An examination of the attachment process from childhood to romantic relationships among young adults raised in long-term and adoptive foster care

Lucy Diane Ganem

Iowa State University

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An examination of the attachment process from childhood to romantic relationships among young adults raised in long-term and adoptive foster care

by

Lucy Diane Ganem

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Teresa Tsushima, Major Professor
Cornelia Flora
Marcia Michaels

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All cultures are concerned with children, not only because children are vulnerable but also because they are a society’s investment in the future. It is our children who will eventually grow up to be in charge of the future. Because humans are social creatures living in complex social groups, we must all take some interest in our culture’s youngest members (Meredith Small, 1999, p. 3).
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ABSTRACT

This is a qualitative study that seeks to examine the foster care experience through the narratives of fifteen participants. This study specifically examines how foster care and family disruptions impact a young adult’s ability to form and establish meaningful and trusting romantic relationships. The data were collected from interviews of young adults raised in long-term foster care and adoptive foster care placements. As I set out to explore the foster care experience, I noted the recurring themes that resonated from interviews with the participants. Participants’ experiences and understandings of attachment are reflected in my findings.

Many researchers, such as John Bowlby, have long argued that the attachments that infants form or fail to form with their caregivers have lifelong implications for future relationships. But attachment researchers have overlooked the institution of foster care and the ways it shapes children’s lives. This study examines lifelong attachment processes and examines the attachment process of young adults raised in foster care and adoptive foster placements. Specifically, this study examines how romantic relationships are viewed, established, and often avoided by young adults raised in foster care.
INTRODUCTION

The purpose of this study is to examine attachment-based experiences through the lives of fifteen young adults raised in foster-care or adoptive care. Three major life experiences are explored: (1) the child-primary caregiver experience, (2) the foster care experience, and (3) romantic relationships. I am specifically interested in how young adults’ recollections of their relationships with their birth parents and foster parents are related to the quality of attachments formed in their romantic relationships.

Using narrative inquiry, I explore individual lives, including participants’ perceptions of their relationships with their birth parents and their foster parents. I also explore major turning points in their lives, such as family transitions from their birth parents’ homes and, in some cases, to and from multiple foster homes. Specifically, I examine how the institutions of foster care and the birth family shape participants’ identities and experiences as these relate to their romantic relationships. I note that in this study most participants recognized their birth mothers as being their primary support and in many cases their only caregiver. However, two participants did recognize their birth fathers as being their primary caregivers.

Each narrative clearly conveys how institutional structures play a role in shaping participants’ lives and their views of attachment. Many criticisms have been made by theorists from the symbolic interactionist tradition, who argue that sociology must make central human actors’ involvement in the creation and recreation of the social world through symbolic meaning. (Jary & Jary, 2000). Consequentially, in this project I examine how each participant constructs meaning about attachment and relationship. Even further, I examine how each participant’s experience in the birth-parent relationship has contributed to his or her construction of meaning about relationships and attachment. The sociological significance of
this project, then, lies in how the narratives enhance our understanding of the attachment process among young adults who experience family disruptions or are permanently removed from the care of their birth parents and placed in foster care. Additionally, this project deepens our understanding of the importance of the child-caregiver relationship, even when it is disrupted by foster placement. The child–birth parent relationship shapes emerging identities of children, even as they move from one foster care placement to the next. As such, dual foster parent and birth parent relationships impact children’s lives in a number of ways, including attachments with future romantic partners.

Each participant shared a unique story. But almost everyone recounted difficulty in forming successful, trusting, and meaningful romantic relationships. Difficulty in forming healthy romantic relationships is a theme this research explores. When I asked one of my participants—a twenty-year-old female who has been married for three years and has two children—why she does not trust her husband, this is what she had to say:

Because I just have trust issues; I was taught that really you can’t trust anybody. If you can’t trust the person who gave birth to you then you can’t trust anybody else. I think that’s where that stems from. (Heather)

The above comment reflects the ideas of the renowned attachment researcher John Bowlby (1977) that attachment is learned in infancy and childhood. The participant also implies that trust is a prerequisite for attachment. Her response compels us to ask whether the attachment-related socialization that is experienced by children in highly disrupted families may be relearned through relationships with other caregivers, such as foster parents, or with romantic partners.

I have chosen to examine romantic relationships because they are the quintessential form of intimacy in life cycles, naturally following parental and peer attachments. According
to M. H. Huyck (2001) “As with other intimate relationships, we expect to see at least some evidence of commitment, affection, cognitive intimacy, and mutuality” (p. 9). These relationships may evolve into lifetime commitments. I hope to answer the following question: When children’s relationships with their parents are disrupted by foster care, how do these experiences affect their subsequent attachment-related experiences in romantic relationships?

Support for considering either birth mothers or fathers as primary caregivers is found in Hazan and Shaver, who state that,

Multiple attachments are hypothesized to be hierarchically arranged. At the top of this hierarchy is usually the infant’s mother. There is nothing in attachment theory requiring that mother be the primary attachment figure. Infants form primary attachments to the person who most consistently care and responds to their distress signals (1994, p. 69).

In this study, I note that most participants recognized their birth mothers as being the primary caregivers and in many cases their only caregiver. Therefore, I use the term birth mother and birth parent interchangeably to reflect the experiences of my participants. However, two participants did recognize their birth fathers as being their primary caregivers.

The strength of the research resonates from the voices of the participants as they share their experiences. Susan Kools offers a sociological perspective on the study of foster care when she says “Very few researchers have interviewed children in foster care to explore their thoughts and feelings about their status as foster children or their placement experiences” (1997, p. 263). By providing graduates of the foster care system with a platform from which to speak, we are able to learn from their experiences and thus work towards improving foster care for the hundreds of thousands of children who enter the foster care system each year.
This study was inspired by my work, spanning five years of work in the foster care system. I have worked with youth ranging from infants to eighteen-year olds. My work has involved supervising visits between birth parents and children and reporting to the court on these visits. I have also been responsible for recommending to the court either the termination or reinstatement of parental rights. Additionally, I have provided a variety of in-home counseling services to foster care youth and to their foster care parents. Often my role has been one of an advocate for foster care youth before the courts, caseworkers, attorneys, and foster parents.

As a young sociologist, I have begun to question what the future will look like for children in the foster care system who have attachment issues. Will these same children who refuse to bond and attach to healthy, appropriate, and trustworthy foster parents be able to form healthy relationships with romantic partners? This study will begin to answer that question. In addition to considering individual dynamics, this study also considers sociological factors by looking at institutions that can influence the attachment process.

Throughout this study you will meet adults who have ‘aged-out’ of the foster care system and adults who were adopted out of the foster care system. Adoption is used to describe the experiences of foster children who are legally adopted by licensed foster care individuals or family members. Unlike youth in foster care, adopted youth are not burdened with having to change families as adoption is permanent.

Fundamental to understanding the foster care experience is realizing the transitory nature of foster care. Foster care is defined as either a temporary living arrangement or long-term placement, but does not include the legal adoption of the foster care child. However, Susan Kools offers a sociological perspective by defining foster care as a “residence in a supervised setting outside the biological family as mandated by the social services or juvenile
justice system” (1997, p. 263). Reasons for children entering the foster care system include the death of a parent, parental illness or mental health issues, neglect, physical or sexual abuse; family homelessness and parental substance abuse. Each year an estimated 20,000 young people ‘age-out’ of the U.S. foster care system. Many are only 18 years old and still need support and services. University of Chicago professor Mark Courtney, one of the nation’s leading researchers regarding foster care youth, offers this grim account of the lives of many former foster children:

Many of them have a very hard time making ends meet financially. They don't leave the foster care system with much in the way of human capital. They don't go on to college in great numbers; many of them don't even have a high school diploma. They have a lot of mental health problems. They have very unstable living arrangements. They move around a lot, very high rates of homelessness, and they end up getting involved with the criminal justice authorities. Many of them end up arrested or incarcerated. And others are victimized themselves, either physically or sexually.

(2005, p. 1)

Courtney documents the adversity facing children who age out of the foster care system and the need for services, programs, and social capitol that will allow them to become independent, successful adults. In addition, Courtney’s study reflects the need for advocacy that is based on policy. Such policy is needed to improve a system that has more than 500,000 youth who are both dependent upon foster care services and at high risk for adverse outcomes.
LITERATURE REVIEW

Attachment theory

“The impact of early close relationships on psychological development is one of the enduring questions of developmental psychology that is addressed by attachment theory and research” (Thompson, 2000, p.146). Research on the attachment process, namely the examination of attachment between infants and caregivers, did not occur until around the 1950s. Up until this point, animal scientists were much further along than psychologists and sociologists in their understanding of the attachment process between infants and caregivers. Darwin’s desire to understand how animal species survive among each other ignited a wave of interest that continues today with special attention paid to the human attachment process. Sociologist David Popenoe (1994) explains that although family life thought of as being primarily the result of social and cultural forces, we all have predispositions to act in certain ways due to our biological make-up.

