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Abstract

This literature review explores the history of modern adoption and the effects on the adopted from a developmental, emotional, and behavioral standpoint. The review aims at addressing these specific needs through the use of art therapy. To become better acquainted with the concept, the history of modern adoption, as it pertains to the United States, is summarized with three subcategories as a focus points: domestic, international, and the foster care system.

Building off of the history is a reflection on the past research surrounding adoption by considering adverse childhood experiences, complex trauma, attachment, and identity formation as it relates. Legislation and models are also mentioned as a way of documenting societal changes in view and procedure in supporting adoptive families and individuals with a focus on how art and expressive therapies could be and has aided adoptees throughout their development as a means of restoring and preventing. Through the discussion of these topics, it is suggested that the adoption experience can be considered a complex trauma which results in various developmental differences in areas of attachment, identity formation, and stress response.
Introduction

This literature review explores the history of modern adoption and the effects on the adopted from a developmental, emotional, and behavioral standpoint. The review aims to address these specific needs through the use of art therapy. To become better acquainted with the concept, the history of modern adoption, as it pertains to the United States, is summarized with three subcategories as a focus points: domestic, international, and the foster care system. Building off of the history is a reflection on the past research surrounding adoption by considering adverse childhood experiences, complex trauma, attachment, and identity formation as it relates. Legislation and models are also mentioned as a way of documenting societal changes in view and procedure in supporting adoptive families and individuals with a focus on how art and expressive therapies could be and has aided adoptees throughout their development as a means of restoring and preventing. Through the discussion of these topics, it is suggested that the adoption experience can be considered a complex trauma which results in various developmental differences in areas of attachment, identity formation, and stress response.

Personal Reflection

This topic of adoption, mental health, and post-adoption resources is very special to me, because I myself am adopted. As an international adoptee who was raised in a predominately white community and within a white family, I have experienced firsthand the struggles and lack of support that was referenced above, and I am not the only one. Many of my adopted peers have also vocalized their struggles, lack of acknowledgement, and lack of post-adoption resources. Considering this, I wanted to study and review what was currently out there and to also suggest the experience of adoption as a complex trauma. While the experience of adoption as a trauma is
up for discussion, I believe there is a legitimate connection between the two and therefore needs to be supported in the way a trauma would be.

I have also noticed the limited number of resources and education out there for those involved with the adoption experience and this has led me to question why there seems to be so little, especially in regard to international adoption. Considering why, one theory may be that, as a whole society, the perception of the number adopted individuals is too small to warrant adequate research. Meaning the sum is not large enough to be of a concern to the whole. A similar notion is practiced in medicine, where if the number affected is too small, then the resources need to address said group is deemed not worth the time and expense. This theory is based on a for-profit mindset which can be harmful to those living through the aftermath of such experiences and does not validate the lack of attention. It is my hope that greater attention and resources will become available to adoptees and their families. As well as the acknowledgement of how the creative therapies can be especially beneficial to this population in achieving healthy development and identity formation.

Adoption

For as long as there have been communities and gatherings, it can be argued that the action and or concept of adoption has existed. There are many stories and examples of babies and children being taken in by others when the biological parents have died or unable to care for them, and this pattern does not just happen amongst humans as some animals have also been known to operate in a similar manner. The unscripted action of adoption has evolved over time and the now formal documentation and understand of adoption is considered modern adoption. Modern adoption marks the era of legitimization of adoption both internationally and domestically.
A strong component of modern adoption is the concept of matching which emphasized pairing children to families so well that natal ties no longer need to be acknowledged. (University of Oregon, Brief History of Adoption 2012). While the concept of matching highlights a stronger attention to detail and possible compatibility between both parties, adoptive parents, and the adoptee child, it also inadvertently perpetuates the idea of permanent severance between biological parents and child. This fails to acknowledge the needs and effects adoption has on the child. Many people credit the Massachusetts’s Child Act in 1851 as the first piece of legislation to focus on regulating and modernizing adoption (University of Oregon, Brief History of Adoption 2012). This legislation is seen as the first of its kind, both within the United States and the world. Some attribute the progressive step due to the various motifs such as “solidarities achieved on purpose are more powerful than solidarities ascribed by blood” (University of Oregon, Brief History of Adoption 2012) that have echoed within the creation and culture of the United States, while other countries and states have not faced congregating in the same way. Subsequently, in 1917 Minnesota passed a law that specifically required children and adults to be investigated and adoption records to be kept private from public access. While this law was intended to ensure safeguards recommended by professionals and others who were acting on the best interest of the child, this law also played into the eugenic anxieties regarding the quality of adoptable children and thus put adult taste and preferences before the needs of the children up for adoption (University of Oregon, Brief History of Adoption 2012). The developing of modern adoption also saw the development of the concept of subsidized adoption. Subsidized adoption is the attaching of economic incentives to various desirability and demand (University of Oregon, Fostering and Foster Care 2012). While this approach did provide opportunities for those who
wanted to adopt but could not afford to do so, it also highlights the conflicting notions of having various price points based off of what qualifies as desirable.

