Parenting and Healing the Aggressive Adopted Child

By Arleta James, PCC

As a child, I never considered hitting my mother. It didn’t even occur to me that I had that option. Even during times when I was particularly angry with her, I accepted her decision with no violence. Yet, there are some adopted children—with traumatic beginnings—who daily, hit, kick, bite, slap, push and shove their parents and siblings, or do damage to the dry wall or break household items! It is simply terrible to live with violence in your own home. It is totally contrary to the meaning of family!

Frequently, families with aggressive adoptees receive little support. Others—friends, family, neighbors, professionals—are suspicious of their parenting. “Why are you letting your kid walk all over you?” “If he were my kid, I’d show him what would happen if he did that to me!” “Give her to me for a week. She won’t do that again!”

If it were only that simple! It isn’t!

Resources for these families are limited as well. Respite is hard to find. Therapists trained in interventions that will actually bring peace to the adoptive home are difficult to locate. Very rarely does a community program exist.

Adoptive families living with a violent child feel trapped—held hostage in their own home! Many begin to “walk on eggshells” in an effort to avoid yet another tantrum.

Some of the pre-adoptive factors, which lend to children becoming aggressive include,

- In homes (or orphanages) replete with domestic violence and physical abuse, children come to believe that aggression is a means to solve problems. In such homes, it is the strongest member of the family who gets what he wants (Perry, 1997.) Children enter the adoptive family and attempt to use violence to obtain “wants” and meet “needs.”
- A child who has been a victim of unpredictable sexual or physical abuse learns that if this abuse is going to happen, it is far preferable to control when it happens. As a result, children who have been physically assaulted will frequently engage in provocative, aggressive behavior in an attempt to elicit a predictable response from their environment (Perry, 1997). Children provoke adoptive parents in an attempt to get an abusive response. These children “expect” violence to occur in all families. They have no ability to discern between their “abusive” birth home or orphanage, and their “healthy” adoptive family.

• A growing body of research demonstrates that the brain organizes around its early experiences. The developing brain is extremely sensitive to stress. The brains of traumatized children develop to be hypervigilant and to respond to non-verbal cues, especially related to threat. Hypervigilence is a quality essential to survival in a chaotic, abusive environment. So then, the brain of the child who is traumatized adapts to its environment in order to help ensure the safety of the child. Yet, this survival ability is ill suited when the child changes environments, such as the child moves to an adoptive home. These children will have a persisting fear response. Thus, a trigger and/or stressor—real or perceived—will lead to emotional dysregulation in the form of hyperarousal, dissociation, numbing or avoidance. Aggression can occur when the child is in a dysregulated state. Our previous posts, The Brain on Trauma, Posttraumatic Stress Disorder: Thinking About the Adoptee's Trauma, and Consequences vs. Reactions: Parenting “Deerly” explain this information about the brain in more detail.

• Disturbances in attachment—especially children who present with a disorganized style of attachment—are associated with very negative behavioral outcomes, especially violence and aggression. Children reared in minimal care institutions—orphanages—exhibit higher levels of disorganized attachment styles (Frank Putnam, 2006.) Neglect and deprivation—whether in a foreign country or an American birth home—are a lack of psychological and physical stimulation. The adverse outcomes of such substandard care giving were detailed in Neglect: There is No Such Thing as a Little." In Chapter 10 of my book, Brothers and Sisters in Adoption, I describe the continuum of attachment styles including the disorganized attachment pattern.

In order to reduce or cease the child’s aggressive behavior, parents want to consider the following, Cognitive therapies are an essential component in altering the belief system of the child who exhibits aggression and violence in the adoptive home. As the first two bullet points above demonstrate, the pattern of violence is perpetuated by the perceptions the child developed while residing in an environment of domestic violence and/or physical abuse. This should make sense. Do you remember, at some point in your life, vowing, “When I have children, I'll never say that to my own kids?” Then one day you shout, “No dessert until you clean your plate!” “Turn off the lights. Money doesn't grow on trees!” “Close the door! Were you raised in a barn?” You think, “Oh my goodness, I have become my mother!” “I sound just like my father!” We all repeat the patterns from our families of origin. Children who have experienced trauma alter the dynamics of the adoptive family in a manner that is referred to as a trauma reenactment. In essence, the adopted son or daughter can move into an adoptive family and re-create the dynamics he or she experienced in the orphanage or abusive birth family. This compulsive repetition or trauma reenactment is unconscious. Yet, in most instances, once these kids look at their trauma, they can learn to interrupt the repetitive patterns. They can begin to live in the present (van der Kolk, 1989). They can function in more healthy ways in interactions with brothers, sisters and parents. Families are referred to the Association for Treatment and Training in the Attachment of Children. This organization offers a state-by-state listing of therapists who are trauma and adoption competent. They also offer support for parents via a listserv and a phone conference support group.