John Bowlby, British psychoanalyst, was first to establish a theory for human attachment (1973). Half a century later Bowlby’s attachment theory remains the dominant theory in attachment research. Attachment researchers today set out to examine the attachment process based on Bowlby’s attachment theory. I will use attachment theory as a model throughout this study. A gap in the existing literature however, is an examination of how attachment theory applies to children in foster or adoptive care. A related gap is attachment researchers’ tendency to focus on infant-birth parent relationships at the expense of relationships that occur through each phase of life. There is a need for attachment researchers to better understand whether and how the principles of Bowlby’s attachment theory apply to children in diverse living situations across the life course.

In this study, I focus on young adults raised in foster and adoptive care, a topic which
is missing in attachment research. The goal of this study is to see how Bowlby’s attachment theory corresponds to the participants’ attachment experiences in romantic relationships. By examining the stories of each participant during the major phases of their lives, we will examine how Bowlby’s attachment theory applies and whether there are missing links in the theory that fail to explain the attachment process as experienced and defined by the participants in this study.

Because the attachment that develops between young children and their caretakers occurs over weeks and months, it must be understood and studied as a process. Bowlby believed that the process of attachment formation takes an average of two to three years (1979, 1969/1982). In an effort to understand the functions of attachment Bowlby (1977) hypothesized that infants have a built-in emotional system that they use in order to keep their parents in close proximity. This intrinsic built-in system is reflected through infants’ cries, which Bowlby believes help to keep the parents close by to protect infants and keep them away from danger. This system therefore initiates a consistent cycle of parental care and protection. Bowlby (1978) concludes that consistent care and nurturing result in a secure attachment.

According to Bowlby and leading attachment researchers, such as Ainsworth (1982), Hazan and Shaver (1987), and Fraley (1994), a secure attachment in the child-birth parent relationship is based on the following: (1) children’s ability to predict that their parents will respond to their needs; and (2) children’s ability to depend on their parents to respond consistently and in the same way. Therefore, trust is established by parents consistently responding to their child’s needs. The attachment process that occurs between children and their parents is a result of consistent care from the parents. The process of building a secure attachment involves a triangulation of: (1) predictability and (2) dependability; both which
lead to the third component-- trust. I will address each of these in turn.

The first step in the attachment process between children and their parents is predictability. This is achieved by parents’ consistent care, nurturance, response and physical presence. Over time, children begin to be able to predict that their parents will be there for them, to respond to their needs and give reassurance. If children cannot predict what is going to happen or whether their parents will be there to comfort them and provide them with safety, a secure attachment cannot be established. Once children are able to predict what is going to happen and how their parents will respond, children begin to depend on their parents.

Consistent care and nurturing allow children to depend on their parents as a primary support system and see them as people who are safe, reassuring and present. Children now see their parents as people to whom they can turn in times of need and stress and from whom they can seek comfort and reassurance. Through predictability and dependability, trust is established for children with their parents. In essence, trust is a necessary and sufficient condition for a secure attachment to be established. Several trust theorists have stated that trust is developed gradually, over time (e.g., Blau, 1964; Rempel, Holmes, & Zamna, 1985; Zand, 1972). Understanding that the development of trust is a process is crucial in our understanding of the attachment process. Hazan and Shaver suggest that trust is a feeling created through the consistent care and support provided by parents, which allows for a secure attachment to be established (1994).

From a sociological perspective, Lewis and Weigert (1985) state that trust must be conceived as a property of collective units (ongoing dyads, groups and collectivities), not of isolated individuals. Being a collective attribute, trust is applicable to the relations among people rather than to their psychological states taken
individually (p. 968).

In addition, Simmel says “It is the mutual “faithfulness on which all social relationships ultimately depend” (1971, p. 379). Moreover, “attachment theory conceptualizes the propensity of human beings to make strong affectional bonds to particular others” (Bowlby, 1977, p. 35) that are premised on trust relationships.

Bowlby asserts that children will attach to whoever is consistently meeting their emotional and physical needs. Renowned attachment researcher Ainsworth believed that attachment was a system designed to function continuously to provide children with a sense of ‘felt security’ which facilitates exploration by the child (Ainsworth et al., 1978). “The quality of early attachment relationships is thus rooted in the degree to which infants have come to rely on their attachment figures as sources of security” (Ainsworth et al., 1978, p. 74). Felt security is developed through infants’ ability to predict what is going to happen and to depend on their parents to respond to their physical and emotional needs.

Prominent attachment researcher Ainsworth (1982) argued that children who do not have secure attachments with their parents can often develop attachment disorder or disruption. Because all of the participants in this study experienced permanent removal from parental care and some at very young ages, it’s important that I briefly explore how attachment disorder or disruption occurs and learn how it is characterized. Moser-Richters and Fred Volkmar (1994) say that “Multiple terms have been used to refer to manifestations of the condition including failure to thrive, non-organic failure to thrive, psycho-social dwarfism, maternal deprivation, hospitalism, and anaclitic depression and disorder” (p. 328). (Mental Health ABC, 2007) defines attachment disorder as follows:

There are two major types of attachment disorder that affect children of all ages. This includes an inhibited and uninhibited disorder type. Children with these types of
attachment disorders act out in different ways, but both cause problems with forming relationships among others. Depending on the situation in which your child was put in when they were young, they will form one of these disorders and act out in different ways when this disorder is triggered. Attachment disorder begins when one is unable to form healthy relationships in a social setting. This problem will range in severity as well as in age. This disorder is based off of early childhood experiences that involved a trauma, including neglect, abuse, or abandonment. If an infant or child is put in a situation where they do not feel secure and are not taken care of right away, then it is likely that they will form a defense mechanism to respond with. Usually, this defense involves the child or teen developing a feeling that the world is unsafe. This causes the child to be unable to form healthy relationships with those around them, especially with primary caregivers. (2007, para. 2).

Attachment theorists argue that attachment disorder or disruption is usually the result or the outcome of failed attachments during infancy and early childhood. Understanding attachment disorder or disruption is helpful in building our knowledge about why attachment disorders originate and how they are characterized (what they look like). Additionally, it will help me to analyze the participants’ stories regarding their attachment experiences from their childhood to early adulthood including their experiences in romantic relationships.

Although attachment disorder or disruption is primarily caused by parents who are inconsistent in responding to the needs of their children, there are also other factors that can impede upon the attachment process. Charles Wenar and Patricia Kerig suggest that infant characteristics such as premature birth and drug addiction at birth can make attachment more difficult. For example, premature babies often avoid their caregivers’ bids for attention. They tend to be physically unattractive and have a high-pitched non-rhythmic cry that is
perceived as sickly and aversive. Babies who are born addicted to narcotics display abnormal patterns of behavior that could disrupt the establishment of synchronous routines. For example, cocaine addicted babies are extremely susceptible to over-stimulation and will calm down and become alert only when they are left alone (Developmental Psychopathology, 1999). Such factors remind us that the attachment process involves the participation of both the infant and the parent and prompts us to remember that some situations can be outside the parent’s control once their children are born.

In an effort to develop a model to access attachment quality and outcomes of attachment quality, Ainsworth conducted the Strange situation. The Strange situation involved observing young children between the ages of 12 to 18 months, responding to a situation in which they were briefly left alone and then reunited with their mother (Ainsworth, 1986). In this study, Ainsworth concluded that there are three distinct patterns of infant attachment and identified them as: “secure; ambivalent-insecure; and avoidant” (1991, p. 226). Ainsworth believed that attachment styles can help predict behaviors later on in life. Drawing off of Ainsworth’s study, researchers Main and Soloman (1986) added a fourth attachment style known as disorganized-insecure attachment. Like Bowlby, Ainsworth argued that these attachment patterns are determined by the type of care and the level of consistent care that children receive from their parents. Below Ainsworth classifies her findings of the Strange experiment:

Children classified as securely attached welcome their caretaker’s return after a separation, and if distressed, seek proximity and are readily comforted. Infants classified as anxious-resistant show ambivalent behavior toward caregivers and an inability to be comforted on reunion. Infants classified as avoidant avoid proximity or interaction with the caretaker on reunion. Continuity in infant attachment patterns
seems to be mediated largely by continuity in the quality of primary attachment relationships. (Bartholomew, 1991, p. 226)

Like Bowlby, Ainsworth argued that attachment styles learned during the first year of an infant’s life has life long implications for future relationships. “A basic principle of attachment theory is that attachment relationships continue to be important throughout the lifespan” (Ainsworth, 1982, p: 226). In the next section we will explore adult-adult attachment and how the principles of infant-caregiver attachment are similar to adult-adult attachment.

