adopted child who appears angry, hostile, isolative, disrespectful and unattached. The parents are baffled, they just don't get it, they don't understand that adoption has anything to do with their child's acting out. One of the hardest situations to handle is the child who actually provokes the very rejection that they fear to begin with. For many foster/adopted children who I work with, allowing themselves to be loved is too dangerous; they simply can not trust that they will not be abandoned again.

Often when our children act out toward us we are left feeling as if we have done something wrong, that we are to blame, that we are not good enough. Some of our children act in ways that leave us feeling inadequate, small and just downright horrible at times. Many become so controlling, manipulative and defiant that our homes and our lives become consumed with chaos. The provocative, destructive and testing behaviors we see become incomprehensible to most parents.

Seems almost impossible, I know, for a child even adopted at birth to wonder about abandonment. Yet many of them do. After 20 years of working with foster and adopted children, and 15 years of fostering more than 60 children as well as raising 4 biological children I have learned a truth that is often denied. The love that I understand, the love that I long to give, the love that I long to receive from my children is not always the love that will conquer all. I have had to learn to love myself and my children in some new ways.

I have learned the most from children who have aged out of foster care, or who now in their 20s and 30s share their stories of growing up in adopted and foster homes. This journey has not always been easy for me. My marriage has suffered, my biological children have had their share of pain, my neighborhood, our grocery stores, our church have all seen the manifestation of untrusting and scared children who have lived with us.

However, the emotional state of my life today, the joy, the incredibly connected relationships I have with my 4 biological children, the love and most of all the amount of internal peace that I feel would not have been possible if not for all of the pain. I had to experience everything that I have in order to learn that I am more than a mother. I am more than a wife and even though those two roles are the most important roles I will ever have, I am more.

I am Peace. I am Joy. I am Fun. I am Risky. I am Energetic. I am Healthy. I am Sensitive. I am Authentic.

I had begun to lose all of those truths about me. All of the therapists wanted to focus on the children, on their behaviors, on their pain, on their suffering. I learned all I could about trauma, attachment and emotional regulation. I read all the books, I went to all of the trainings. Yet, I was losing myself. I was angry, I was scared, I was tired even hopeless at times. I wanted them gone, out of my home. I was not healthy in my mind/body/spirit. I knew, just knew that something had to change.

I had to find my truth again. I could no longer deny my truth in the face of their pain. I was in pain too. Their pain was becoming my pain! I could no longer blame my children. I had to face my own pain while learning that I could not take their pain away. We had to learn to get through this thing together. We discover the truth of who we are in relationship to others, and boy do we learn with our children. The bonding that has transpired between me and my foster/adopted children has been forged through sacrifice and suffering and has not been always easy. It was not the fluid, loving, gentle bonding that took place between me and my biological children.

The most important lesson in all of this; that which has sustained me through years of this work is in learning how to stop absorbing other people's negative, toxic emotions, especially those of my children. In other words, I have learned that

Their anger will not become my anger; their fear will not become my fear; their rejection of me will not become my rejection of them.

I had to not only find my truth but learn to live my truth while parenting some very wounded children. My number one truth is that I Am Peace. I had to work at remaining Peace even in the face of their chaos. I have had to work at living my truth of Peace amidst their unconscious attempts to incite rage. Liberating myself from negative emotional states has literally saved my life.

I have learned to stay centered in stressful, highly emotionally charged situations. I have learned that emotions are energy and that we can catch energies from others. When others are extremely sad, we feel sad. When others are exuberant we tend to feel some of that with them. When our children live in a world of anger and fear we can catch that too and become angry and scared ourselves. We become an emotional sponge. We don't even know if what we are feeling belongs to us or is really someone else's that we picked up along the way. How did I become so unhappy? I am not an unhappy person...or am I?

Here are some tips for clearing your emotions while maintaining healing homes:

- 1) Whenever chaos is emerging, inside of you or out:
 - Stop: stop everything, stop moving, stop talking, stop yourself. Quiet the mind.
 - Drop: drop into your breathing. Just deep breaths as you get yourself 'back'
 - Roll: roll into your truth first, then roll back into relationship with the other person
- 2) Ask yourself, is this my true emotion, or is it theirs?
- 3) Focus all of your attention for just a moment on inhaling positive exhaling negative
- 4) Respond don't react: respond to the fear that is typically under their anger, instead of reacting to the anger by engaging in the conversation. "Ruth, you only act this way when something is wrong...what's up?" instead of, "do NOT talk to me that way." (*their anger is not your anger, don't let it be!*)

5) Repeat your mantra before engaging, "I Am Peace"

6) You must find a time, every day, to quiet your mind, stop your body, rest into your spirit of love and peace. Surrender there a few minutes, every day.

We can not provide a healing environment in our homes if we do not have a healing environment in our hearts. If we are angry, resentful or blaming we need to reach out, get some help. It is not your fault, it is not their fault. It just is. You should not be expected to do this alone. We are one tribe, us adoptive/foster parents, of many colors; but one tribe. We need each other.

Over the course of 2011 I will be sharing with you more of what I call **TIPS, Trauma Informed Parenting Strategies** in each issue of Adoption Today. Your feedback and questions are welcome at info@coaching-forlife.com

In the meantime: ·
Peace,

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