First published in Pact's Point of View © 1998 Do not reprint without permission.

A Different Kind of Normal

by Joan McNamara

Every adoption has its own story, woven from the tears and hopes of each person and family involved. For some families, the process of adoption is itself a grand adventure; for others it's a painful and challenging ordeal. After adoption, while some parents and children seem to "live happily ever after," or at least bump along normally, a smaller number of families continue to face challenges. Our own family's story is composed of a number of intertwined stories, in part because we adopted more than one child and in part because each addition shifted the family in new directions all over again. Our children are now adults, which gives us a different perspective and the gift of hindsight.

We first adopted in the era of "all you need is love" and "all children are adaptable." All other issues were subordinate to these mantras, or at least secondary in importance. And being young parents, we naturally thought that anything was possible and that we could change the world, one child at a time. At the time, we would not have believed otherwise, even if we had been told differently. We were joined by other adoptive parents who thought that the challenges of older children, adopting out of birth order, ethnic/racial/ genetic differences, large families, children with special needs, and other issues only added spice to family life. Soon, however, we joined these same parents as they careened into the complications and interweaving of issues like birth families, attachment, out of control behavior, abuse, prejudice, identity, and diminished selfesteem.

Our first adoption was of a child from Vietnam. Thanh was a little over a year when the search for a home for him began, but over three when he finally joined our family. We were as full to bursting with fantasies as we were with excitement: we would get surgery for his polio-damaged legs, he would be able to play freely with his sister and other children, and everyone would live happily ever after. I was primed with book knowledge but unprepared for my emotional reactions to a child who was reluctant to come with us (he clung tenaciously to the Air France steward), whose thick black hair, so luxuriant in the photos, had been buzzed

into a Marine haircut exposing the scars on his scalp, who smelled, and whose medical problems were far greater than we had been led to believe. His sister, our birth child of the same age, claimed Thanh immediately as an interesting new toy and was fiercely protective of him. It took much longer for us as Thahn's parents to establish the same degree of entitlement and claiming, and even longer for our new son to begin to build trust that he was staying and that we were safe.

Our third child was Dao, the second child adopted in the family. Her picture from Vietnam showed a skinny, fearful, hesitant black child with enormous eyes posed in front of a wall that was riddled with bullet holes. She was just as cautious when she arrived in the US at age seven, dressed in clothes too small for her, her beautiful eyes even bigger with apprehension. A few years later, I asked her what she had been thinking about when she got off the plane. She replied, in all seriousness, "I thought you were going to eat me." Dao tested poorly on standardized academic tools and had a habit of daydreaming off in the middle of things. During adolescence, her erratic behavior led one mental-health professional to consider the label "schizophrenic" and another the label "borderline." In the beginning, we focused more on encouraging academic difficulties and helping her feel good about herself than we did on the emotional baggage she brought from war-torn country.

Hindsight is a wonderful tool. Its only drawback is that you can't return to the situation and use your new-found knowledge to change the events that have already taken place. Information available now about Post-Traumatic Stress Disorder and dissociation could have helped us encourage healing for our daughter and perhaps tempered some of the issues mixed up with her feelings of fear, guilt, and self-blame. Her view of herself as damaged and bad influenced her own identity as a female and as an African American female. Her ideas had already been assaulted by the attitudes and behaviors towards her in the orphanage, where she had been devalued as the child of a "whore" who slept with Black American soldiers. Living in a war zone, she had

hidden with other children when soldiers came through with guns; she had faced threat of starvation and disease and seen other children die. Each piece of her personal pain reinforced messages from other issues she faced. Each negative built neatly upon the weight of years of many difficult issues.

