Module #7.

Adopted Adolescents and Identity Formation

Student Packet
# Table of Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overview of Module</td>
<td>3</td>
</tr>
<tr>
<td>Learning Objectives</td>
<td>3</td>
</tr>
<tr>
<td>Pre-Module Assignments</td>
<td>4</td>
</tr>
<tr>
<td>Agenda</td>
<td>5</td>
</tr>
<tr>
<td>Reading List</td>
<td>6</td>
</tr>
<tr>
<td>Handouts</td>
<td>9</td>
</tr>
</tbody>
</table>
Overview of Module

In this Module, students will briefly review adolescent development; the key areas of development in early, middle and late adolescence; and the concept of emerging adulthood. Students will review the effects of abuse and neglect on adolescent development. The process of identity development for all adolescents is discussed as a foundation for discussing the specific identity development process for adopted adolescents. Students develop an understanding of adoptive identity formation and the role of parenting in strengthening their youth’s identity formation. Students learn about and practice clinical interventions to help adopted adolescents strengthen identity development. The Module ends with a consideration of the role of positive youth development in supporting adopted adolescents’ identity development.

Learning Objectives

Students will be able to:

#1. Describe three ways that young people develop in early, middle and late adolescence.
#2. List four factors related to earlier maltreatment that can impact an adolescent’s developmental outcomes.
#3. Describe four key aspects of identity development that take place in adolescence.
#4. Identify four issues that can impact adopted adolescents’ identity development.
#5. Describe three factors that can negatively impact an adopted adolescent’s ability to develop a coherent adoptive identity narrative.
#6. Describe the aspects of authoritative parenting that can support an adopted adolescent’s identity development.
#7. Describe how to work with an adopted adolescent using a birth parent puzzle mural.
#8. Describe Narrative Therapy and how it can be used with adopted adolescents.
#9. Describe the role of positive youth development in strengthening adoptive adolescents’ identity development.
Module #7: Adopted Adolescents and Identity Development

Pre-Module Assignments

Student Assignment Checklist

✓ Read *6 Questions Every Adopted Teen Wants Answered* by Debbie Riley
✓ Read *Raising an Adopted Child #6 Adolescence Abstract Thinking* by Anna Glendenning

Students’ Assignments

**Pre-Module Assignment #7.1.** Read *6 Questions Every Adopted Teen Wants Answered* by Debbie Riley at: [http://www.adoptivefamilies.com/articles.php?aid=2011](http://www.adoptivefamilies.com/articles.php?aid=2011) This article provides excellent background information for the issues we will be discussing in class.

**Pre-Module Assignment #7.2:** Read *Raising an Adopted Child #6 Adolescence Abstract Thinking* by Anna Glendenning at: [http://adoption.families.com/blog/raising-an-adopted-child-6-adolescence-abstract-thinking](http://adoption.families.com/blog/raising-an-adopted-child-6-adolescence-abstract-thinking) This article also provided excellent background materials for the issues we will discuss in class.
Module #7: Adopted Adolescents and Identity Development

Agenda

9:00AM – 9:15AM   Welcome and Announcements
9:15AM – 10:15AM  Overview: Adolescent Development
10:15AM – 10:50AM The Effects of Abuse and Neglect on the Development of Adolescents
10:50AM – 11:05AM Break
11:05AM – 11:30AM Identity Development in Adolescence
11:30AM – 12:15PM Introduction: Identity Issues for Adopted Adolescents
12:15PM – 1:15PM  Lunch
1:15PM – 2:00PM   Adoptive Identity Formation
2:00PM – 2:30PM   Identity Formation and Parenting
2:30PM – 2:45PM   Break
2:45PM – 4:00PM   Strengthening Identity Development: Clinical Interventions
4:00PM – 4:20PM   Positive Youth Development
4:20PM – 4:30PM   Closing and Summary
Reading List

Web Based Resources

Adolescent Development


Adopted Adolescents and Identity Development


Narrative Therapy


Positive Youth Development

ACT For Youth Center for Excellence. Positive Youth Development Outcomes. Available at: http://www.actforyouth.net/youth_development/development/outcomes.cfm


Other Resources


Research


Parenting Styles


Module #7.

Adopted Adolescents and Identity Formation
Handouts
Handout #7.1 Your Own Adolescence

1. How did you get along with your parents? Did you fight a lot? Avoid them? Did you like to spend time with your family? Could you talk with your parents rationally? What issues could you discuss? What issues could you NOT discuss?

2. How would you describe yourself as an adolescent (cheerful, moody, easy to get along with, impossible to live with, something in between)?