**International Adoption**

Following World War II and early into the Cold War, the concept of adoption took to the global stage. This was in part due to the amount of migration, famines, and other disasters that occurred as a byproduct of war which placed a spotlight on the children who were left defenseless as a result. The increase in international adoptions was also supported by the acceptance and use of proxy adoptions. Proxy adoptions allowed adoptive parents to adopt in foreign courts without physically being there through the use of a stand in individual who acted on behalf of the parents. Once the paperwork was signed, the adopted child would then be allowed to come to America as legal children meeting their adopted parents for the first time on U.S. soil (University of Oregon, Proxy Adoption 2012). This again, reiterates the notion of preferencing adoptive parents needs and desires above the adoptee child’s welfare. Since then, many have come to criticize proxy adoption due to its clear preference in adoptive parent agenda rather than the adoptee child. Those who utilized proxy adoption were criticized and credited with “masterminding an unscrupulous, global mail-order baby racket and hiding behind humanitarian rhetoric” (University of Oregon, Proxy Adoption 2012). The concept of prioritizing adoptive parent agenda under the message of humanitarianism is one that is not limited to just proxy adoptions but parallels the development and legitimization of adoption as a whole. This concept is dangerous in that it ignores the needs and development of the children in favor of adult desires and or status shifting.

**Transracial Adoption**
International adoption as a natural byproduct, lead to many transracial adoptions. Transracial referring to the family being of mixed race, many of which involved White parents and BIPOC children. As international adoption developed, new consideration for cultural sensitivity, language, and national heritage/culture developed with the acknowledgement of these transracial families. These considerations marked a new wave of thought and recognition but also had ties to the eugenics movement regarding the questions surrounding interracial families and the development of the future of the United States (University of Oregon, International Adoption 2012).

Foster Care

Adoption also branched off into the concept and creation of foster care system. Foster care was first suggested and supported with the belief that it was better for the child to be in impoverished homes then formal institutions (Henry Chapin as cited in University of Oregon, Fostering and Foster Care 2012). This belief led to experimentation of placing out children rather than signing them off to institutions. A major development in the concept of foster care was the idea of kinship care which focused on taking biologically related family members of the child and preparing them to qualify as the legal guardians for the child. This highlighted the notion of family preservation being stronger than totally removal and also helped reduce the possible number of minors without secure attachments both physically and developmentally (University of Oregon, Fostering and Foster Care 2012).

Historically, a strong distinction between adoption and foster care is that adoption is removing the child from birth family completely while in foster care there are some connections that are maintained. Another distinction between the two is, foster parents are not autonomous in the way adoptive parents are. Foster parents are not only responsible for providing proper safety
and support for the child, but they are also responsible for maintaining connection to the child’s birth family as well as the agency workers. Adoptive parents on the other hand, are legally given the power to manage the family as they see fit after the paperwork has been complete; there is no obligation to keep connection or maintain any relationship unless otherwise mentioned (University of Oregon, Fostering and Foster Care 2012). The University Oregon (2012) follows up this mention of adoption autonomy by reinforcing that adoption was focused on solidifying these new families at the cost of fully rejecting the biological and cultural ties. This notion of full rejection while severe has been part of the adoption narrative and does call into question the long-term effects it has on not only those directly affected, but others who have a part in the adoption process.

**Current Research**

The research regarding adoption and mental health seems to be sparse and while there are articles and studies out there, there is some concern with how information and research is being interpreted. One of the major topics of debate within the adoption mental health community is whether or not adoptees are at an increased psychological risk than their non-adopted peers due to the atypical life event, adoption. This concern was first studied by a Schechter (1960) who concluded that because there was a disproportionate number of adoptees in his caseload compared to the proportion of adoptees in the general population, he believed adoptees were at a greater risk for psychological problems than their counterparts (Wilson 2014). However, a later study done by Grotevant and McRoy in 1990 highlighted that while the percent of adoptees in the child population came in at 2%, adoptees were 5% of those referred to outpatient psychological treatment centers at the time. Unlike Schechter, Grotevant and McRoy suggested that instead of being at greater risk, the influx was due to excess referrals (Wilson 2014). This.
abundance in referral suggests a referral bias. Which refers to when one population experiences a greater number of referrals even when the individual or community exhibits relatively minor or few symptoms. In this case, studies have shown adoptees are over referred by their adoptive parents even when their symptoms tend to be mild and or typical for their development (Wilson 2014).