In the book Strong In The Broken Places, Linda Sanford profiles adults moving past survival into healing after childhood trauma. She points out that although a few had foundational pieces set when they were younger, the major work accomplished was in adulthood. As parents, we generally think that we should be able to help our children "outgrow" childhood problems, and if our children haven't outgrown these problems by the end of their teen years, we feel we have failed. But we all continue to grow, even past adolescence. Some of the work we do to resolve childhood issues may take place when we are supposed to be all grown up. If given some degree of love and security, examples of caring and competence, and tools to cope, first as a child and later as an adult, some people who crash self-destructively through their teen years may be able to slow down long enough as they grow older to start putting things in perspective. This was the case for our daughter Dao.

My husband and I went on to add to our family through birth, adoption, foster care, and guardianship. When we look now at our early home movies and later videos, we can watch all over again as our children grew and our family expanded. The Christmas morning pictures we took each year captured some of the best of these times: the smallest child more interested in the wrapping paper than the gifts inside; the children cooperating together to agree on and get a gift for Dad; homemade presents full of pride and expectations shyly offered to parents. Through the years, with each addition, our family reinvented and rediscovered itself. Each of our children presented us and the family as a whole with distinct gifts and challenges, some of which we did not discover until long after they moved on to lives on their own.

For me, one of the more frustrating challenges was the struggles of children who wanted to be good, wanted to do better, but kept on sabotaging themselves. Children with learning disabilities or Attention Deficit Disorder provide a simple example: they may want to learn and to belong, but their behavior gets in the way of academic and social progress. One of my children with ADHD taught me that having this type of label brings significant difficulties but also unique gifts. Thomas Alva Edison was this child's hero: who else but an ADD person would get thrown out of school but have the patience to repeat an experiment thousands of time to get to the light bulb? I learned that there is often a flip-side to labels, not often readily recognized or encouraged. Children, and adults, with ADD/ADHD are

often distractible, fixated, hyperactive. But they can also be tenacious, full of energy and hard work, and creative. It depends to a large degree on how we help them channel their talents and constructively cope with the issues that challenge them.

Children affected by prenatal substance abuse can face—and present to others—similar challenges. Some of the typical traits for children bruised before birth by their birth mother's use of alcohol or drugs make adults assume that the children are merely being lazy or oppositional: repeating the same mistakes; erratic memory, so that a task learned one day may be forgotten the next but remembered later; easily frustrated; unable to think things through to logical consequences; covering up a lack of understanding or knowledge by lying. Some of the behaviors seen with children who have this distinct type of learning difficulty, especially children with otherwise normal intelligence, may be confused with those of children who have attachment problems. Lying is one example; repeating behavior with seeming disregard for consequences is another. Children reacting to Post-Traumatic Stress Disorder can also have symptoms that overlap with children affected by prenatal substance abuse. And children affected by such substance abuse can in addition face difficulties because of past trauma and/or attachment issues.

One of my children had years of therapy to deal with traumatic abuse, but continued to repeat inappropriate behavior even while gaining insights into her past. It was not until we discovered that her mother had a substance abuse problem, most likely continued during pregnancy, that we understood that there was another dynamic affecting our daughter's ability both to process abstract information and to monitor her own behavior consistently. Her learning difficulties and thinking patterns, influenced by prenatal substance exposure, made a difficult issue even more difficult for her to deal with. This prenatal exposure also had contributed to a negative self-image, because she kept making the same mistakes despite repetitive work. Knowing her mother had used substances during pregnancy which probably affected the way she learned and processed information was not a negative for her. Instead it was liberating; there was a reason for why it was so hard and why mistakes were repeated; she wasn't "bad." She could then begin to learn coping mechanisms that could more effectively help her identify problem areas and focus on ways to compensate for these areas.

Children who have been affected by prenatal substance abuse can be difficult children to parent, difficult children to get close to, and sometimes difficult children to love. They may find it difficult to love themselves. The reciprocal circle of attachment, so important in adoption, in this case may tilt out of focus not because of abuse or neglect, but because a child's internal circuitry makes it

hard for the child to be able to communicate needs and hard for the adults to be able to satisfy these. It is harder for strong connections to be established or to stay in place.