3. Did you belong to a “clique” or crowd in high school? Did you belong to a group of high status? Were you “popular” or did you feel “different” or unaccepted? Left out? If you were not in the “in crowd”, how did that affect your self-esteem?

4. How positive was your self-esteem? What did you like about yourself? What didn’t you like?

5. How difficult was it to come to terms with your own sexuality? How much anxiety did you feel about your sexuality?

6. What kinds of things did you do to assert your independence?
Handout #7.2 Adolescent Development Quick Reference Chart

[download this PDF document from the C.A.S.E. website]
Handout #7.3 Theories of Adolescence (Muuss, R., et. al., 1996; Rice and Dolgin, 2002)

Developmental Area - Biological
- Primary Theorists - G. Stanley Hall, Arnold Gesell, James Tanner
- Main Focus - Physical and sexual development determined by genes and biology

Developmental Area - Psychological
- Primary Theorists - Sigmund Freud, Anna Freud
- Main Focus - Adolescence as a period of sexual excitement and anxiety

Developmental Area - Psychosocial
- Primary Theorist - Erik Erikson
- Main Focus - Identity formation; adolescents struggle between achieving identity and identity diffusion

Developmental Area - Cognitive
- Primary Theorist - Jean Piaget
- Main Focus - Formal operational thought; moving beyond concrete, actual experiences and beginning to think in logical and abstract terms

Developmental Area - Ecological (interaction between individual and environment)
- Primary Theorist - Urie Bronfenbrenner
- Main Focus - The context in which adolescents develop; adolescents are influenced by family, peers, religion, schools, the media, community, and world events.

Developmental Area - Social Cognitive Learning
- Primary Theorist - Albert Bandura
- Main Focus - The relationship between social and environmental factors and their influence on behavior. Children learn through modeling.

Developmental Area - Cultural
- Primary Theorists - Margaret Mead, Carol Gilligan
- Main Focus - The culture in which the child grows up.

Source: http://www.actforyouth.net/resources/rf/rf stages_0504.cfm
Handout #7.4  The Effects of Abuse and Neglect on the Development of Adolescents

Part 1. If you are working with an adopted adolescent who has experienced abuse and/or neglect in his/her history, what factors related to maltreatment would you want to explore to better understand the possible impact of the maltreatment on this youth’s developmental outcomes?

Part 2. There are four steps in this part.
- Assign roles for the role play: therapist, adopted adolescent, and adoptive father; others in the group to be observers.
- Role play the assigned scenario. In the role play, the therapist is to develop a better understanding of the nature and scope of the youth’s maltreatment history.
- Observers: Complete the Observation Sheet.
- All Group Members: Discussion the questions provided.

Case Scenario #1: James
James, age 16, and his adoptive father are meeting with you for the third time. James is struggling in school, reports he has no friends and is frequently bullied at school. He is withdrawn at home and resists participating in any family activity. His doctor has prescribed medication for depression. James was adopted from foster care at age 11 after experiencing significant physical abuse for years at the hands of his stepfather.

Case Scenario #2: Marnie
Marnie, age 16, and her adoptive father are meeting with you for the third time. Marnie is a bright, engaging young person who makes Bs in school. She is having trouble sleeping and has nightmares that she is back with her birth mother who was substance-involved and prostituted in the home to support herself and Marnie. She did not physically abuse Marnie but did neglect the child’s needs and exposed her to a range of men coming and going from the apartment. She is not on any medication but her dad thinks that medication might help.

Case Scenario #3: Toby
Toby, age 16, and his adoptive father are meeting with you for the third time. Toby is a shy young man who is an avid reader and wants to be a scientist. He was adopted at age 12 after his father died when he was 10, his mother could no longer take care of him, no one in the family came forward to parent him, and he entered foster care. His mother relinquished her rights and has disappeared. He wants to have some contact with her and his adoptive parents have attempted to find her but to no avail.
Observation Sheet

1. Did you see examples of the therapist exploring more about:
   - The age of onset of the maltreatment
   - The frequency of the maltreatment
   - The severity of the maltreatment
   - The nature of the child’s relationship with the maltreating adult
   - Constitutional factors for the child
   - The family context of the maltreatment

2. Did you see examples of the therapist engaging the adoptive father in the exploration?

3. What other clinical skills did you notice the therapist using in her work with this adolescent and parent?
**Discussion:**