Simultaneously, parents can also interrupt the manner in which they respond to the child's aggression. This change in parental behavior is often a key to breaking the cycle of the abusive child in the adoptive family. After an aggressive incident, examine the incident. Ask yourself, “How did I respond?” and “How can I respond differently next time?” Predominantly, parents want to cease reactions that include anger and physical discipline.

Neurofeedback is a form of therapy gaining credibility and has more availability. Neurofeedback is training for the brain. Neurofeedback can help to reduce the impact of abuse and neglect on the brain. Electrodes are placed on the scalp. Brain activity is monitored on a computer screen. This provides constant feedback to the individual about his brain activity. This feedback is actually presented in the form of a video game—no hands required. The child uses—trains—his brain to play the video game. In turn, brain activity (i.e., hyperarousal, dissociation, etc.) is increased or decreased. The end result—new and improved brain function! This calmer state allows the traumatized child to access the parts of the brain associated with more planful actions and reactions—there is greater ability to think in a rational and logical manner. In selecting a neurofeedback provider, ensure this professional has the training (or access to a
ment, or children who have a hard time accepting affection post-adoption, seek nurture via aggression. Physical restraint is a way to get the touch they so really need. Parents are encouraged to avoid restraint.

**Increase nurture**—every opportunity counts here! “Good touch” reduces the child’s need for “bad touch.” A lack of nurture is a major contributor to the child’s aggressive behaviors. Thus, an increase in affection is essential to reverse the impact of neglect and abuse. As difficult as it is to nurture a child who is aggressive, it is imperative. For the child, nurture is really an entitlement, rather than a privilege! A pat on the back, a hug, a back rub, an arm around the shoulder and so on, go a long way to reducing your child’s needs to hit, kick, slap and punch. Helping even the most difficult children increase their ability to accept—and come to enjoy—parental caresses is described in *Nurture: The Ring that Holds All the Keys – Part One and Part Two.*

**Calling the police** is also a last resort. This may be needed in more extreme cases in which the child is causing genuine safety issues. However, common sense needs to be applied here. The police can’t do much with young children, other than talk to them or tell them what might happen in the future. Many children with histories of trauma have no sense of time, so “down the road” or “at some point in time” have little meaning. Frequently, officers arrive, calm everyone down and then leave. The message this sends to the child is that “nothing happened.” This validates the aggression. The child thinks, “Even the police didn’t do anything, so it must not be that bad.” Parents are encouraged to explore the outcome of a police visit—prior to the need for such a visit. Talk with your local police department to understand their perspective, and the legal options that exist when you have a violent child in the home. Then, make a decision as to whether or not this is a helpful option for your particular situation.

**Resist accommodating** the violent child. You can’t predict what will cause a child to have an aggressive outburst. When you attempt to accommodate the child in order to offset a fit, you are doing the child’s work. The child cannot change his or her behavior if you are working harder on it than he or she is! Along these same lines, sympathy and aiding the child in keeping the behavior “secret” perpetuate the behavior as well.

**Trigger management** is an essential skill. There are various situations that are “triggers” for the traumatized child. Actually, we all have triggers. For example, you are driving in the car and a song plays on the radio. Suddenly, you are reminded of your first love—you smile. The song is a trigger—an identifiable situation or event that can create emotional upheaval. A trigger generates feelings. The adoptee with a traumatic past often lacks the skill of verbalizing such emotions. Instead, their feelings are expressed through their negative behaviors. Birthdays, Mother’s Day, end of school year, beginning of school year, Christmas, “Gotcha Day”, the anniversary of the separation of the child from the birth family, etc. are often times the traumatized child escalates behaviorally. Trigger management offsets the impact of the triggers. A trigger management plan is described in our previous post, *As Mother’s Day Approaches: The Role of Triggers in Adoptive Families.* A more in-depth version of trigger management is contained in Chapter 10 of *Brothers and Sisters in Adoption.*