Although I have worked with adoption and foster care for many years, it has been my own children who have taught me to push beyond the platitudes, move theories into the real world, and to look for real people behind the problems and labels. Children frequently teach grownups humility. Looking back at when I first read about adoption before I was a parent, much of what I read seems now like bumper-sticker wisdom: Total commitment from adoptive parents will create a successful adoption; Every child needs a loving home; Dealing with separation and loss allows a child to bond in an adoptive family. Even then, it seemed to me that these were important and necessary foundation pieces, rather than complete answers to adoption, which itself is composed of a multiplicity of issues and individuals. People seemed to be hoping for a simple answer to make things work, to fix things, like a mother kissing a hurt to make it all better.

Over the years, work in adoption seems to have gathered up popular themes and theories and then pushed them out of the spotlight (and picked up a new one) when the issues proved resistant to any quick fix. Like the television "disease of the week" movies, we looking for all encompassing theories that could provide a magic bullet solution to the identified problems. The themes became more sophisticated, but we still looked at each issue of the moment as giving us the one true answer that would make it all better. First came commitment, then separation and loss issues, followed by ethnic and racial identity, attachment and bonding (a recurring theme), the adoption triad, open adoption, child sexual abuse, Post-Traumatic Stress Disorder, attachment problems, post institutionalized behavior, and, most recently, exposure to parental substance abuse. What we have begun to realize is that, for any of the issues for children and parents involved in an adoption, no one issue stands isolated from the other; each separate issue is intimately connected to the others which are involved, and affects the others. Just as each person in an adoption story affects the adoption process and life afterwards, the various issues influenced or triggered by each of these people also have profound and lasting effects.

A child has been abandoned, or abused, or sometimes even a child who has had an "adoption plan," may feel that these events were related to some fault of their own. Often, they label themselves as dumb, stupid, or bad. Young children generally see themselves as the center of the universe, with events revolving around them. A young child might say, for example, "If I was a good boy, Daddy and Mommy wouldn't have divorced." Claiming responsibility for a negative action

or outcome can feel less threatening than admitting the scary reality that the grownup world is largely out of their control. In an early training film about life-books Carol Williams, now an associate commissioner of the Children's Bureau, talked to a little boy in a foster care who had been born in a taxi on the way to the hospital. His explanation for why he came into care and had an adoption plan made was simple "Because I came too soon." In his eyes, he was a bad baby who deserved to be left because he "came too soon." The idea that grownup problems were involved, rather that any imagined fault of his own, was not within his view of how the world worked.

I saw similar attitudes in some of my own children and in some of the children I worked with. For some children, a perceived difference or "sin" was a ready target upon which to focus their confusion or pain, proof positive of why they were abandoned. Special needs like medical problems or learning disabilities are obvious hooks upon which to hang the reasons children had for their move into care. One little boy who had been severely beaten by his birth father, leaving him permanently injured, shared his conviction that he had been a bad baby and cried too much, so that was why his father had to beat him. To him, his injuries were the result, maybe even a justified outcome, of being bad.

Belonging to an ethnic or racial minority, especially when abuse or neglect has been part of their life, seems to some children to be a logical reason why bad things happen to them. For some children who move into foster or adoptive homes of different background, the safety of the new family may inadvertently reinforce the child's own negative view of their ethnic heritage, community, and themselves. Three of my children, siblings who had been moved into a loving African American foster home together, came to the conclusion that "Black people are okay, and White people are okay," but that their own Mexican American heritage and community were not. Their experiences in a substance-abusing family within a poor community, in a neighborhood where other families had similar problems and violence was prevalent, led them to discount a whole group, and therefore their own worth. Sometimes even the more common differences children see between themselves and their parents take on inflated proportions at the times when it's important to be like parents: children may discount talents that are different from other family members and focus on the things they cannot do or characteristics they don't share with others as indicators that they are not "good" in the same way their "good" parents are.