Another issue with adoption research is the accuracy in the comparison groups. Historically when researching adoption adjustment, infant and older adoptees have been put into a singular group, but this fails to present accurate information applicable to all subgroups involved. For example, one study intentionally separated the adoptees into four age categories, before age 1, between 2 and 5 years, between 6 and 10 years, and after age 10 and then compared the results of each group to their respective counterpart. The result of this study highlights how the negative emotional and behavioral differences between adoptees increased with the age at which they were adopted (Wilson 2014). This particular study highlights the importance of proper grouping in order to not alter the analysis which results in more accurate information and insight.

Similar to the conflict with general groups is the lack of transparency when it comes to duration of time with adoptive family. Failure to acknowledge and consider the period of time spent with the adoptive family and length of relationship could be a key factor in considering the behavior of the adoptee (Wilson 2014).

**Adverse Childhood Experiences (ACE)**

The Adverse Childhood Experiences (ACE) is the concept that exposure to adverse childhood experiences directly relates to the health and lifespan of an individual. The original study was spearheaded by Dr. Vince Felitti and Dr. Bob Anda who asked 17,500 adults about
their history of exposure to adverse childhood experiences (Harris 2014). What qualified as an ACE was physical, emotional, or sexual abuse; physical or emotional neglect; parental mental illness, substance dependence, incarceration; parental separation and or divorce, as well as domestic violence. The results show two major findings. One of them being, that ACEs were actually incredibly common. The other result was, there was a dose-response relationship between number of ACEs and health outcomes. The higher an ACE score, the worse one’s health was. This connection while studied in adults at first can also be applied to children and the effects are even more prominent due to the developing nature of children and youth. An argument regarding ACEs and health outcomes is that, exposure isn’t the cause but rather it is the coping styles after such that lead to poor health outcomes. However, exposure to ACEs have been found to result in physical changes the brain, such as, the nucleus accumbens which is related to the pleasure and reward center of the brain and plays a role in substance dependence. ACEs have also been linked measurable differences in the amygdala which is connected to the fear response center. Exposure also inhibits the prefrontal cortex, which is connected to impulse control and executive functioning, crucial for learning. It was found that even those who did not engage with high-risk behavior after exposure still had a higher chance of developing heart disease or cancer. This physical change can be connected to the flight or fight response also known as the hypothalamic-pituitary-adrenal axis. This axis is responsible for alerting one’s body of potential danger and instilling a fight or flight response. However, when an individual is constantly in an environment that activates the response system it changes from being useful to being harmful. Constant activation can not only change the brain structure, as previously mentioned, but also changes the developing immune system, developing hormonal system, and
also the was DNA is read and transcribed. Since children and youth have critical developmental stages the effect of ACEs can be seen throughout a lifetime (Harris 2014).

As this relates to the topic of adoption, many children in the foster care system also bear witness to one or more of the adverse childhood experiences mentioned previously. Acknowledgement of this can shed light on how vulnerable this population is as well as the resources adoptees may need in order to treat what they’ve experienced and prevent future adverse events from occurring.

**Complex Trauma**

The events that occur regarding adoption involve the removal from biological family, placement into an unknown environment, and typically with people unknown to the adoptee. These events are starting to be understood within the lens of complex trauma. Complex trauma is seen as the culmination of stress factors that result in the individual deregulation of coping strategies in daily situations as well as in other major events (Muntean, Tomita, Stan 2012). Consider the removal from biological family from a child’s perspective. That child may view such actions as abandonment, which can cause great stress on an individual, especially if the individual is young or developmentally young. It is important to recognize that abandonment may not be the only traumatic event these adoptees face. Prior to abandonment, the child could be in an environment that does not adequately provide safety, support, and connection. Prior research found that children who come from the foster care system are likely to have experienced multiple traumas (Hartinger-Saunders, Jones, Rittner 2019). All these considerations lead to the suggestion that adoption and abandonment can be considered as a complex trauma. Research has suggested too that the formation of complex trauma is not limited to the exposure to such stressful events but also is influenced by the proceeding actions and or environments. Muntean,
Tomita, and Stan (2012) report that children in hospital and institutional environments may face a greater chance of developing the effects related to complex trauma due to limited stimulation and lack adults to attend to all children. Complex trauma in children can result in the alteration of psychobiological as well as socio-emotional development and has an increased probability altering if the trauma occurs during a key developmental stage (Muntean, Tomita, Stan 2012). Areas that have been noted as being affected by the exposure to and presence of stressful events is affection and self-regulation, attention and behavior regulations, and socio-emotional functioning (Muntean, Tomita, Stan 2012).

Considering the alterations that neurodevelopment trauma can have on a child, Muntean, Tomita, and Stan (2012) have suggested that a subcategory from complex trauma, referred to as developmental trauma disorder, be acknowledge in the Diagnostic Statistic Manuel. It is important to stress that while developmental trauma disorder is not in the DSM it is a way in which to understand how memory is distorted and or kept and the affects it has on attention, learning, and verbal processing of children who have experienced complex trauma in the form of abuse and or neglect. This concept also provides a means as to how children may see the experience of adoption more so as an act of abandonment rather than as a potential for stability and permanence.