Adult Attachment

“According to Bowlby’s theory, children over time internalize experiences with caretakers in such a way that early attachment relations come to form a prototype for later relationships outside the family,” specifically, romantic relationships (Bartholomew, 1991, p. 7). This theory suggests that the attachment styles formed in early childhood follow adults into romantic relationships, thus impacting their ability to attach successfully to their romantic partners. Even further, Bowlby (1973) identifies two key features of these internal representations or working models of attachment: (1) whether or not the attachment figure is judged to be the sort of person who in general responds to calls for support and protection; and (2) whether or not the self is judged to be the sort of person towards whom anyone; and the attachment figure in particular is likely to respond in a helpful way.

Bowlby suggested that “the attachment tie consists of one individual’s use of another as a “secure base” from which to explore and master the environment in times of safety and the use of that individual as a ‘safe haven’ in times of stress or danger” (Crowell, Waters,1994, p. 31). As you can see, the security that must be felt in an adult-adult relationship in order for the relationship to be secure is similar to a child-caregiver
relationship. The main difference is that predictability and dependability, which create trust between adults, must be more reciprocal, whereas it is less reciprocal in a child-caregiver dyad.

Attachment researcher Fraley states that, “If adult romantic relationships are attachment relationships, then we should observe the same kinds of individual differences in adult relationships that Ainsworth observed in infant-caregiver relationships” (2004, p. 2). We should expect that some adults will be secure whereas other adults will be anxious or avoidant with romantic partners. These attachment styles among adults therefore proceed from an individual’s attachment style. “The way adult relationships ‘work’ says Fraley, should be similar to the way infant-caregiver relationships work” (Fraley, 2004, p. 2).

Hazan and Shaver (1987) have enhanced our understanding of adult attachment by uncovering important connections and similarities between child-caregiver attachment and adult attachment in relationships. They have discovered that what makes a child-caregiver relationship secure is similar to what creates a secure attachment in adult relationships. Hazan and Shaver were two of the first researchers to explore Bowlby’s ideas in the context of romantic relationships. According to Hazan and Shaver, the emotional bond that develops between adult romantic partners is partly a function of the same motivational system, the attachment behavioral system that gives rise to the emotional bond between infants and their caregivers. Hazan and Shaver noted that infants and caregivers and adult romantic partners share the following features:

Both feel safe when the other is nearby and is responsive, both engage in close intimate, bodily contact both feel insecure when the other is inaccessible, both share discoveries with one another, both engage in “baby talk”, both play with one another’s another facial features and exhibit a mutual fascination and
preoccupation with one another. (Fraley, 2004, p. 2)

In essence, many of the relational characteristics that facilitate children’s attachment to their parents also facilitate adults’ attachment to their romantic partners.

Bowlby believed that the mental representations or working models (i.e., expectations, beliefs, “rules,” or “scripts” for behaving and thinking) that children hold regarding relationships are nothing more than reflections of their experiences with caregivers. For example, children with secure attachment styles tend to believe that others will be there for them because previous experiences have supported this conclusion. Once children have developed such expectations, they will seek out relational experiences that are consistent with those expectations and perceive others in a way that is colored by those beliefs (Fraley, 2004, p. 2). Similarly the ability of adults to trust their partners can be shaped by their attachment experiences in early childhood.

While researchers such as Bowlby, Ainsworth, Hazan, Shaver, and Fraley have furthered our understanding of childhood attachment and adult romantic attachments, certain groups who tend to have high rates of child-caregiver disruptions, such as youth raised in foster care, have been understudied. To date, there has not been any research conducted regarding the attachment process among adults raised in foster care.

We will see whether the same principles of Bowlby’s attachment theory apply for the participants in this study who have experienced disrupted attachments with their birth parents.
DATA

The participants for this study were selected using purposive sampling methods. As a practicing social worker for a not-for-profit child and family centered organization, I had knowledge of a newly-organized group comprised of graduates of the foster care system and youth currently in the foster care system. After gaining institutional approval for this research project, I organized a meeting with the founder and leader of the group, which is called Elevate to Inspire. Elevate to Inspire is a group comprised of youth currently in foster care and young adults who have graduated from long-term foster care or were adopted into foster care as children or teenagers. This group was founded by Cindy, a foster care specialist for the non-for-profit agency. The group’s mission statement is to “Inspire others to new levels of understanding and compassion to the life connections of foster care & adoptive teens by sharing their personal stories of hope.” Although this group has only been in operation for approximately one year, the group has begun to receive national and international attention.

Elevate to Inspire meets regularly with policy makers, Department of Human Services case workers, Guardian Ad Litem (attorneys who represent children), judges, and state level and national congresses. Such local, statewide, and national involvement has been made possible through the groups’ involvement in writing to local, state, and national policymakers and working with local children’s rights advocates through the Joan & Lyle Middleton Center of Children Rights at Drake University in Des Moines, Iowa. The group provides training opportunities for social workers, policymakers and foster care parents in an effort to help make life in foster care easier, more comfortable, and more just for the more than 500,000 children in foster care nationwide. The group has most recently met with members of Congress in Washington D.C. to discuss the need for court-ordered sibling visits. The group
is optimistic that legislation will be passed concerning sibling visitation.

Additionally, I met with the Executive Director of the not-for-profit organization. The Executive Director immediately granted me approval to conduct research within the agency and expressed positive sentiments towards my research. My meeting with Cindy, the founder and leader of Elevate to Inspire, was also positive. She was pleased with my research topic and immediately invited me to attend the group’s next meeting. Cindy assured me that there would be many young adults active in Elevate to Inspire who would want to talk with me and share their stories. Because I was interested in speaking with young adults aged 18 and above who had been raised through or adopted into foster care, I knew I had to take advantage of every opportunity to meet potential participants.

In the fall of 2006, I attended an Elevate to Inspire group meeting. There were more than fifty youth and young adults attending the meeting. I introduced myself to the group members and briefly presented my project. In addition, each person who was over eighteen was given the following: (1) a document that explained my study; (2) a document which explained their rights and procedures for confidentiality should they decide to participate; (3) a document with my contact information; and (4) a fill-in-the-blank document that allowed for potential participants to provide their contact information. Although I encouraged the members to take home the information regarding the study, the members aged 18 and over said they were committed to being interviewed and helping me with this research project. While I appreciated their enthusiasm, I nonetheless gave them the opportunity to deliberate about their potential involvement in the study. Several days later I phoned the group members who expressed interest in my project. They all remained solid in their interest in participating, and I began to set up times to meet, go over the study, and conduct interviews.

If I had any doubts about moving forward with this project, they were quickly
forgotten after attending the first group meeting. I was deeply inspired. As I sat amidst the fifty or more youth, most who were still in the foster care system, I felt honored to be there and humbled to hear their personal stories of pain, letting go, and moving on. Even more, I felt deeply moved by the strength of the group and by what was left unsaid—stories that I hoped to uncover during the interview process. This first meeting convinced me that my heart as a researcher was in the right place and my academic responsibility to produce a thesis was no longer a duty but rather a moral obligation to give power to the voices of young adults raised in foster care. Understanding how family disruptions and foster care impact an adult’s attachment in romantic relationships was the driving force for this study. It became clear after the first meeting with Elevate to Inspire that my participants would have a lot to talk about and that I needed to provide them with the opportunity to tell their stories and validate their experiences and pain.

Most of my participants were selected through their participation with Elevate to Inspire; however, two participants were gathered using snowball sampling methods. One participant approached me after hearing about my study, and another participant approached me after learning about the study from one of her friends who participated in the study.