Children who have experienced trauma or loss frequently feel isolated or set apart from other children. This is especially true when a foster or adopted child had been abused, neglected, or abandoned. The move into the safety of a new family is not automatically viewed

as the rescue seen by adults; instead, children may consider this move as either being kidnapped or thrown out by family. The fact that you are not with the family you have claimed as yours is very often seen as another proof of your low worth, reinforcing the messages received, through actions towards you such as abuse, that you are no good.

Sometimes the messages are in reverse order of importance for children than for adults. A 15-year-old girl pointed out to her therapist that, even though sexual abuse issues get adults "excited and upset," for her sexual abuse was only a footnote to the central pain in her life: her mother had chosen to stay with and defend the abusive boyfriend rather than work together daughter out of foster care. "The sex abuse stuff was only just one more way they told me I was worth nothing. What really hurt is that she chose him over me. That was the last big message they gave me that I was no good."

When one of our birth children became critically ill with meningitis and lost his hearing at age 7, the children in our family who had been adopted were confused, even stunned. In their minds, bad things happen only to foster and adopted kids (i.e. bad kids) like them. Bad things like this don't happen to birth kids (i.e. kids who deserve to belong, good kids) in a family. The fact that bad things could happen randomly, without weighing whether you were good or bad, was too scary to accept. They had made sense of their life history by constructing the false sense of power based on their ability to be bad and then be rejected. The idea that abusive and neglectful parents' own problems might be the source of their inability to give care and love to their children would mean that their parents were ultimately the ones who chose to have their children live away from them. For the children, to accept that this event was out of their control could mean that they would have to face the pain of abandonment rather than embrace the false safety armor of their own power, the control they imagined could be found in being bad or defective in some way.

Confusion and pain make you feel isolated from others. This is why group therapy for adopted and foster children have been so important for my family and for the families of children who I have worked with. Whether these groups are purely social or part of therapy, when surrounded by others who have felt the same things children can see that they are not the only ones, they were not singled out for grief. Children and families can also see that adoption is just another way for families to grow— a different kind of normal.

Our children, mostly grown now with children of their own, are scattered from Texas to Rhode Island, a few living still in our old home town in New York where they grew up, a few close to where we now live in North Carolina. Some of our children maintain close

connections with the other family, others only periodic or momentary contact. One of our children is a parole officer; another is in jail.

My son Thanh, who lives nearby our current home with his wife and two children, is now 26. His daughter was born to him and his wife; his son came into the family when he married his wife, who had one child. Every year at Christmas he proudly shows us videos of our grandchildren, taken by him on Christmas morning.

My daughter Dao is now a mother with three daughters, the oldest named Asia. Her girls all love to hear stories of their Mama's big family. She is divorced and living in the town where she grew up, connected to the people and places that were so strange to her twenty years ago.

The birth children in our family are now 20 and 28, and each is a strong person. Our son, a sophomore at Gallaudet University in Washington, DC, has decided that although he would like to be a Famous Author, he needs to prepare for a teaching job, just in case. On a job interview, our daughter told her prospective employer "Of course I can handle difficult customers and stress- I have seven brothers." She got the job.

Each of our children has been faced with a number of unique aspects of adoption, as adopted persons, as siblings of adopted persons, and now, for some, as parents themselves. These issues of adoption were mixed with related issues that made adoption even more complex for them, issues such as early trauma, learning difficulties, attachment, prenatal exposure to alcohol or drugs, medical problems, siblings in the family and siblings in other families, racial and cultural heritage, birth parents and other relatives, lack of information on early history, abandonment, separation and loss. In writing these down, it looks like a grocery list of some of the major issues swirling around discussion of adoption today. But for our family and for our children, these weren't merely discussion topics; these shaped the ways others reacted to them and they reacted to themselves. As parents, we tried to lay down foundations, shore up damaged parts, and continue to encourage healing and love. We see the results of our efforts in small ways in some of our children, and in larger ways for others. We also see it in their children, confident and loving. Here is where we effected change in the chain of loss that is part of even the most joyful adoption. Here we touched the possibility for brighter tomorrows.