Art and science of Transplanting Children

Course Outline

The impact of attachment disruption, even when in the best interest of the child, can be deep and profound. This course provides effective and encouraging strategies for resolving these challenges and bringing these children to their full potential as human beings. The material is useful for all those who are involved with transplanted children: adoptive parents, adoption agencies, foster parents, step parents, teachers, supporting relatives, social workers, psychologists, pediatricians.

Course Outline

The course is conveniently divided into 8 sessions for study and review.

Session 1: Becoming attached

Neufeld's six-stage model of attachment is introduced as are the conditions required to fully develop the capacity for relationship. The construct of attachment depersonalization is introduced. An attachment problem checklist is presented for participants to use.

Session 2: Why children need to attach

The two main functions of attachment are introduced and expanded upon: firstly to render the child receptive to being taken care of, and secondly to foster growth and maturation. The child's desire to "be good" is discussed as a function of attachment. The failure to re-attach renders a child resistant to care and oppositional in behaviour. The bottom line is that children need to adopt their caregivers.

Session 3: Fostering attachment

Six ways of fostering healthy working attachments are presented and discussed. These include: collecting, nurturing, inviting dependence, matchmaking, bridging and shielding.

Session 4: The impact separation

All adults dealing with transplanted children need to be familiar with the profound impact of facing separation. The separation complex consists of six major problems all rooted in unbearable separation. A problem checklist is introduced to help identify and diagnose the separation complex. Also discussed are strategies for reducing the separation that transplanted children face.

Session 5: Impediments to re-attachment: protective shyness

Transplanted children often experience great difficulty re-attaching to their surrogate parents. One of the most significant problems is the existence of competing attachments that the brain deems critical for survival. Competing attachments may be fantasy attachments and have no relation to whether a relationship with the attached-to-person is in the best interests of the child. Three guiding principles for resolving and neutralizing these competing attachments are presented.

Session 6: Impediments to re-attachment: defensive detachment

A second major impediment to re-attaching is the reversal of attachment instincts caused either by hypersensitivity or by facing separation which is too much to bear. This defensive reaction has many faces and many triggers; its impact is devastating both for the child and for the caregivers involved. This defensive reaction also underlies a number of diagnosis common to transplanted

Session 7: Keeping children safe and helping children adapt

Strategies are presented for reducing the wounding that transplanted children often face by the nature of both their attachment history, and their current attachment constellations. Transplanted children have more to adapt to, and at the same time are often less capable of adapting than other children. Participants are instructed on how to read aggression as a failure of transplanted children to adapt to their circumstances and situations. Strategies are presented for dealing with this aggression as well as for priming much needed adaptation.

Session 8: Disciplining Transplanted Children

Transplanted children are often more difficult to discipline as a result of the dysfunction that results in the wake of a separation complex. The usual discipline methods often backfire with transplanted children as these methods depend upon processes that are typically arrested when children become emotionally defended against vulnerability which is too much to bear. Methods of discipline that are effective, attachment-safe, and developmentally sound, are presented.