Participants included twelve women and three men, ranging in ages from 18-34, with an average age of 20.9 years. Ten participants identified themselves as Caucasian, and five identified themselves as African-American. The average age of foster care entry among the participants was 9.8 years; the national average for foster care entry is ten years. In the narratives section you will learn the ages of each participant at the time of the interview, and race, sex and their age at the time of foster care entry. Most meetings were held in a conference room, which held a table, telephone, padded chairs, windows with blinds, and door to shut for privacy. Several meetings were held at participants’ residences for their
Each participant was provided with an informed consent document and was given the opportunity to ask questions about the nature of the study and their involvement in it. All participants agreed to allow me to tape record the interviews, which I personally transcribed. I asked each participant the following questions: (1) What was your relationship like with your birth parent(s)/family? (2) Why did you enter foster care? (3) At what age did you enter foster care? (4) Could you tell me about your time in foster care; what was it like? (5) Can you tell me about the best/worst experience you had in foster care? (6) Can you tell me about your relationship with the foster parents with whom you had the closest relationship? (7) Can you tell me about your relationship with the foster parents with whom you had the most distant relationship? (8) When you think about your overall experience in foster care, how would you characterize the level of closeness that you felt to your foster care parents? Would you say that, for the most part, you had closer or more distant relationships with your foster care parents? Can you explain? (9) Who is the person you are closest with today and why? (10) Did you ever have the feeling of wanting to be closer to your foster parents than you actually were? If so, why do you think this happened? If not, why do you think this was the case? (11) Did you feel afraid to form close relationships with your foster family? If so, why? (12) Were you afraid of being abandoned by your foster family? (13) How did you feel about your own sense of self worth during your experience in foster care? (14) Did you want to be close to your foster parents? (15) Did you feel afraid to form close relationships with your foster family? If so, why? (16) Were you afraid of being abandoned by your foster family? (17) Can you tell me about your history in romantic relationships? (18) Is it easy or difficult for you to trust romantic partners? Please elaborate. (19) Is it easy or difficult for you to depend on romantic partners? Please elaborate. (20) Talk to me about your most
What are the dynamics like and how do you feel about the relationship? (21) What are your strengths in romantic relationships? (22) What are weaknesses you feel you bring to relationships? (23) What would your partner or former partner say about the way you attached to them and treated them and the relationship? (24) Are you afraid of getting close to romantic partners? If so, why? (25) Would you prefer to be in a relationship or be single and why? (26) How do you feel that your experience with your birth parents has impacted your attitude and behavior in romantic relationships? (27) How do you feel that your experiences in foster care have impacted your attitude and behavior in romantic relationships? (28) What do you think makes a relationship successful, and what do you think needs to happen in order for a relationship to be successful?

Additional questions evolved as data were collected and analyzed. Due to the nature of this study, I asked institutional approval from Iowa State University’s research board to be able to ask open-ended, probing questions that related to the unique experiences of individual interviewees. Salant and Dillman (1994) say that the importance of asking open-ended questions is that “Respondents must formulate an answer in their own words. People are asked to recall past experiences or discuss issues that they may not have considered recently or at all” (79). Doing so allowed me to ask important questions regarding attachment and to notice emerging themes throughout the interview process.

Participants were not financially compensated for their participation in this study. As such, I was deeply humbled by my participants’ gratitude towards my research project. I felt a very strong rapport with each participant and felt comfortable during the interview process. I believe that my experience as a social worker, my knowledge of the foster care system, and my direct observation of the trials and tribulations of many youth in foster care provided me with an invaluable understanding of the intricate aspects and multiple layers of the foster care
system. I believe my participants viewed me as someone who has strategically set out to help children in foster care and therefore as an ally, someone who is empathetic, compassionate, and believes in bringing the stories of foster care youth to the forefront. At the conclusion of each interview, I thoroughly thanked the participant for his/her time, openness, and reflections. Although each participant expressed to me that it was not necessary for me to change their names for purposes of confidentiality, including the founder of Elevate to Inspire, I have done so as a precaution. Finally, I have chosen to leave quotes from participants as they are and not correct grammatical errors, as I feel this would compromise my goal of bringing forth their active voices, cultures, and experiences.
LIMITATIONS

Some analysts are concerned that by acknowledging that everyone has their own story, narrative inquiry runs the risks of dissolving into solipsism, being derailed by the local circumstances of each story-teller or assuming narratives as a substitute for sociological analysis. According to this view, people tell stories and use narrative in everyday life, but it generally takes a trained observer to make sociological sense out of all that is told. (Berger, 2005, p. 5). While the essence of narrative inquiry is to allow people to tell their stories, it is the researcher however who must apply the sociological imagination while analyzing the data and discovering patterns within it.

Moreover, as I have already stated, my personal experience as a social worker who served youth in foster care was a motivating factor in my desire to study graduates of the foster care systems and their attachment related experiences. Because many of my foster care clients struggled with forming successful, secure attachments to what were often very healthy, appropriate and nurturing foster families; my own personal bias before beginning this project was that even the most loving foster families cannot fix the emotional damage that is often experienced in the birth parent home. Also, I recognize that most of the participants are young and therefore still establishing their attitudes about romantic relationships. In addition, it’s important to recognize the limitations of interview methods and that interview questions have the potential to ignite participants to think about their lives in ways that they might not if they were not being asked such specific questions about their lives. Therefore, it is important to recognize the limitation that qualitative methods can bring to research studies.

Lastly, due to the nature of this study I had to gather my participants using purposive sampling methods. Additionally, it is important to recognize that the youth who participated
in this study are a minority as they represent what are unfortunately rare success stories for graduates of the foster care system.
METHODS

This project examines the attachment experience among young adults raised in foster care/adoptive care through a narrative inquiry approach. My decision to use narrative inquiry came from my desire to connect the biographies of my participants’ stories to the society we live in, which is the essence of narrative inquiry. Using narrative inquiry has allowed me to focus on each participant’s unique life and turning points. Narrative inquiry has allowed me to focus on each participant’s lives as stories. “In general, narrative is about temporal and logical order, about establishing continuity between the past, present, and as yet unrealized future, about transforming human experience into meaning” (Ochs and Capps, 2001, p. 2).

Throughout the narratives participants recount their stories of life with their birth parents, life in foster care, and life after foster care. From participants’ stories we learn how family disruption has impacted them and shaped each phase of their lives in foster/adoptive care and in romantic relationships.

Kristen Esterberg, author of Qualitative Methods in Social Research (2002) defines narrative analysis by saying that, “The story is what happened, and the narrative is the telling of it. We can think of a narrative as a kind of story told by someone (a ‘narrator’) with a beginning, middle and an end” (p.182). Using narrative inquiry as a methodology has allowed me to provide my participants with an active voice and give power, recognition, and life to their stories. No different than other groups and individuals who live through oppression and experience being disenfranchised, youth in foster care often experience oppression and feelings of invisibility. Therefore, I believed it even more important to provide my participants with an active voice. All of them, at one point in their lives have been structurally and individually oppressed through their inability to control what happened
to them, where and with whom they lived, and the circumstances that affected their identities and life chances. As a result, I believe that narrative inquiry as a methodology provided my participants with a sense that they are experts of their life experiences and the foster care system. In turn, I wanted the participants to be inspired through their reflexive process of sharing their story, and narrative inquiry was the methodology that gave me the most freedom to give my participants the power and recognition that their experiences and strength deserve.

In defining narrative inquiry, Leslie Bloom (1998) says:

It’s a strand of qualitative research, focuses on the “self” for data collection and data analysis. There are three central theoretical goals that structure the narrative research approach. First, narrative research is concerned with using individual lives as the primary source of data. Second, it is concerned with using narratives of the “self” as a location from which the researcher can generate social critique and advocacy. Third, narrative research is concerned with deconstructing the “self” as a humanist conception, allowing for non-unitary conceptions of the self. (p. 310)

Bloom reminds us that “the task of the narrative researcher, then, is to make sense of the telling rather than the tale. This is done both by recording and interpreting how an individual has lived and made meaning about her life...” (1998, p. 311). As you will see in the narratives and findings section, each participant’s story is told not by me as the researcher, but by the participants themselves. My role as researcher has been to uncover themes that emerged from the data, which I present in the analysis section. Through the narrative inquiry approach, we will see how the participants’ attitudes towards themselves and attachment were constructed during their interactions and experiences with their birth parents and foster families. Even further, we will examine how the participants’ experiences and earliest memories of attachment impact their relationships with romantic partners later in life.
This is a basic interpretive qualitative study utilizing semi-informal, in-depth interviewing for data collection. Thematic data analysis was used to analyze interview transcripts and to uncover themes and categories among participant responses. This study is best defined by its narrative analysis qualities. In Qualitative Research in Practice, author Sharan Merriam (2002) says “The key to this type of qualitative research is the use of stories as data, and more specifically, first-person accounts of experience told in story form. Narrative analysis typically takes the perspective of the teller, rather than that of the society” (p. 10).