**Reduce screen time.** In homes where no physical or emotional violence is present, children are still bathed in violent images. The average child spends more than three hours a day watching television. Television, videogames, music, film have become increasingly violent. The average 18-year-old will have viewed 200,000 acts of violence on television. Even with solid emotional, behavioral, cognitive and social anchors provided by a healthy home and community, this pervasive media violence increases aggression and antisocial behavior (Perry, 2002.) If you don’t like what your children are watching on television—turn it off! If you don’t like the DS game—take it away! You are the parent and this is an area you can control.

**Aggressive acts require “making amends.”** Traditional parenting methods are usually ineffective in ceasing aggressive behavior. “Making amends” or restitution is a more viable option. When you physically hurt your mother, break your sister’s favorite toy, or destroy a favorite knick-knack, the logical recourse is to re-pay in kind, deed or buying a new doll. Several months ago, I sustained a large bruise due to being kicked by a pre-adolescent client. For several sessions after the injury, I limped in order to emphasize to this client the manner in which he hurt me. I made a big deal out of the behavior! Aggression is a big deal—at any age! I made certain that there was also something for

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him to carry or something I needed from the secretary. This was his “making amends” to me. He wasn’t happy about this restitution. However, he hasn’t kicked me again! For more ideas about restitution, see “Sorry: Building Your Adoptee’s Moral Development.” Please note, when you implement a new parenting strategy, you can expect that there may be a backlash. Traumatized children prefer predictable reactions. Thus, when the parent changes, this causes the child to experience fear—stress. As we learned above, stressors lend to emotional dysregulation. Therefore, keep restitution simple in the beginning. A three-minute chore is more than effective to make the point initially. Also, always implement restitution when your adopted son or daughter is calm—even if this is a day or so later. Restitution must be used consistently. Follow-through! Keep in mind, it takes Mother Nature many years to put forth and complete the skills essential for humans to be kind in their interactions with others. Likely, restitution will need to occur many, many times before you see positive changes in your adoptee!

**Ensure the safety and well being of the typical children.** Young children can learn to go to a “safe spot” when their adopted sibling is being abusive. The safe spot can be stocked with a few favorite snacks, a favorite movie/dvd player (non-violent content!) or some brand new toys from the dollar store. Parents may also want to consider what Annette, an excellent mom, I know dubbed, “reverse respite.”

Annette and her husband, Wayne, parent five children, two by birth and three through adoption. The family is very involved in their church. Annette identified two families in the church that she trusts and whom she feels mirrors much of her’s and Wayne’s thoughts on raising children.

In times of crisis, her birth children go to spend time with these families. They are privy to a “normal” home atmosphere void of violence. This leaves her and Wayne free to deal with their troubled adopted children. The typically-developing kids get a nice break. The adopted children with problems get the extra attention they need in their times of crisis.

Keep communication open about what is happening in the home. Flow of information—processing feelings, letting the typical kids know what is and is not helpful, what efforts are being made to alter the behaviors of the adopted sibling, etc.—is a key factor in keeping these children emotionally healthy over the long-term.

**Prevent compassion fatigue.** Aggressive, violent behavior is exhausting! If you are living with this behavior, you know this! While all adoptive parents must work to prevent compassion fatigue, those living with the child who rages, must especially care for themselves. Adoptive moms and dads want to prevent compassion fatigue, also known as secondary trauma or vicarious trauma. The child’s pain transfers to those around him or her. Listening to children talk about the trauma they experienced, advocating to obtain services in a complicated, frustrating and often “insensitive” system, feeling helpless when trying to heal these children—all can make the adults parenting these children vulnerable to developing emotional problems.

Parents are encouraged to take time to pursue the activities they enjoy. The dust bunnies aren’t important—they’ll still be there after you have enjoyed a few pages of a good book or a round of golf! Caring for yourself might also include finding some other adoptive parents in your situation. Browse facebook—you’ll find lots of good adoptive groups! Make a date with your spouse or a friend! Encourage relatives to give birthday or holiday gifts for restaurants that deliver, a housecleaning service or a landscaping company. These services will free up some time for you to pursue something pleasurable! You are the most important person in your children’s lives. You need to take care of yourself for you and them!

**References:**