**Identity Formation**

Identity formation is a major part of everyone’s development and can be broken into two major subgroups, domains in which the individual has choice versus domains in which the individual has little to no choice. Examples of choice would be areas like occupation, spirituality, and political affiliation. Examples of little to no choice would be racial identity, ethnic identity, and adoptive identity. Both areas involve the individual to process, reflect, and making meaning,
but with aspects that are not a choice, the process can become difficult and frustrating (Grotevant et al. 2017). Wilson (2014) also notes that, in general, the experience of an atypical life event, such as adoption, can create a sense of dual loyalties and conflict that the individual must make meaning of in order to develop a stable sense of self. Regardless of the type of adoption, every adoptee is liable to experience conflict in identity development because various aspects of their background might not be known to them and as a result are also at an increased risk of adjustment problems. This increased risk is not just regarding those who face maltreatment, institutionalization, or racial discrimination; the adopted community at large are at an increased risk compared to their nonadopted counterparts (Grotevant et al. 2017).

A study done in 2017 focused on the relationship between adoptive identity of adolescences and their adjustment difficulties in early adulthood. Grotevant et al. (2017) results suggested a higher level of internalizing behavior problems within the group of those emerging into adulthood which they tagged as unsettled in their analysis process. This subgroup is noted to have “moderate to have high levels of all six qualities, but most notably the highest level of negative affect across all types” (Grotevant et al. 2017 p. 2196). These qualities as mentioned previously are, depth of identity exploration, salience, internal consistency, flexibility, positive affect, and negative affect. Since this researched involved two rounds of semi-structured interviews over a period of eight years and the increased levels of internalized behavior problems were apparent both times, this result suggested that adjustment difficulties related to identity development were persistent and may not be solved through the natural progression of maturity (Grotevant et al. 2017). This emphasis on internalization may be due to the nature of identity formation being a more of a reflective and internal process. The characteristic of internal reflection may lead to rumination which, has been connected to depressive systems and other
internalized behavior conflicts (Grotevant et al. 2017). Overall, this report highlights the relationship between adoptive identity in adolescents and how it is related to adjustment conflicts in early adulthood. Results noted the negative interaction of all six qualities related to identity formation with regards to being adopted and how the nature of internalization could lead to rumination and depressive traits.

One aspect of identity formation that is unique to the adoptee experiences is the formation and self-reflection regarding racial and ethnic identity, specifically relating to international adoptees. As many international adoptions have also involved transracial and or transethnic relationships, the formation of identity can be extra complex for the children of such adoptions. While racial and ethnic identity may seem interchangeable, each one has specific qualities and interactions. Racial identity is a psychological process that refers to how individuals experience racial categorization which is related to racial socialization, racism, and discrimination. Ethnic identity on the other hand, while also a psychological process, is more personal and focuses on how individuals incorporate their ethnic identities and culture into their overall self-concept (Laybourn 2017). This duality and combination can be especially taxing for international adoptees as it asks them to make sense of a culture and identity to which they have little to no knowledge about. This struggle has also been referred to as the ‘transracial adoption paradox’ which acknowledges the minority membership an international adoptee may have but also recognizing their cultural alignment is more toward the majority culture, which more often than not is White. Another concept related to identity and international adoptees is the ‘forever foreigner’ narrative which names the feeling many Asian Americans experience and who feel as though they will always be considered foreign due to their physical features and ethnic membership, regardless of cultural affiliation. Specifically looking at Korean adoptees (KADs),
previous research has noted, how KADs have felt a greater amount of scrutiny for their racial and ethnic identity portrayals based on racially based expectations of how they should behave (Laybourn 2017).

**Attachment**

Throughout the years it has become increasingly clear that secure attachment is monumental for a developing child. Various studies have shown the positive effect secure attachment has on such developmental aspects as, self-regulation, communication and trust, curiosity, sense of agency, and number of close relationships (Brenninkmeyer 2006). However, when a child experiences complex trauma, the ability to form and recognize secure attachment becomes impaired and can have lasting affects even after the child is removed from such stressors. Brenninkmeyer (2006) suggest that children who have experienced complex trauma have also experienced attachment trauma on top of the original experience just by proxy and involvement. This transition from one set of caregivers (birth family) to another (adoptive family) may influences the child’s attachment and adjustment styles and or development. Many foster youths have stated that they lost contact with their birth parents, siblings, and other relatives once removed from their first home (Hartinger-Saunders, Jones, Rittner 2019). Such actions can have lasting impacts and if the child faces multiple separations then the child may perceive each event has a form of abandonment.