Lastly, in an effort to secure validity among the transcripts and to be sure that I interpreted their stories correctly, I emailed and phoned participants when concerns or questions arose.
Due to the nature of this qualitative project and its use of narrative inquiry, this section provides a glimpse into the lives and experiences of each participant. The following narratives were gathered during the interviews and thus represent the stories that were told to me. Throughout the narratives section, I will interject my voice, but only to comment on the demeanor of my participants during the interviews. Through each story you will learn: (1) the age of the participant when they entered foster care; (2) why they entered; (3) what their relationship was like with their birth parents; (4) how each participant defines attachment; (5) what each participant’s relationship was like with their foster parents; and (6) what life has been like since exiting foster care—socially, professionally, and in particular, romantically. There is much that I did not have the time or space in this paper to discuss. Therefore, I chose to include the stories that were most relevant to understanding the attachment process and the stages of attachment in the lives of the participants. Nevertheless, in an effort to give you the most honest depiction of the real-life challenges my participants faced during family disruptions and in foster care, the narratives that follow are a melting pot of stories.

In the subsequent results section, I will synthesize my findings retrieved from the narratives.

*Heather*

Heather has an insecure attachment to her birth parents, a secure attachment to her adoptive parents and has an insecure attachment to her husband. Heather is a twenty-year-old, African-American woman and the proud mother of two small babies, both under two years old and only fourteen months apart. Heather’s husband of three years has been in basic training camp with the U.S. Marines and therefore has been gone from the home since August. Heather is very unsure and rather aloof concerning whether or not her marriage will
last. As of late October, Heather looks exhausted and still has to wait until December to
rejoin with her husband. In addition to being a full-time mother and a part-time volunteer
with the Elevate to Inspire program, she is also a full-time undergraduate student at a state
university in Iowa. When Heather graduates from her child development program in
December, she will be the first person from her birth family to receive a college degree. Her
bright smile reflects her pride in this accomplishment. Heather has a lot of reasons to be
proud and she knows it, but is humble. My first impression of Heather is that she is
articulate, well-spoken, intelligent, and strong-willed. Unless revealed in conversation, you
would never know that Heather entered the foster care system at the age of twelve and lived
in a hand full of foster homes, shelters and residential facilities before having the courage to
petition her town church for an adoptive Christian family. You can call it God’s will, luck, or
a simple twist of fate, but at the age of twelve Heather and her sister were adopted by a multi-
racial Christian family.

When I asked Heather why she entered foster care, this is what she shared with me:

Because my mom hit my sister with a belt and left some marks on her one day and so
I took my sister with me and we ran away. We got picked up and after that we got put
into foster care, and my mom voluntarily consented to us being in foster care and that
was the first time I was in foster care. Well, I was in foster homes for about two
months and then she took me out. I had to go to the doctor and she couldn’t come in
the room and she was very mad. I was getting an exam and didn’t want anyone in the
room and she was very mad about this. She said that foster care was supposed to be
punishment and they [the foster home] had bought me new clothes because all of my
clothes had holes in them because of rats and roaches ate through them while I was at
home so I ended up—she took me out of care probably within six months and me and
my sister were removed from my mom’s care because she was still doing drugs and having wild parties.

Heather’s birth mother went on to lose her parental rights due to substance abuse. Like most sibling groups in foster care, Heather was separated from her younger sister, which she says was because of poor behavior. As a result, Heather was placed in a group care facility where she went months without seeing her younger sister. Upon her discharge from the group care facility, Heather was placed in a separate foster home from her sister. Heather carefully articulated the pain of this experience, which she says was the worst experience of being in foster care, saying:

I needed her there because I had been parenting her since I was little, so just being separated from her—and probably I was separated for eight or nine months in a different foster home where I didn’t see her at all. I didn’t have any visitations or any contact with her and that was terrible.

When I acknowledged the tragedy of this experience by saying, “That must have been very upsetting for you,” Heather quickly responded with, “Yeah it was terrible, and I was probably exhibiting behaviors and they couldn’t figure out what was going on, but if I’m with my birth sister all the time and then I don’t see her anymore, that’s a big deal.”

Heather was more interested in talking about her experience with her adoptive foster care family as opposed to life with her birth mom and various foster homes. Heather’s body language and quick answers to questions directed at these experiences suggested to me that Heather did not want to talk about life with her birth mom. A researcher must respect each participant’s feelings, even if it means not getting the information one is hoping for. My priority is for my participants to feel as comfortable as possible. If they want to tell me about
something then they will talk about it openly and honestly.

As troubling as many of Heather’s experiences have been, she does not want people to feel sorry for her. Instead, Heather has chosen to spend what little free time she has volunteering for Elevate to Inspire in an effort to reach out to youth in foster care and to help train human services workers to better understand the elusive foster care experience. Heather regularly attends congressional meetings and hearings to speak up for what she knows to be the foster care experience. In spite of all that Heather has been through, she still aspires to help others and would like to provide counseling to teens in foster care someday.

Felicia

Felicia has an insecure attachment to her birth mother, a secure attachment to her foster mom and an insecure attachment style regarding romantic relationships. Felicia is a nineteen-year-old African-American woman. She is poised, well-spoken, and has a serious demeanor. While most fourteen year olds are learning to drive, engaging in sleepovers with friends, watching television, and learning about who they are, Felicia entered an independent living program.

“I was the youngest person to enter the independent living program,” said Felicia. In talking about her experience she says the following:

It was hard at first. I was scared. I had my cousins and everyone come over. I was scared to be there by myself. It was a big apartment and I thought all these people were going to come after me, but I had my fun times too and it was good. I learned a lot of responsibilities and I’m mature because I lived by myself at that age and I think without that program I wouldn’t be as responsible as I am now.

Instead of being upset at the way in which Felicia was forced to grow up, she chooses to see the positive attributes of her independent living experience.
Because Felicia’s birth mom was on drugs for most of Felicia’s life, Felicia always had to assume responsibility for herself and therefore never really got to experience the carefree days of being a child. In fact, Felicia never attended ninth grade because she had to care for her younger brother. When I asked Felicia why she entered foster care, this is what she said:

I was taking care of my brother and my mom’s drug use. Um when I was fourteen or maybe a little bit before I turned fourteen I entered foster care. Ever since I know, my mom’s been on drugs—since she was like seventeen—and she had my little brother and I was the oldest and I took care of him, so he was basically like my baby. And then someone found out and called DHS and me and him both went into the foster care system. First we were put together and then we got separated and then I got put into an independent living program.

Often left without food and money, Felicia said, “I don’t know what I would have done if my aunt wouldn’t have lived next door.” Felicia plans to start beauty school soon with hopes of being a hairstylist. She is currently working full-time in addition to volunteering with Elevate to Inspire.

I would also like to mention that Felicia has started a ‘hair kit’ program for African-American children in Iowa’s foster homes. Although Felicia never had a foster family that couldn’t help her with her hair, she has heard the stories of young African-American youth in foster care whose foster parents did not know how to manage and fix their hair. Concerned about this, Felicia used her creative skills and intellect to create an informational packet regarding the ways in which to care for and fix African-American children’s hair. Felicia’s hair care kit has been received by Polk County’s Department of Human Services and is given to all foster parents who can benefit and learn from the hair care kit. Recently, Felicia has
told me that other states are inquiring about the hair care kit and wanting to purchase the rights to use the packet.

*Scarlett*

Scarlett has an insecure attachment style to her father, a secure attachment to her foster mother and a secure attachment style to her fiancé. Scarlett is a nineteen-year-old Caucasian woman. She is a bright-eyed young woman whose smile never faded away during the course of the interview, despite the at-times grim subject matter. Before the interview began, Scarlett made sure to introduce me to her fiancé, who had accompanied her to the interview site. It is evident that Scarlett is very proud of this relationship. She made sure to show me her gorgeous one-carat solitaire diamond engagement ring and told me that her fiancé is going to upgrade it to a bigger and clearer diamond.

I met Scarlett while I was an assistant teacher for a sociology course at a state college in Iowa. I had just given a study session to a group of undergraduate students when suddenly to my surprise they began asking me about my research interests related to my thesis. Flattered that the students were interested, I began speaking with them candidly and colorfully about my research interests and passions involving children’s rights. Scarlett is not a member of Elevate to Inspire.