1. Based on the role play, what are your thoughts about the impact of maltreatment on this youth’s developmental status?

2. What might you focus on in the next Module together?
Handout #7.5 Adoptive Identity Formation

Case Scenario #1: Case Scenario #1: Rosita, age 15, was adopted from foster care at age 11, after she was sexually abused by two different family members – an uncle and a cousin. Her parents, who immigrated to the US from Cuba, were constantly moving from place to place when evicted, staying with family members or friends. She frequently moved in the middle of the night and changed schools so often that today, she cannot say how many schools she attended. Once Rosita entered foster care, her parents essentially disappeared, failing to attend meetings at the agency after a couple of months and never attending a court hearing. Rosita’s younger sisters were also brought into foster care (they were ages 3 and 5) and were placed with separate foster family who subsequently adopted them. Rosita lost contact with them after they were adopted. Rosita lived in at least three different foster home placements (2 foster family homes and 1 group home) before she was adopted. Her adoptive mother, Helene, is trying to get as much information about Rosita’s history as she can but is having difficulty. She believes that she has found the right person at the public child welfare agency that may help her and Rosita review the foster care file. She is also trying to learn more about Cuban culture which she knows very little.

What are the key challenges in Rosita developing a coherent adoptive identity narrative?

Case Scenario #2: Marla and David, who are white, adopted Serena, who is African American, as an infant. When she was younger, they told Serena that her mother was not able to take care of her and for that reason, placed her for adoption. They never mentioned her father. As she grew and asked more questions about her adoption, they told her that her mother was poor and lived in a dangerous part of town and had decided that she would have a better life with adoptive parents. When pressed, they tell her that her father was never involved in her life. Family members tell her how “lucky” she is to have such wonderful parents. Now that she is 14, Serena wants to know more about her birth mother and her birth father. She has begun to physically develop and already has much fuller breasts than her adoptive mother.

What issues can be expected for Serena as she tries to find anchoring points for identification?
Handout # 7.6 Parenting Patterns

Responsive, Accepting  

Unresponsive, Rejecting

Demanding, Controlling  
Authoritative  
Authoritarian

Undemanding, Uncontrolling  
Indulgent  
Neglectful

1. How would you describe the four patterns of parenting along the dimensions of responsiveness and acceptance in conjunction with the dimensions of demandingness and control? What features characterize each type of parenting?

2. Why do you think that the authoritative parenting pattern has been found to best support adolescents’ identity development?

3. How would you help adoptive parents think about their parenting pattern in relation to facilitating their adolescents’ identity development?
Leah is a fourteen year old adolescent who has been in therapy since she was 7. She has a very difficult adoption story. She was abandoned in a trash bag in a Dumpster shortly after her birth. A local shopkeeper found her when he was putting out his trash. The community was made aware of the abandoned child in the hope of finding the mother. Leah’s adoptive parents have been very open and honest with her from the beginning and slowly shared aspects of her story when developmentally appropriate. Leah recently shared in therapy that she was worried. She said that she had a personal dream of becoming president of the United States and that this could never happen because when people looked into her past, they would find out how she had come into the world and not vote for her. As she expressed her feelings and concerns, it became clear that she had many questions about her adoption and felt confused and shamed by the abandonment. Her concern about her candidacy for president revealed her feeling that the entire nation would know of her horrible abandonment.

Her therapist, knowing that Leah was artistic, asked her to complete a puzzle. Her puzzle had the following pieces:

- Where are they right now?
- Why do I reap the consequences for their choices?
- Who am I really?
- Why do I still feel like it is my fault?
- What could I have done to change it?
- Why is my life so complicated for things I had no choice about?
- Why me?
- Why couldn’t I stay with my biological parents?
- Why would they choose to abandon me?

Here is what Leah said about the puzzle:

“I felt relieved when I could talk about and write down the questions without having to come up with a solution. I learned that I did not always have to have an answer to every question. The puzzle also helped me to realize that all the pieces would eventually come together even if I did not have all the answers. . . . The puzzle was an easy way to make my feelings and thoughts visible so that one by one, my questions could get answered. I soon was able to answer some and
leave the others to be answered another time or not be answered. I became okay with that though it was very hard.”

For Discussion: How might you use the puzzle with adopted adolescents with whom you are working?
Handout #7.8  Writing Therapy as a Form of Narrative Therapy

The Steps

**Step 1:** Ask the client to write a story using first person narrative.
**Step 2:** Ask the client to read the story.
**Step 3:** Listen actively to the client’s exiting family or cultural narratives as they externalize the story.

*Note:* In listening to client’s stories, therapists attempt to identify dichotomies, exclusions, exceptions, and hierarchies of characters or voices as well as possible alternative plots or meaning buried within the narrative.

