

“Help Me Cope!”: Caring for the Typical Kids in Adoptive Families (Part Two)

Welcome to Part Two of our post about helping healthy kids stay healthy. As we learned in Part One, brothers and sisters can become overwhelmed—just like parents—after an adoptee with complex trauma joins the family. The sibling they expected may not be the sibling that arrived. Disillusioned and let down by the new child who can't play well or who has bizarre behaviors, the resident children develop an array of negative coping styles.

On Tuesday, we looked at several of these coping styles: withdrawal, self-sacrificing and acting out. Today, we'll gain knowledge of “I'll cover for you”, the regressed child and the victim child. Of course, we'll offer some suggestions to mobilize the typical kids to cope in healthier ways. Post-adoption we want to maintain the equilibrium of the family. We want to attain a balance between facilitating the adoptee's functioning and simultaneously maintaining the emotional well-being of brothers, sisters, Moms and Dads.

The Regressed Child

This coping style is common among toddlers, pre-school age children and children in grade school. Younger children who are under stress frequently regress to earlier developmental stages. For example, behaviors such as temper tantrums, thumb sucking or bedwetting re-appear in otherwise healthy children when a troubled child joins the family.

Increase Nurture

A common response to regression is, “Stop acting like that!” “You know better!” “Act your age!” Instead, simply pull the child up onto your lap, or snuggle on the couch. Extra hugs and kisses will help this son or daughter re-group. Recognize that he may actually be struggling with the loss of your time and attention, which has now been diverted to the adoptee.

Further, use the *ripple effect* described in Part One of this post. Adoption—especially for the littlest brothers and sisters—opens up all types of anxieties. “Why don't some kids have parents?” “What would happen to me if you got sick or died?” “Why doesn't he listen?” “Why can't Mom and Dad manage him?” “I think Mom and Dad made a mistake!” Facilitate these fears by putting them on the table! (Another great topic for the agenda of the next family meeting!)

The “I'll Cover for You” Child

Resident children may conceal or cover-up the negative behavior of their adopted brother or sister. Parents kept in the dark in this manner lack understanding of the depth of the adoptee's problems, so precious time is lost before obtaining services.

While brothers and sisters may be attempting to decrease the anger level in the family, he or she is also likely to be confused about the difference between *sympathy* and *empathy*. The resident child may “feel sorry” for her adopted sibling. “My life was so much better than yours. I'll keep quiet. I don't want you to have any more problems.” The more helpful, empathic response would be, “I'm so sad you destroyed my CD player. I will be telling Mom and Dad. I do hope you learn to make better choices.”

Helen, a 15-year-old, resides in her family of origin with her adopted brother and sister—Willie, age 12 and April, age 10. Helen and April get along well. April loves it when Helen helps her with her homework or teaches her how to sew. Willie, on the other hand, is quite difficult. He waits for the girls at the top of the steps and then jumps out and punches them in the stomach. At night, he enters April's room. He stands at the side of her bed. She is often startled awake by his presence. April and Helen are afraid of Willie.

April and Helen also feel sorry for Willie. He has no friends and he is often “in trouble” with Mom and Dad. Mom and Dad are so stressed they don't want to add another layer to their burdens. So, they have kept Willie's aggression and nighttime escapades a secret since it started several years ago. Willie's parents and his therapist have no idea that Willie exhibits these inappropriate behaviors. His therapeutic goals revolve around an increase in responsibility such as completing chores and homework. Certainly, violence and scaring his sister are matters that should take precedence over whether or not Willie takes the garbage out on Tuesday mornings.

Vigilance is Essential

Certainly, parents can only be as vigilant as possible. However, in families in which there is a child with a history of trauma, parents often extend too much trust. Use caution.

Discuss safety with your children on a frequent basis. Be direct, explain what a sexual advance is and then ask if anyone has attempted to engage the child in a sexual manner. Inform your sons and daughters that being threatened, hit or hurt in anyway (beyond normal sibling rivalry) has no place in the family. Assure brothers and sisters that you can protect them.

Develop a code. For example, select a word or a non-verbal sign. Teach this to your resident children. If anything harmful is happening, the children can signal you. You can intervene and the traumatized child will have no way of understanding you learned that there was intimidation, threats or abuse occurring in your home. You can also refer to our previous blogs, Promoting Sexual Safety in Adoptive Families or Sibling Rivalry in Adoptive Families – Part One, Part Two and Part Three.

The Victim Child

This coping style results because the adoptee is abusing one or more of the appropriately developing children—emotionally, physically or sexually. While some children are very quick to bring abuse to their parents' attention, other children, like April and Helen, keep the abuse a secret due to fear of the perpetrator or fear of the parent's reaction. These resident children are at risk for developing a victim mentality. Victims tend to see the control and responsibility for their situations as someone else's fault. A victim blames others for their circumstances. Victims accept little responsibility for their actions. Their sense of self is diminished or destroyed. They expect things will go wrong, thinking, “Bad things always happen to me.” Victims develop a sense of entitlement—“The world owes me.”—They become disappointed and/or angry when they are not treated in a manner that supports their belief system.

Learn the Legalities of Such Situations

Laws about reporting sexual and physical abuse vary from state to state. Understand your responsibility to report, and the process that will occur post-reporting. This information can be

obtained via your local child welfare agency or contact the [American Academy of Adoption Attorneys](#).

Seek Immediate Treatment

Certainly, this is a difficult situation for any parent to be in—one child abusing another! Each member of the family needs professional help in these circumstances. [Locate an adoption and trauma competent therapist](#). You want someone to help you sort out your feelings—guilt, anger, frustration, shock, depression! The perpetrating child needs serious assistance as does the son or daughter who has been victimized.