The students were very interested and respectful, and they believed in my research project—which was very encouraging, especially since my project was barely off the ground. After class, I was approached by Scarlett, who was eager to tell me that she had spent a good portion of her upbringing in foster and residential care and that she would like to be a part of my study. I was thrilled at the opportunity to interview her and took careful measures to make sure that I would not be grading her work as she was a student in a class for which I was a teacher’s assistant.
A fact that separates Scarlett from the rest of the participants is that her birth mother died when she was only two years old. Scarlett’s memory of her mother is very lucid, but she remembers far too well the ups and downs of her life while in the care of her father (up until she was twelve years old) prior to being placed with a custodial aunt and uncle. When I asked Scarlett why she initially entered foster care, she shared the following with me:

‘Cause my dad beat me. I don’t know if you want the whole story as to how it started, but there was a big fight one night and the police were called and I was taken out of the home that night. From there, my family—my grandma—took me in and later on my aunt and uncle. And I had told them before I was in their home that my dad beat me and that my dad did this to me and they wouldn’t believe me and so at this point they finally kind of up woke up and were like “Wow, we need to take her out.”

In addition to being physically abused, Scarlett told me that “there are reports of sexual abuse, but I don’t remember any of it.” Scarlett describes her father as a ‘druggie’ and as someone that she cannot trust. When Scarlett was allowed contact with her father at the age of eighteen, there was a shift in their rocky relationship. She described, “He’s more of a friend, though, not really a parental figure.”

Although Scarlett appears very strong, courageous, and collected as we spoke, she reminded me that it has been nothing short of an emotional journey. She recalled the life transition of having to move from the care of her aunt and uncle who she said “couldn’t handle me” to the ‘care’ of the state. At fourteen, Scarlett was declared a child in need of assistance (CINA) and so began a plethora of internal and external emotional issues. While she remained in the care of her aunt and uncle for a short period of time upon becoming a child in need of assistance, it is important to note that, at this point, Scarlett became a ward of the state. Scarlett said:
From that moment on I started cutting myself and went through big depression and they couldn’t handle it so they [aunt and uncle] put me in an outpatient treatment actually, and I was still living at home but was going to outpatient treatment for cutting, and from there I got into a big fight with this guy and got really depressed about it.

Scarlett had gotten into a fight with her best friend’s boyfriend, who had been hitting her friend. Scarlett expressed her dislike of the abuse to the boyfriend and it caused an uproar of a fight, which Scarlett describes as the catalyst that began her cutting behavior. Later on in the interview, Scarlett revealed, “my dad beat my mom ever since I was born. My dad beat my mom and I have memories from other people telling me that and journals of from my mom saying that she was beaten.” After being placed into outpatient hospital care, Scarlett went on to spend two years in shelter care. When I asked Scarlett to talk about her time in shelter care, this is what she shared:

Um, I think it was an awakening for me. I learned that, well, it’s hard to explain. It’s challenging. But, I learned that I couldn’t be in control of everything. I learned to follow rules, you had to follow rules; there was no way out of it. You were on a set schedule. I also saw horrible things. I was also in a lockdown facility near the end. And it was just horrible, people literally killing themselves, literally hanging themselves.

“You saw that kind of thing?” I asked.

“Yeah, my roommate in my lock-down facility hung herself with a cord from the curtains.”

“Did she die?” I asked.

“She did die. Yeah, it was just horrible experiences, but at the same time it helped
shape who I am and it helped change my ways.”

The light at the end of the tunnel for Scarlett is that, after all the time she spent in shelter and residential treatment care, she was finally placed in a foster home with a woman that she says she loves:

We get along great. I call her if I have problems. She’s the first person I call for everything. When I got engaged she was the first person I called. We bonded great. I feel like one of her daughters. She has one biological daughter and one adopted daughter and then she’s had a couple foster kids, and I feel like she’s my mother.

Although Scarlett is engaged to be married, when I asked her who the person she is closest to, she responded that it is her foster mom. When I asked her why she did not say her fiancé, she said:

That’s a different love I think. He’s my best friend. He’d be, I guess the first person I’d call if I had a problem if he wasn’t involved. We live together, I mean we’re best friends and we spend as much time together as we can together.

Scarlett also believes that, from birth, she learned not to trust people and attributes this to the abuse inflicted upon her mother and herself by her father. Scarlett also recognizes that she often gets taken advantage of by friends and telemarketers because she is “too nice” and is always willing to lend money even when she doesn’t have it to give. Scarlett recognizes that she does this because she is afraid to lose friendships. Scarlett reminds me that she felt abandoned by her father, her grandparents, and by her aunt and uncle who could no longer meet her emotional needs. I began to wonder if Scarlett gives herself so selflessly to friendships because she is afraid of the consequences of standing up for herself. Could she
be afraid of being abandoned by her friends?

After graduating from college, Scarlett hopes to work in the criminal justice field with youth. She aspires to be a mother and a good wife, she says, and is interested in taking in foster care children as well. Scarlett works two part-time jobs and is also a full-time college student. Scarlett barely seems overwhelmed by this and seems just grateful to have the opportunity to be in college.

*Julie*

Julie has a secure attachment to her birth mother, a secure attachment to her foster family and a secure attachment to her husband. Julie is a twenty-five-year-old Caucasian woman who commutes nearly two hours to attend Elevate to Inspire meetings twice per month. Julie’s commitment to advocate for the lives of foster care youth has compelled her to open a chapter of Elevate to Inspire in the city she lives in, two hours east of Des Moines. Julie’s strong intellect, articulate use of language, and strong sense of advocacy and concern for children in foster care left a remarkable impression upon me. While each participant’s life is different from the others, Julie’s story is perhaps the most unique in that she was neither neglected nor abused by her birth mother or birth parents. Julie entered the foster care system because her birth mother suffers from mental retardation and cerebral palsy and therefore could not meet Julie’s needs. Because Julie’s birth mother functions at the level equivalent to a five or six year old, she was unable to care for Julie. Julie spoke candidly about entering foster care, saying:

> When her mother [Julie’s grandmother] passed away—her mother was the matriarch of the family—and so when she died the whole family collapsed and so my mom went to live in a facility for people with disabilities and I moved to kinship care for about a year and a half with one of my mom’s sisters. Her
sister was a single mom with three kids and she was working really hard just to survive. She wasn’t getting any help from the state. So I went into foster care. Some people thought that my mom would learn parenting skills and I would live with her. Some people thought my aunt would be stable enough eventually and I could move in with her but my social worker thought I’d get adopted. I kind of always knew I would age out of foster care and that is what I learned. But I think I had to fight really hard to get that. I spent a total of ten years in the system before I aged out um my mom’s parental rights were terminated when I was eleven and that is not something I wanted.

Julie describes her relationship with her mom as follows:

I’ve always been the parent and she the child just because I’m a fairly intelligent person and resourceful. Mom is always more than happy to let me lead and she’ll follow along with whatever I say so um she’s really great. She never abused me or anything it’s just that she didn’t have the skills to care of herself let alone a child. I don’t really talk to anyone else in my birth family because I’m still pretty angry about the way they just kind of abandoned my mom.

To date, Julie only has contact with her birth mom. With a smile on her face, Julie tells me that she visits her mother once a month:

She lives four hours away and so I drive once a month to see her. She’s very important to me, because you know I’m all she has and really the only person in my life who’s known me since I was born is my mom and no one else comes close to that. The next person who comes close to that is my social worker and she didn’t come along ’til I was seven.
Julie officially entered foster care when she was eight, and to say it was an uphill battle that young Julie had to fight from that point on is an understatement. Julie had to advocate for her place in this world, for an appropriate family, and that was not always what the cards handed her.

Julie described her second foster mother as “emotionally abusive to me and so I didn’t want to be around her and so I would make up excuses to not be around her.” Julie recalls the luck of having a friend who she was very close with, whose family essentially took her in. Julie ate most of her meals and spent most holidays and weekends with her friend’s family. Julie recalled one startling incident regarding her foster mother as follows:

She had a metal spoon that had holes in it like the kind you would use for peas and, um, the boys who were like ten had gone into town which was like a quarter mile away and so they walked into town to go to the library and on their way back home their friends who said “Hey can you come over and play?” and so they went in their house to call and see if the could stay and play and she said, “no you need to come home.” Well, for me that seems like they handled it but when they got home she beat them both with the metal spoon and they had splotches where she had hit them. It was bruised where the metal hit and then you could see the holes where there was no metal; it was just like polka dotted bruises.

