

## **Developmentally Appropriate Transitions**

*Paraphrased from Debra Gray*

*Nurturing Adoptions Page 247*

This section of Debra Gray's book gives detailed examples of a child's developmental needs, outlines the risks of abrupt transitions at every stage and provided examples of solid transition plans and timeframes for each developmental stage of the child.

Sometimes, the best judgement of teams is not based on accurate information on child development and loss. Carefully designing the essential needs for children, tailored to each developmental level, is a crucial part of successful moves. Focusing on accomplishing the essentials when moving children means paying careful attention to the following tasks:

1. Maintaining children's identity and areas of mastery.
2. Transferring attachments from one caregiver to another as much as possible.
3. Maintaining attachments to family members and especially siblings.
4. Moving children with as little shock and trauma as possible.
5. Helping them calm down and achieve predictability in their new homes as quickly as possible.

All moves or transitions should abide by these standards to meet the objectives listed above.

1. Allow children enough time to process the information about the move. Remember moves mean they will lose their attachment figures, or psychological parents. Children need time to process the loss and incorporate the loss into their life story. They need time to process the "why".

2. With the exception of *extreme* emergencies, do not move children 2 years and over with less than a 2-week transition period. Allow for three to four weeks of transitioning time for children who are in the elementary years and up. If they are not given time to adjust and process, they will be in shock and denial, and this will interrupt and prevent a smooth attachment to the new family.

**Key Principle:** Children who are moved correctly actually feel their grief when they move- but they do not feel overwhelmingly anxious, shocked, or frightened.

They can use the emotional connections made with their receiving parents during the transitioning process to reduce their stress, fear and grief if given at least a two-week transition period.

Across all stages, children who are moved abruptly without careful transition may think

- They were bad
- They were angry with people who retaliated.
- They were rejected or were not liked by their parents.
- They were rejected in favor of another person.
- They were too much trouble.
- They did not protest the move.
- They were someone's sexual partner and were later banished.
- They misbehaved to the extent that no one could stand to live with them.
- They told a secret that caused the parents to get into trouble.
- They did not take good enough care of a parent or sibling.
- They are the kind of person who brings trouble to families.

Sometimes children have made the correct assumption but have not placed it in a healthy context. For example, they were moved because they told a secret, but that secret should have been told! The problem was not the secret, but the illegal activity. Sometimes they are simply looking at life events through the lens of childhood and the scope of their own developmental stage.

In the follow pages, the needs and risks have been broken down into developmental stage . This is condensed from Deborah Gray's Book Nurturing Adoptions.

**Transition: Developmental Needs and Risks**  
**Changes in Self concept with sudden moves:**

**Phase 1 Birth-7 Months:**

**Infants need:**

- Parents who are attuned and socially responsive. – wiring the baby for social-emotional interactions.
- Buffered protective setting. When baby's hunger, loneliness, fear, tiredness/overstimulation, or pain is met with an effective, attuned parent.
- Baby and parent are both safe.
- The baby learns to be curious and playful by having parents who are able to be engaged and responsive.
- Keep a settled and predictable routine.

**Babies moved abruptly will:**

- Lose their physiological regulation. (Which is learned in relationship)
- Lose joy and responsiveness.
- Lose progress towards emotional connection and attunement.
- Lose attachments in the making, progress towards emotional development and motor and verbal achievements.
- Feel unsafe, anxious, and wary. Too much is new, not just the home, but in the caregiver.

**Phase II Babies 7-12 Months**

This is the stage of the development of exclusive attachments. Children need to feel safe and insulated from danger. The development of being "in synch" between the baby and caregiver develops. They share feelings and affect and use parents to help get back into balance or stay regulated.

**Babies at this stage need:**

- Consistent , nurturing parent who is emotionally available to the little one.
- Separations for more than a day should be avoided.
- A parent who is patient with the child's need for close proximity.
- A safe home with parents who are neither frightened or frightening.
- Parents who celebrate the child's developmental milestones.
- Parents who are in synch to the child at least 30% of the time.
- Parents who stimulate language by speaking and responding to their baby.
- Parents who provide buffering and soothing, play and social experiences.

**Dangers of abrupt moves**

- Loss of primary attachments. Vulnerability to lifelong fears around attachments, dreading abandonment and high anxiety.
- Loss sense of attunement to others.
- Loss of milestones, motor skills, language development and exploration of their world.
- Feel and look stressed and anxious.

**Phase III: 18 Months to 30-36 Months.**

This stage the baby is exploring their world, being curious. They are beginning to develop autonomy and their own identities. You will begin to hear them assert their no! It is also the stage for the development of a secure base from which to explore. They will begin to think of themselves as good or bad.

**Babies Need at this stage:**

- Close nurturing relationships with parents.
- Rules, and boundaries to keep them safe.
- Limits and expansion of empathy so they can learn to care and contain aggressions.
- New experiences that enhance mastery in play , speech, and social interactions.
- Shared joy and delight between parent and child
- Assistance from adults to build positive gender, self-identity as good and valuable member of family.
- Ability to make choices and say no.

- Ability to retreat to parents to trusted adults when they feel unsafe.

**Phase III moves done abruptly cause:**

- Thinking they lost people because they were bad.
- Thing that they said “no” too much, giving a basis in learned helplessness.
- Think they should say “no’ more. They get locked into oppositional, obstinate behavior. Stuck in “I don’t want you pattern.”
- Grief without a support person they trust and know well enough to support their sadness. Pathological grief reactions
- Refuse to attach deeply again.
- Lose developmental milestones in all areas.
- High anxiety
- Lose social skills, may withdraw, and become aggressive.