Attachment theory works to explain the relationship between experiences and attachment development. As it relates to complex trauma, the Attachment, Regulation, and Competency model (ARC) focuses on early child development and caregiving support systems around the child to mitigate the trauma systems of the child. (Hartinger-Saunders, Jones, Rittner 2019). The model was built to acknowledge that treatment may look different for all individuals, however,
the overall themes of attachment, regulation, and competency can be found in a majority of cases. Using these themes can help guide and influence treatment plans that work towards mending attachment not only for the adoptee but the families as well (Hendry 2017).

**Improving Adoption Services**

As of now, the current systems in place fail to address the trauma a child might be carrying or experience at the time of or before adoption which could be connected to the lower success rate in permanent placement. Hartinger-Saunders, Jones, Rittner (2019) suggest the implementation of trauma-specific adoption services to mitigate the current discrepancy. They highlight the importance in preparation for adoption. This includes but is not limited to, pre-placement visits with the child, materials and resources to help adoptive parents become knowledgeable on what to expect, communicating with the birth family, and participating in pre-adoption training/counseling. Improvement in pre-adoption is not only the responsibility of the parents and services but also the mental health professionals who interact with such people. A study done in 2012 by the Center for Adoption Support and Education found that in a sample of adoptive parents, 75% of them believed the professionals they worked with were not adoption competent and believe their families had been damaged by the therapist involvement (Hartinger-Saunders, Jones, Rittner 2019). A major take away from this study is that greater attention and care needs to be placed in both adoption competencies and skills related to trauma-informed services and trauma-specific interventions.

**Related Models and Assessments**

One tool that has been used to assess and observe attachment styles is the Strange Situation Assessment tool. This is done by observing how children react and behave when strangers are present, and their care giver is out of site (Hasler 2017). Similar to the Stranger
Situation Assessment tool parent-child interaction therapy focuses the parents actions and behavior as a means of strengthening the relationship between child and guardian (Heartinger-Saunders, Jones, & Rittner 2019). Which works on positive parenting techniques, reduction in parenting stress, and reduction in externalizing and internalizing behaviors of the children One suggestion that has been made in regards to improving the support systems for adoptees and their families has been the utilization of technology to improve access to suitable adoption services and resources; improve ways to track critical events, behaviors, emotions, functional ability and strength as a means of finding the best support related to the individual’s needs; and to help build greater communities of support beyond therapist, parents, and child (Hartinger-Saunders, Jones, & Rittner 2019).

One study, while not specifically pertaining to adoption, attempted to address the benefits and or consequences of Child Protective Services (CPS) on the youth that were apart of CPS. Child Protective Services relates to adoption, more so the foster care system, because Child Protective Services is responsible for the physical separation of children and birth family and or relatives that results in the child moving to shelters, group homes, and or foster homes (Cesar & Decker 2020). This sequence of events can have a lasting impact on the child and Cesar & Decker (2020) aimed at naming such effects. Through interviewing 33 youths who were attending a theater camp hosted by the Art Mentorship Organization while in custody of CPS, they were able to learn about the children’s perception regarding family, role models, mentorship, and the kids reflections from an art-based mentorship organization. Results from such interviews highlighted the potential harm CPS has instilled on those who are part of its system rather than the benefits on which the system is grounded by. While Child Protective Services is rooted in the idea of putting the needs of the child first and providing shelter and
safety, what they take away in return is the opportunity for these youth to experience social support as compared to their peers who are not apart of the system. Another take away from this study was that, through the art mentorship organization, CPS youth were able to utilize ‘brave spaces’ during their theater camp experience as a way to explore their, creative, silly, authentic, and vulnerable all while being support by positive mentors and peers (Cesar & Decker 2020).

Another study related to adoption but did not directly focus on the adoptee experience was done by Sorek et al. (2020) and aimed at analyzing adoptive parent perception regarding open adoption in Israel through a qualitative descriptive study based on semi-structured interviews of 16 Israeli adoptive parents. Results from the interviews found two frames of thought amongst adoptive parents in regard to open adoption in Israel. Those who were found to be more child-center when adopting had a positive view on open adoption while those who adopt with self-centered ideals tended to view open adoption with hesitation and see it as a barrier to the child’s development and sense of belonging (Sorek et al. 2020). Another observation and mention were the styles of openness. Sorek et al. (2020) references two styles of openness. The first one being structural openness which is characterized by the formal relationship between those involved with the adoption. This continuum ranges from closed adoption, mediated open, to fully open. The other style of openness is referred to as communicative openness. This style puts greater emphasis on the process of exploring meaning in reference to adoption for all members of the adoptive family. Communicative openness is noted to have positive outcomes for the adoptee such as well-being, self-esteem, and positive identity development. Communicative openness also has been found to be a more reliable way of predicting an adoptees adjustment rather than the other form of openness (Sorek et al. 2020). While this study may not seem as relevant as newer and or more focused studies, the acknowledgement of communicative openness as it
pertains to adoptees is crucial to keep in mind when working with this community. Not only can this information be used amongst adoptive parents in helping to build healthier more positive experiences but the understanding that this form of openness can benefit the adoptee as well is beneficial to those working within this population.