Julie said that she was afraid to report it and was asked by her foster siblings, who had actually been adopted by the foster mom, if what had happened to them was abuse. Julie told the boys that it didn’t matter what she thought and asked them what they thought:

The boy said, “Well I got bruises on me and well if bruises stay for more than 24 hours then people think that’s abuse and I said, “Do you think that’s abuse? And he said, “Yeah.” I said well then you need to tell the school nurse because I knew a
school nurse was a mandatory reporter. So he told the school nurse but by then another day had passed and then another day or two had passed and then by the time DHS got out there the kids were too scared to say anything the bruises were gone and my foster mom actually put me in respite care because she found out that I told her son he should report it to the school nurse.

The events that followed this incident don’t make sense to Julie or myself. Although Julie had not been adopted by her foster mother, the state proceeded with reunification services in an effort to save the placement. Julie explained the situation as follows:

I still don’t understand why the state wanted to do these type of services, but they wanted to use, like, family reunification services as if she was my birth mom, like, I don’t remember what the technical name was, but they actually brought someone in to get me out of respite and back into her home and I didn’t want to go.

Despite Julie’s wishes, she ended up going back to the foster placement where she did not want to live and where she felt she was mistreated. “I was kind of made to feel like I had to go back and I was told that things would be better, but they weren’t.” Julie continued:

She finally threatened on my mom’s birthday that she wasn’t going to take me to see her as punishment. She was also spreading a rumor around town that I was having sex with her forty-year-old cousin and I prided myself on the fact that I was still a virgin and was waiting for marriage so I was very offended as far as I was concerned if that was true that she should have reported him as a sexual predator, but she never reported him and instead spread rumors about me around town. Once she basically found out that what she was saying was negligent or that she was a liar she got mad and said she was going to take my visit from me with my mom and because if I don’t see my mom on her birthday then nobody recognizes her birthday and so it was really
important to me and she said that she wasn’t going to take me and so I called my 
social worker and said “get me out of here I am not living here anymore.”

Julie was placed with another family who was as inappropriate as the second family. 
Julie recalls being sexually harassed by her foster sister’s boyfriend and fearing for her safety 
much of the time. Even though her foster family was, like all foster families, given a stipend 
to care for her needs, Julie says, “I had to pay for my own food. I either had to eat at work—I 
worked at fast food and grocery stores—and if I couldn’t do that I had to go buy groceries.’” 
Julie felt that she had to make this placement work, so she endured years of neglect and 
severe emotional abuse. After reaching her boiling point, Julie made her social worker aware 
of the adversity she was confronted with on a daily basis in this home and was removed and 
reunited with her first foster care placement who she lived with for a year before aging out of 
foster care.

The last foster family Julie lived with was actually the very first foster placement she 
had while in foster care. After two years of living with the family, Julie had to leave the 
home as the family was about to welcome their first child. Julie also recalled having some 
normal teen behavioral problems that the foster family did not know how to deal with. Julie 
described her relationship with her first foster family as very attached. She further explained:

I love them very much. We have a lot of work to do in our relationship. You know, 
because they haven’t been in my life for the full 25 years, you know, and they’ve 
probably only been in my life for ten of that, there’s a lot of stuff that, you know, we 
don’t get about each other.

Despite all of the trials and tribulations that Julie was challenged with, she still 
managed to graduate from high school with honors. Additionally, Julie was able to travel 
with her high school’s French club to France, a dream she had hoped to make a reality as a
young French student. Julie diligently worked six days a week for over a year to make this happen. At age twenty-five, Julie has graduated from a state school in Iowa with a bachelor’s degree in journalism and is a staunch advocate for foster care youth nationwide. She has spoken on Capitol Hill and to state and national legislatures regarding her experience in foster care and the concerns that she has with the foster care system.

**Hannah**

Hannah has an insecure attachment to her birth parents, a secure attachment to her foster parents and an insecure attachment style with romantic relationships. Hannah is a twenty-three-year old Caucasian woman who aged out of foster care at eighteen. When asked to tell me about the relationship she had with her birth parents, this is what Hannah said:

They weren’t, I don’t really remember them being around much when I was younger. My mom worked as a dental assistant and my dad, he had odd jobs like construction and stuff like that, but mostly I remember that they weren’t around very much. I spent a lot of time with my younger brother and sister. I think, I mean mostly I took like a parenting role in my family. I took care of my brother and sister and, um, when my parents were around both of them together I was worried that something would happen because my father was abusive and, um, so I kind of liked it better when they weren’t around or together more than when they were. Um, I wasn’t really very close to them. I didn’t really talk with them about what was going on in my life. I don’t think that they were interested. I just didn’t get that feeling. We weren’t that close. We didn’t get a lot of hugs, kisses, stuff like that, um we were poor, we didn’t have a lot of money and things and so we didn’t have a lot of nice things and it just wasn’t a very loving environment.
Throughout the interview, Hannah’s emotions were very high, and she released tears of sadness and hurt on several occasions. Even though years have passed since Hannah has lived in the environment she described above, it was evident that, at the time of the interview, she still wore the emotional scars in her heart. Hannah was about ten when she was removed from her birth parents’ care. When I asked Hannah why she entered foster care, this is what she shared with me:

I don’t know who said anything or why we first had a social worker come in, but we did and then my dad was told that he, well, he must have heard that we were going to get taken away or that something was going to happen and so he took us [Hannah and her siblings] down to grandma’s in Missouri, which he wasn’t supposed to do, taking us across state lines was kidnapping. So we stayed at grandma’s house for a couple of weeks and then they came, there was some social workers and they came and took us out of school and put my Dad in jail. I was in school and they took us to our grandma’s house to get our things, and then they brought us up here [Des Moines area] and they put us into foster homes that we never had contact with before. My older brother got put into a group home and was dropped off there and then my sister and I went to one foster home and then my younger brother went to another foster home so it was, well, we were just kind of thrown into it and we didn’t know what was going to happen, but it was kind of traumatic as you can imagine.

As we have learned from Kools, most children in foster care can expect to have three or more foster care placements. Hannah was lucky enough to have just one foster family during her foster care experience. Hannah, her younger sister, and later on her younger brother all lived with the same foster family together. Hannah’s older brother was never
afforded the opportunity to have a foster family and spent his life in and out of shelter care. It is evident that this is still an emotional subject for Hannah.

Although Hannah chose not to be adopted, despite the fact that her younger siblings were adopted, her foster family remains a big part of her life today. Hannah defends her choice to not be adopted by saying, “They would have adopted me, but, um, like for college, going to college there’s a lot more aid for kids who age out of foster care as opposed to being adopted so that’s the only reason we did that.”

Hannah found refuge in school. She elaborates on her desire to succeed in school by saying:

You know I really liked school, I kept my grades up and that was the only thing I kind of leaned on when I was younger. My main reason for doing well in school was because I thought my parents would kind of take focus off their problems and maybe for a couple minutes they would notice me and like give me praise or something, but it was always short lived and I think they were proud of me, but they never really showed it, but I don’t know. When we got put into foster care we got kind of closer with my mom a little bit, but then she died so it was kind of like harder.

Hannah graduated as valedictorian of her high school, an accomplishment that Hannah is very humble about yet proud of. Today Hannah holds a bachelor’s degree in biochemistry from a private liberal arts institution where she also graduated with academic honors. She is currently working in the lab of a pharmaceutical company. She would like to get involved with genetic research and imagines that she will end up back in school to get a master’s or even a doctorate degree. She dreams of working for the Center of Disease Control or the National Institute of Health conducting genetic research and optimistically sees herself in five years working at one of these government companies.
Like most of my research participants who recalled being the eldest of their siblings, Hannah assumed a parenting responsibility over her siblings. Such responsibilities included: cooking, cleaning, bathing, and helping siblings with school work. Hannah is not angry that her parentified youth took years away from her own childhood; rather, she is proud because she knows how important it is for children to have someone to look up to and is proud to have been able to be a positive, supportive person for her younger siblings. Hannah, therefore, had made it her goal and mission to be a leader by example in her life so that her younger siblings would have someone to look up to. Her face exuded sadness and worry throughout most of the interview, but was quickly filled with a big smile when she spoke about how proud she is of her siblings who she believes are following in footsteps that she has laid out for them to follow. Both of Hannah’s biological parents are deceased.