**Phase IV: 30-36- 48-54 Months 2.5 - 4.5 years.**

Children this age have formed a sense of self, most are ready to enter the social world. At this age, they are ego centric. Their world view is “Everything that happens is because of me!”. They tend to incorporate any trauma into their identities. “I made this happen. I am the kind of person this happens to.

**Children at this stage need:**

- Nurturing and sensitive parents who foster a positive identity.
- a simple “what’s different” for trauma’s that occurred, i.e. scary people are not allowed in the house.
- Support children through
- Following their lead in play
- Set rules and limits for staying safe.
- Expand empathy.
- Give mastery experiences.
- Shared enjoyment in interactions and activities
- Promote positive identity.
- Be a secure haven (base)
- Allow them space to say “no”.

### **Abrupt transitions cause children to;**

- Lose their attachments, causing them to grieve alone.
- Lose developmental milestones.
- Feel they are to blame for what happened.
- Loss of sense of predictability in life. I don't know the rules.
- Feel that big people don't care and can't be trusted. Therefore, they should take control and grow up fast.
- Lose the capacity to join ideas and emotions.
- Feel that choices and feelings and attachments do not matter. No one cares and nothing works out.
- Feel that adults will not buffer to help him, I am on my own.

### **Phase V: 4.5 to 7 years**

Stage in this stage have increase in identity formation. They are mastering language, playing themes and want social relationships. Need a life story that has a "why " in it, but life stories are quite concrete. More about what happened in their early life and why they can't live with birth parents.

### **Children at this age need;**

- Support for speech and learning skills as they begin school.
- Continuation of nurturing sensitive relationship with parents
- Safety
- Retreat to their parent "safe base"
- A simple "why" for the event that shaped their lives
- Therapy for their trauma
- Help in handing their extreme feelings
- Social and peer relationships
- Basic chores so that they contribute to the family
- Structure in daily tasks/hygiene
- positive acknowledgement of their value and preciousness
- Help in organizing life story, and social relationships.

## **Phase V Abrupt Transitions cause**

- Lose their attachments , causing them to grieve alone.
- Feel that their contributions to the family were inadequate or they were a failure.
- Be grandiose and dramatic in the telling of their life story.
- Lose developmental milestones and their sense of mastery, critical at this stage.
- Feel they are to blame for what happened.
- Loss of sense of predictability in life. I don't know the rules
- Feel that big people don't care and can't be trusted. Therefore they should take control and grow up fast.
- Belief system becomes, "Don't trust others, or authorities. Adults don't care. No one cares. I am on my own. Nothing ever works for me.
- Lose the capacity to join ideas and emotions.
- Feel that choices and feelings and attachments do not matter. No one cares and nothing works out.

## **Phase IV: How am I the same and different as other children.**

Ages 8-10. Joining in and finding my place.

Children in these stages are rigid in defining what is normal and what standard they use for group inclusion. Children compare their lives to the lives of others. They realize they are different from having to had change families. Unless they have compassionate helpers in their lives, they may avoid talking about trauma or other painful topics.

This is the age of mastery and social development. Finding one's group, working in a group, and setting goals. A youth needs.

- Safe, nurturing homes and parents
- Experience rich lives, development of mastery
- Academic success, with accommodations for success.
- Social success. Social support may be needed.
- A life story that brings clarity to adoption and trauma issues.
- Therapy to address trauma and shame
- Help in regulating emotions.

- Chores, moral and spiritual activities

### **Phase V/VI Abrupt transitions cause**

- Loss of attachments They do not want to attach again as it is too painful. They feel like a reject.
- Fuels shame of their history and they won't talk about it. "I don't fit in. Where is my place".
- Feel responsible for the choices that were made. "I must have done something wrong. I am not like my peers.
- Loss of predictability in life.
- Feel like no one cares. "Don't trust" is a core belief. This interferes with relationships with adults, school and at home.
- Social relationships will suffer.
- Feel like their choices, feelings and attachments do not matter . "No one cares and I cannot make a difference in my own life "Why bother?"

### **Timeframes for Transitions based on Developmental Stage Detailed day by day transition plans can be found in the book Nurturing adoptions pages 261-279.**

**Infants:** 1-4 Months, transition time, 6-8 days. That way, babies and parents have time to become comfortable with one another. Babies can learn to anticipate that parents will react in a somewhat familiar way. Pg. 261

**Infants 5-10 months,** transition time: 10 days, page 262

**Infants 11-24 months,** transition time: 10-14 days, page 265

**Preschoolers, 24 months to 5 years,** transition time: 14 to 21 days, page 266

**Children ages 2 through 5-** transition time: 16 days



**Children 6-12 years, transition time: 22 days**

**Teens 13-17 years, transition time: 3 weeks to 3 months.**

Teens can have the same yearning for a family as younger children. If they have a realistic caseworker, they are aware that it is harder to find an adoptive family at their age. It is critical to describe what a family is looking for when talking to teens about adoption- a real teen to love, not to idealize. Teens' feelings and opinions tend to be very hot and cold. The teen who "just knows this is *the family me will reverse this decision on a dime. Carefully review the normal variations in moods that they will have towards their families.*