**Art Therapy and the Adopted Community**

While there are many forms of therapy out there, art therapy and the creative therapies in general can be more effective and or allow for greater reflection and processing than traditional verbal therapy due to the ever-growing frameworks that address various aspect of adoption research and also nonverbal areas of the brain (Hendry 2017). Most notably, the Expressive Therapies Continuum (Lusebrink & Hinz 2014 as cited in Hendry 2017) and the Trauma-Informed Expressive Arts Therapy model (Malchiodi 2012 as cited in Hendry 2017) are examples of how creative therapies are especially appropriate for addressing complex trauma children. It has been noted, as it relates to the ETC, that “trauma sensory-motor memories are stored nonverbally and are accessible primarily through expressions involving body as the main point of entry” (Lusebrink & Hinz 2014 as cited in Hendry 2017 pp 54) which highlights the benefit of utilizing creative therapies when discussing trauma and adoption. Lusebrink & Hinz (2014) (as cited in Hendry 2017) also note how memories related to trauma, both verbal and nonverbal, can be unorganized and without a linear narration but the practice of creative therapies can create and sort a trauma narrative. On the other hand, Malchiodi (2012) (as cited in Hendry 2017) notes that creative therapies have the ability to address attachment and the brain by accessing the nonverbal and right hemisphere communication of the brain as well as enhancing self-soothing techniques through image, sound, and movement. While these are just two examples of why creative therapies can be especially effective when working with those
who have experienced complex trauma related to adoption, the body of evidence and support are ever growing.

Focusing on the attachment effects of adoption and or complex trauma, Hendry and Buck (2017) noted the strength and opportunity in dyadic art psychotherapy and the subcategories; child-led art therapy, joint engagement, and narrative coherence. Dyadic art psychotherapy is the joining of guardian and child during a period of time. Child-led art therapy specifically focuses on the child maintaining autonomy in decision making and acting. While the guardian acts more of a supportive observe which provides an opportunity to see the child’s process uninhibited while also reflecting on how the therapist responds to the child. Joint engagement works more towards the two, care giver and child, working together. This allows for possible moments of attunement and bonding while also observing the internal working models of each and how they pair together. The third subcategory is narrative coherence which is characterized by the co-creation of meaning or the construction of a narrative around shared events with a focus in trauma processing through perspective sharing. The authors then provide an example of such that highlight the benefits of art therapy and how narrative coherence can be used to process the events the child has witnessed and been subject to. Art therapy is supported as a form of therapy with this population because of the focus in making and showing which can be less daunting than traditional communication. In the example given in the article, the therapist asked the adoptee to cocreate a baby out of model clay with the adoptive parent. The therapist then used the clay baby as a segue into asking the adoptee about their own perception of their adoption and or lead the adoptive parent to discuss the shared event. With the therapist help in moderation, narrative coherence is focused on as both the adoptive parent and adoptee reflect and rewrite the events surround the adoption. (Hendry & Buck 2017).
One cross-sectional quantitative research report in particular focused on the Draw a Bridge assessment with institutionalized orphans in Ukraine during a life skills camp which focused on measuring their ability to consider their future life including goals and hopes while aging out of their current institution (Darewych 2013). The Draw a Bridge assessment was used with this populations because it has been credited with providing an opportunity for individuals to explore their past, present, and future. This is done through the drawing prompt that provides a visual representation of the participants own perceptions. The assessment can also allow the client to acknowledge strength and or barriers they may experience in relation to their goals and or hopes. Utilizing this study with institutionalized orphans allowed researchers to test their hypothesis which was, “that institutionalized orphans in Ukraine isolated from society and without secure parental attachment base have the capacity to visualize and draw their future life, goals, and hopes” (Darewych 2013 p.86). While they did utilize the Draw a Bridge assessment, they also noted their own modifications from the original instrument. Modifications included, using a pencil and printer paper, requesting a path component from the bridge in the drawings, and new quantitative scoring system to account for the monochrome drawings (Darewych 2013). The results of this study support the initial hypothesis and could be seen through the image directionality and path quadrant, however, less than half had their bridge in the future right quadrant and only 44% had their path in the future right quadrant (Darewych 2013). These values suggest that while future hopes and goals are possible amongst institutionalized orphans in Ukraine, the goal-oriented mindset is not applicable to all in the environment. This study provided an opportunity to use art therapy with institutionalized orphans through the application of the Draw a Bridge assessment. While the hypothesis was supported to a degree, a greater take
away was the ability to provide a space for orphans to reflect and explore their perception past, present, and future in a supportive and contained experiential.

