The Parallel Healing Process: Preventing “Button Pushing”, Promoting Peace

By Arleta James, PCC

Brenda and Steve adopted two boys from Eastern Europe. Bryce, adopted at age 1 ½, entered therapy at age 5 due to lengthy temper tantrums during which he would slap, punch, kick and bite. Brenda stated, “Each time that he hits me, flashes of my abusive father instantly appear in my head.”

Brenda is a very intelligent woman in her late thirties. She felt that she had resolved the physical abuse she suffered at the hands of her father. She was blindsided by the flashbacks Bryce’s behavior triggered.

Becoming a parent, by any means, causes a life review. However, becoming a parent to a child who has experienced neglect, abuse, institutionalization, etc. intensifies thoughts and feelings about childhood experiences, and the type of parenting received while growing up. Like Brenda, many Moms and Dads are caught off guard when unpleasant memories resurface post-adoption.

In essence, many adoptive parents will find they must re-work their earlier life circumstances while simultaneously assisting their adopted son or daughter in resolving his or her trauma. This is a parallel healing process—healing your son or daughter and yourself at the same time.

For various reasons, parents often put their needs last. Some reasons include, the stress of now parenting a child with special needs, the time the adopted child’s services consume, trying to balance the needs of all

the children in the family, work, caring for the home, lack of understanding that the feelings they are having are stemming from a childhood issue, etc. Yet, parental needs must be a number one priority. The mental health of adoptive Moms and Dads is essential for their own sake as well as that of all of their sons and daughters. There are no benefits to any family member when parents are worn out, exhausted, frustrated, over-worked, stressed out, rushing from one place to the next, distraught, or suffering from anxiety and depression, or a recurring past experience. Here is an example,

Tara and Danny parent their birth daughter, Mary Ellen, and their son, Chris, whom they adopted, and who are ages 13 and 9 respectively. Chris is obsessed with food. He hoards food in his room. A trail of wrappers from candy, granola bars and cupcakes can be found in his locker, in his desk, under his mattress, in his backpack and in his closet.

While vacuuming, Tara found numerous wrappers and several empty yogurt containers behind the couch. She placed this trash on the kitchen counter. She stewed the entire afternoon. She was angry that Chris kept stealing food. “Why does he do this? We provide plenty of food. He gets plenty of snacks,” she wondered. She was also mad that he wouldn’t put the packaging in the trash can.

As soon as Chris entered the house from school, Tara confronted him. “Did you put this garbage behind the couch? Did you steal this food?”

Chris said, “No, Mom. Really, I don’t know how those got behind the couch.”

Tara responded, “You’re lying.”

Chris again said, “No, Mom really, I don’t know where they came from.”

Tara again stated, “You’re lying!” Hence, the battle shifted from food to the lying.

The argument carried on for about twenty more minutes. Chris was sent to his room “until your father comes home.”

In this midst of this argument, Mary Ellen went to a friend’s house.

Tara, still fuming, also became guilty. She asked herself, “Why do I get so mad?” “I never used to be such an angry person.” “I didn’t even know I could get this angry!”

Later in the week, Tara described this incident to the therapist. Together, the two clarified the event further. Tara’s father had an affair that ultimately ended her parents’ marriage. Her father’s lie destroyed Tara’s family. When Chris lies, it triggers Tara’s anger about her father’s unsavory actions. Chris receives this stored anger as well as the anger for the chronic lying he commits in relation to his food issues. Once Tara was helped to see this, she realized that she needed to work at moving beyond her father’s affair—again! In the meantime, she was able to manage her reaction to Chris better because she understood why Chris’ lying so enraged her.
Once Tara had gained insight into her own behavior, Chris was no longer able to “push her buttons” to so great a degree. Their home became more peaceful! Peace is a wonderful accomplishment in adoptive families!

So, if you are parenting a child with a history of trauma, enter a parallel healing process as needed. Make your parental mental health a priority!

- Pre-adoption assess your life and identify potential issues that may re-surface. If your agency requires an autobiography as a part of your home study, use this as opportunity to help determine what might become “buttons” down the road. If you aren’t required to provide a written review of your life, consider doing this on your own. It will be very helpful post-adoption.
- Post-legalization, if you find yourself angrier than you thought possible, or depressed, recognize that there might be more to this than your son’s or daughter’s negative behaviors. The core may lie within you. Many parents can identify the root of their own emotions and self-correct once they are aware of the parallel healing process phenomena.
- If you need assistance, consider networking with other adoptive parents or finding a therapist with whom you can develop rapport. There are therapists who understand what happens to parents when a traumatized child joins the family. These adoption and trauma competent therapists are best. You can find one via The Association for Treatment and Training in the Attachment of Children – www.attach.org.

In conclusion, know that you are not alone or crazy for having strong, negative feelings post-adoption! This type of emotional reaction is “normal” in families parenting a child who comes with the baggage of his abandonment, abuse, orphanage residence and so on. It isn’t your fault this is happening to you. However, it is your responsibility to handle it in the manner best for all the members of your family.