**Step 4:** Acknowledge the issues.
**Step 5:** Discuss how others may perceive the issues.
**Step 6:** Ask the client to choose one person who they know has a different point of view regarding these issues.
**Step 7:** Ask the client to write the same story using the other person’s point of view, reminding the client to stay in character.
**Step 8:** Ask the client to read the story with the other point of view.
**Step 9:** Ask the client if he/she can identify any alternatives to how these two characters could interact yet honor each other’s point of view.
**Step 10:** Identify models for change.

The Case Example:
Aubrey, age 15, was placed in foster care at age 8 after his mother left him with a neighbor and did not return. His father visited him in foster care but made it clear that he could not be responsible for his son. His mother never re-appeared. Aubrey had four foster care placements and one failed adoptive placement before he was adopted by Dwayne, a 40 year old single man. Aubrey was 13 when he was adopted. Dwayne and Aubrey have come to see you because Aubrey’s behavior has become increasingly volatile and aggressive. He is not very verbal but his father says that Aubrey likes to write. In this Module, you are using Narrative Therapy through writing a story.

In Step 1, Aubrey writes the following story from a first person perspective:

> I was in foster care a long time. I wanted my mother to come back for me. I think she did come back but they made her go away. I know that she wanted me back. I loved her and she loved me. I hate the social worker that made her go away when all she wanted was to get me back. They kept me in foster care and made other people try to love me. No one did and I kept moving around. It would all have been okay if they had let my mother back in. Now, I live with Dwayne and I like him. But, now, because of the social worker, my mother will never find me. I hate the social worker.
Observation Sheet: Check off each step that you see being taken in the role play and make notes as requested:

√ Step 1: Ask the client to write a story using first person narrative.

Step 2: Ask the client to read the story.

Step 3: Listen actively to the client’s exiting family or cultural narratives as they externalize the story.

Step 4: Acknowledge the issues.
- What issues did you hear being acknowledged? ________________________________

Step 5: Discuss how others may perceive the issues.
- Which “others” were identified? ________________________________

Step 6: Ask the client to choose one person who they know has a different point of view regarding these issues.
- Which person with a different point of view was selected? ______________

Step 7: Ask the client to write the same story using the other person’s point of view, reminding the client to stay in character.
- How well was Aubrey able to do this? ________________________________

Step 8: Ask the client to read the story with the other point of view.

Step 9: Ask the client if he/she can identify any alternatives to how these two characters could interact yet honor each other’s point of view.
- How did the therapist facilitate this conversation? ________________________________

Step 10: Identify models for change (ways that the story can be re-conceptualized).
- How did the therapist and Aubrey discuss this issue? ________________________________
Handout #7.9. Strengthening Identity Development: Clinical Interventions

**Case Example #1:** Amelia, now age 13, was adopted as an infant. Her adoptive parents, Clyde and Ruth, were always open with her about her adoption. They told her that her father had died in an accident while her mother was pregnant, and her mother, who was grief-stricken, placed her for adoption as soon as she was born. Amelia tells you that she doesn’t believe a word of this. She wants to know who her birth parents really are and the real reason that they placed her for adoption. She says that her adoptive parents say that they don’t have any information.

**Case Example #2:** Betsy, now age 14, was adopted from Ethiopia. She lives with her white parents in an affluent suburb where there are no African Americans. She has grown increasingly withdrawn and tells her parent that she doesn’t “fit” anywhere. She has a family in Ethiopia who don’t even know where she is and she has a family in the United States that don’t look a bit like her. And, she says, whoever heard of an Ethiopian girl named Betsy?

**Case Example #3:** David, who is American Indian by birth, was adopted from the foster care system when he was 8 years old. His parents are white and have tried to provide him with positive information on Native American culture. He is now 15 and goes to a high school with a mixture of kids – some he has known since he was adopted and others who are new in his life. Some of the new kids are calling him “Tonto.” He tells you that he hates being an Indian and he hates his adoptive parents for adopting him.

**Case Example #4:** Chuck, age 22, is seeing you because he feels lost. He was adopted when he was a baby and was raised by a family whom he describes as “kind and loving.” When he turned 18, he searched for his birth parents. His birth mother had died, according to Chuck, from alcoholism. He describes his birth father, whom he met only once as a chronic alcoholic “with the DTs.” Chuck wonders if he will be an alcoholic too. He says that he is beginning to think that he is more like his birth parents than his adoptive parents.
Handout #7.10  40 Developmental Assets for Adolescents (ages 12-18): The Search Institute

[download this PDF document from the C.A.S.E. website]