Another arts-based treatment was created with the sole focus on helping adolescent adoptees as they process through their development and identity formation. This program was created by Barbara Robertson (2001) and is called Origins and Connections: Filling in the Blanks. The treatment plan is centered around the creation of a booklet with eight different prompts that ask the adoptee to reflect on their experience with adoption in hopes of developing a greater sense of understanding and acceptance within themselves and within their place in society. The prompts are also in a chronological order that starts with considering the ‘origin script’ and ends with naming future connections and goals. The author also highlights the benefits of art therapy when working with the adoptive population because of the nonverbal nature and ability to tap into the internal thoughts/feelings which the client may not be aware of (Robertson 2001). While not studied, this treatment plan highlights the relationship art therapy can have with regards to the specific population and its ability to engage in the internal and external processing associated with adoption and identity formation for adolescents.

As mentioned, adoption as a complex trauma comes with various areas of development that are a greater risk of being impaired or influenced due to the events surround one’s adoption. The main areas of focus for this literature review are identity formation, attachment, and stress response. Parisian (2015) notes in an article regarding identity formation in relation to art therapy that “traumatic life events and psychological conditions have sometimes disoriented and amplified their adolescent development, creating further challenges in their search for self, meaning and place” (p 130). Applying this consideration to the adopted population who may have experienced trauma in displacement, abandonment, and adoption, the development of
identity formation may have an added layer of complexity which cannot always be vocalized or named. Thus, the use of art therapy can be seen as being beneficial as it does not rely solely on words and verbal conversation. Art therapy also allows for a cross-cultural approach which focuses on the process, experience, and personal meaning that can come from art making (Parisian 2015). The process of making art also caters to the unique experience of the individual in ways other forms of therapy may lack or fall short in. Parisian (2015) describes her own experience of using art therapy with a client who was a second-generation Filipino struggling to make sense of his own identity. Parisian (2015) highlights how art therapy gave the client to the ability to express, explore conflicts, gain awareness, as well as exercise freedom and control. By being able to express, process, and reflect the client was able to start restructuring his thinking and sense of self which not only improved his own behavior but also the dynamic with his family. Parisian’s article recognizes the complexities of identity development and highlights the strengths of art therapy in exploring, reworking, and developing such.

Attachment is another area of development that can be influenced due to complex trauma such as adoption. Shiakou (2010) explores the attachment styles of those from maltreated and non-maltreated homes through the use of family drawings. Shiakou (2010) preferences the study by mentioning that “long before children can put their feelings and thoughts into words, they can express both conscious and unconscious thoughts, wishes and concerns into drawings” (p 203). This notion supports the use of art therapy when exploring such aspects of development like attachment. In particular, this study focused on how art therapy can provide insight into family dynamics through the use of projective drawings which also demonstrates the ability of art therapy to not only be used as and in treatment but also in other aspects of treatment such as, intake and assessment. Shiakou (2010) also supports art therapy by mentioning that while
children may be willing to speak about topics such as family dynamics, the words may still yet to be formulated to share those thoughts and feelings fully and accurately whereas, art therapy allows translation of thought without words. This study in particular was carried out by 20 Greek Cypriot children who were between five and 11 years old. 10 children (four girls, six boys) were classified as experience abuse from their caregivers and the other 10 (four girls, six boys) were the control and had no experienced any maltreatment. The participants were then asked to draw a picture of their whole family on a standard white piece of paper using a pack of 10 color markers. The results of the study found that maltreated children displayed significantly more items in their drawings which were linked to insecure attachment than their control counterparts (Shiakou 2010). Further analysis noted that maltreatment does result in hindering the natural development of children’s emotional and social sectors which puts them at a greater risk for future mental health related issues. This study relates to adoption as a complex trauma in two ways. The first, as noted previously, is the benefit of art therapy not only as a means of treatment but also as means of intake regarding aspects of development that may be hindered due to events and or their biproducts, like adoption. The second, is the results of this study and its focus on attachment style. The study notes the relationship between insecure attachment and maltreatment, which was also an experience mentioned in the adverse childhood experience. While the two are not exclusive to each other, their overlap does suggest that adoption as a complex trauma within the category of adverse childhood experiences could also mean insecure attachment during development for those who have experienced adoption and also related to such.

The last area of development that is a focus in this literature review is stress response. Ugurlu, Akca & Acarturk (2016) focused on art therapy as a form of intervention for symptoms
of post-traumatic stress, depression, and anxiety amongst refugee youth studied the changes in such symptoms after participants went through an art therapy intervention program. To bring context to the study, the authors highlighted the benefits of art therapy for the specific population noting the ability art therapy had in addressing emotional conflict, self-reflection, fostering coping mechanisms, reducing anxiety, and improving problem solving skills (Ugurlu, Akca & Acarturk 2016). They also noted that the strength in using art during treatment is that language is through expression rather than words, which are not always the easiest to formulate for youth. The study involved 63 Syrian refugee children (29 girls, 34 boys) ages seven to 12 years old. Prior to the intervention program, the participants and their family completed a pre-treatment assessment that was then to be filled out again after the completion of program. The program consisted of a five-day workshop that was run by licensed art therapist who operated on a Skill for Psychological Recovery framework which aimed at practicing problem solving, identifying feelings, managing reactions, along with other skill sets. The use of art was focused on practicing stress reduction, emotional integration, and catharsis (Ugurlu, Akca & Acarturk 2016). After the program, 30 participants, picked at random, were asked to complete a post-treatment assessment. The result of such indicated that the rating on the pre-treatment was significantly higher than the post-treatment in aspects of trauma, depression, and trait-anxiety symptoms (Ugurlu, Akca & Acarturk 2016). This study not only highlights the strengths of art therapy but also supports its implementation in treating aspects of post-traumatic stress disorder like depression, anxiety, and stress response, which can be a byproduct of the two, through quantifiable data (Ugurlu, Akca & Acarturk 2016).

**Discussion**
Based on the literature that has been explored, the recognition of adoption as a complex trauma was brought forth and supported through concepts such as complex trauma, adverse childhood experiences, and also the modern history of adoption. The witnessing and experiencing of biological ties being severed in various degrees of consent and force suggest that this is an adverse childhood experience. Not to mention, the stress and hyperarousal these experiences can have on a child suggest it could induce a physiological change, especially if it is in tandem with any of the above-mentioned qualifications for adverse childhood experience. Considering the parallels and connections amongst these concepts and the history of modern adoption, it is important to reflect back to Harris (2014) in which she highlighted the ways in which complex trauma and adverse childhood experiences can have lasting effects on the children, both physically and mentally. The aspects of development affected by such experiences include attachment, identity formation, and stress response which can also be seen as issues within the adoption community. These areas of development are under distortion and stress due to changing of custody, experience of abandonment, and sometimes the clash of cultures an adoptee is asked to partake, witness, and make sense of. Comparing the aspects of development that are affected by the experience of adoption with the models and assessments available highlights the limited research available regarding the those who have experienced adoption and or related systems.

Considering the affects on development and the relation to trauma, the creative therapies has been suggested to be especially beneficial to those who are considered to have complex trauma related to adoption. The strength in using creative therapies with those who have experience complex trauma and adoption is the ability in the creative arts to process and reflect on such events that might be stored nonverbally in the brain. As noted earlier the creative arts
also have the ability to not only be used during treatment but throughout the whole therapeutic relationship, by using it as an intake tool as well. Another strength of utilizing the creative therapies with the adopted population is how art can also be used to build and practice healthy way of processing, problem solving, and reflecting which not only help the client in the moment but can have long lasting benefits which decrease the change of future mental health related concerns.

**Limitations**

Within the topic of adoption, the lack of research becomes more apparent when studying the relationship between creative therapies and the adoption experience. There also seems to be a lack of cohesion within this research field. Considering the various systems and experiences related to adoption, they all center around the displacement from biological parents and or relatives which suggest that there should be some unity or acknowledgment of the general effects such events have for the community at large. However, much of the information discussed and found relates to a specific subgroup and or uses small population pools for research which hinders the ability and validity in application of results to similar groups. A challenge of this thesis was finding sources that related to the topic as a whole. The material reviewed here is mainly focusing on one aspect or another and then inferring as to how it relates to the adoption experience. Another result of this inferring is that nothing can be definitive and requires further research to enhance validity and reliability. These connections and theories require more research to see if the relationship or correlation is legitimate and transferable. Overall, the research is out there, even in limited capacity, but further attention and analysis is needed to provide effective and conscientious supports for those who have been separated from their biological parents and or relatives and the experiences they have witnessed.
Conclusion

The act of adoption has been a part of our culture since before the process of documenting. Only recently, in modern times, has it faced the legitimization through legislation and regulation, however, this process of standardizing has prioritized others needs and considerations over the displaced child and their needs. Through the lens of adverse childhood experiences and complex trauma, adoption can be considered a life altering event that not only changes the development process of youth and adolescents, but also has last effects even after immediate events surrounding displacement and or adoption. Considering such, creative therapies has been suggested a beneficial form of therapy for such populations due to its ability to access nonverbal memories and bring forth the various aspects of trauma. Through the use creative therapies, adoptees and the like are able to address such topics as identity formation, attachment, and stress response by utilizing the creative arts to process, reflect, and practice healthy ways of expression. Specifically speaking, art therapy addresses identity formation by providing the freedom to explore and make sense of various aspects within an individual’s life. Art therapy also works with attachment by being utilized as a means of gaining more insight into the family dynamics as it relates to the individual which can help shape an appropriate treatment plan. Art therapy as it relates to stress response has been shown to play a part in reducing related traits associated with stress response, anxiety, and depression, while also providing possible coping tools that a client can use for future use. While research is limited, and at times disjointed, it is crucial that we continue this research in order to provide support through all stages of adoption.
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In the judgment of the following signatory this thesis meets the academic standards that have been established for the above degree.

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