Sam

Sam has a secure attachment with his birth parents, a secure attachment with his adoptive parents and a secure attachment style with his romantic relationships. Sam is a nineteen-year-old Caucasian man who is currently a sophomore at a central Iowa private liberal arts college. He is studying to be an athletic trainer/coach and also plays on the school’s football team. It is also worth noting that Sam is the younger brother of Hannah. I was immediately struck by Sam’s contagious smile and his soft-spoken demeanor. When I asked Sam of his upbringing, it was apparent that he had a much different experience than his older sister. Sam said that his father called him “his little boy, his favorite son,” which is a different experience than his older sister had who earlier expressed feeling starved for attention and reassurance from her parents. Sam did identify with his sister when he spoke of the relationship with his parents, by saying:
There wasn’t much quality time spent together, I guess you could say. They drank a lot, there was a little drug abuse and they smoked a lot and we spent a lot of our time outside doing miscellaneous things. Usually when they were at work we’d be at home, doing our own thing, because my dad had random jobs. I mean when they were there and they were sober and everything it was jolly good you know, it was a good family, but just the whole uncertainty.

As the saying goes, children living under the same roof with the same parents can each individually have a different upbringing as reflective of their relationship with their parents, personalities, and perceptions about how things are or ought to be. This theory definitely holds true for Sam, as he and his sister shared with me very different experiences regarding their feelings about their upbringing. Sam did not bear the burden or responsibility of having to care for his younger siblings but was instead taken care of by Hannah, which helps explain a major part of why Sam’s experience was different. Additionally, Sam was younger and his perception of how things were with his family is different as a result. Sam does recognize that there was a lot of uncertainty growing up and was quick to recognize this uncertainty as unhealthy and foreign compared to what a child should have to go through.

When I asked him to elaborate on the uncertainty that he felt as a child, he added the following:

Just like not knowing if at night they [parents] were going to fight, it was an uncomfortable situation to be in when they were fighting, like even when they drank. If they drank then they were just belligerent and they yelled at each other and uncertainty, not knowing if there was going to be food on the table or if we had to cook, stuff like that.
When I asked Sam to talk to me about why he believed he ended up in foster care, this is what he said:

I grew up in an abusive family, alcohol, and drugs. My mom went to live in a shelter and wanted custody of us, we moved to Missouri with my dad to live with my grandma and that’s when they [DHS and police] came and got us. My sisters went to a house in Greenville and I proceeded to go to two different placements before I moved in with them. *My brother went straight to a shelter* which is kind of disappointing because he didn’t get the opportunity that we did.

Sam was eight years old when he entered foster care. Sam describes his attitude of entering foster care by saying, “I kind of kept to myself. I didn’t want to get attached, but I did.” The first foster parents Sam had were ironically best friends with his sister’s foster family, later his adopted parents. Sam recalls his first foster family being great because he got to see his sisters a lot. For reasons that Sam did not know he had to move from this respective foster home. Sam lived with two families. At one time he lived with an elderly woman about whom he said the following:

I didn’t know if I would be there long enough to keep a healthy friendship with anybody and it hurt from house to house because I grew fond of the families and it seemed like they knew I was going to be there a short while, but they didn’t tell me so it was kind of, I don’t know how to say it, upsetting.

Sam went on to say:

It was kind of hard to move to Lemark because I was the only kid there and with the other house [foster home] there was like four other kids and then I moved to a house where it was just me and her and like she always told me I had to eat everything, like all my vegetables and all the stuff I hated and I
always had to play outside and I got friendships but I mean I knew I was going to leave again, because they told me I was going to go live back with my sisters. Sam said that the best experience about having been in foster care was “the opportunity I got living with Jackie [his adoptive mom]. There would have been no chance for me to do the things I did if I would have lived with my biological parents.” When I asked him to elaborate, he said, “Every sport. I played four sports and I was in band.” Sam is very proud of this fact. Sam’s involvement in athletics and band represents how ambitious, optimistic and determined he is, and these qualities shine through in just a few minutes of speaking with him. Sam has lived with his adoptive foster parents since the age of ten and describes the relationship he has with his adoptive parents as a “really tight relationship.” Sam’s story is a shining example of how foster care can positively impact a child’s life.

**Neila**

Neila has an insecure attachment style to her birth parents, a secure attachment with her foster parents and an insecure attachment style in romantic relationships. Neila is eighteen years old and eager to graduate from high school this spring. Neila entered the foster care system permanently at the age of nine. She is pleased to tell me that she will be starting college in the fall to become an accountant. Neila has a very sweet demeanor and is quick to become emotional while speaking about her relationship with her birth parents. When I asked her to tell me about this relationship, she said:

With my mom it went off and on we’d have our good days and bad days, we’re getting to be really close because we share almost everything and my dad ah, I don’t
really have a relationship with him because he did drugs and stuff, I don’t really have a relationship with him right now.

Neila’s definition of attachment, which follows, was particularly concerning:

I would define that as you try to get close to people, but you don’t because you have feelings of hurt and people have left you and so when you get close to someone you want to push them away so that’s basically my definition of attachment.

Unsure whether Neila understood my question, I asked, “This is how you would define attachment with your birth parents?”

“Yes,” she replied.

When I asked Neila to tell me about her initial experience in foster care this is what she shared I was very shy. I didn’t want to talk to them; I didn’t want to eat anything. They took me to the hospital and the doctor said I was really skinny and underweight for my age and they took me to the doctor and they gave me some medications to get some meat on my bones. But it was fun, we went to church and I think I liked that the most, going to church.

Neila recognized that she came from an abusive family and revealed to me that one of her biggest challenges in being in foster care was getting along with her brother. She said

He’d hit me or I’d hit him and then we’d hit each other and one time we playing basketball in the home and I hit him in the back with a nerf ball. I smacked him on the back because he wouldn’t give me the ball and they [foster parents] covered me up in a blanket and told me that I had to sit there all day. It wasn’t a very good relationship.

Neila spent the next five years in shelters and residential treatment centers separated from her sibling, who was in foster care. All in all, Neila counted that she has been in sixteen or seventeen placements, including shelter, residential placements, and foster homes. As
further analysis will demonstrate, Neila has a lot of issues in trusting people which may stem from a rocky relationship with her birth parents. While this is a very high number, it is not impossible that a foster care child would have this many foster placements. It may also be the case that Neila is exaggerating the number of foster placements she had. More importantly however, Neila simply wants me to know that she has had a lot of foster placements.

When I asked Neila what her best experience in foster care, she gave the following response:

I’d have to say Orchard Place [residential treatment center], because I had a lot of friends there. I was liked by everyone. No one hated me or at least no one did then. I had mentors, I was close with my therapist and I was close with the staff and sometimes I would still have downfalls and they were still there and I just couldn’t believe it, because everyone else had given up on me.

At this point in the interview, Neila started to cry. When I asked Neila to recall her worst experience in foster care, she shared the following:

About three years ago, I’ve been here for two, but three years ago, I was in Lewiston in a foster family and their son was making sexual comments towards me and they believed him because he said that he didn’t say anything like that, but he said that he wanted to have sex with me, but I told him, “I can’t do that because I don’t feel comfortable” and I told him I wouldn’t do that because “You’re like a brother,” and so I told the foster dad and they’re like “We got to get her out of our house, she’s doing all this bad stuff and making up lies, so that was the worst experience, just not being believed. As important as it is to listen to children, it is equally important to believe them, to show them that they are being heard.
Neila is very happy in her current foster home and recognizes that she is most close with her foster mom. For Neila, there is a light at the end of the journey. She could not be happier with her foster family. About her current foster family she says:

I was really happy that they had found me a family that I could be with because I wanted a family. It’s something I wanted and needed and yeah it wasn’t great at times, but I mean I went through it and having Marcia [foster mom] there, I could talk to her about boys that I had crushes on and being the oldest one here I think I am a role model for them because I do what I am supposed to do and I do some things wrong, but I try not to make mistakes and I try to learn from my mistakes if I make them.

Neila is also actively involved in Elevate to Inspire and has felt a strong sense of confidence emerge within her since becoming a member.

Crystal

Crystal has an insecure attachment style to her mother, a secure attachment style to her foster parents and an insecure attachment style in romantic relationships. Crystal is an eighteen-year-old African-American woman who is excited about graduating from high school this spring. Crystal is very soft-spoken, yet maintains a very serious, determined demeanor. Crystal’s dream is to be kindergarten teacher. Crystal shared the following with me about her desires to become a teacher:

I love kids. I don’t want to be like my mom and not go to college. I want to be somebody and not end up where I have to go and struggle just to pay the rent and steal clothes just to pay the rent and I don’t want to sleep with guys so that I can get my kids something to eat.

When asked what her relationship was like with her birth family, she said “Well, me and my father really didn’t have a relationship because he wasn’t ever in the picture, but I’d
seen him once in a while. With my mom, she was always out with her boyfriends and going
to parties, so I mean I really didn’t have a mother-daughter relationship, I just had my sisters
and my god-mom.”

Crystal’s father and mother were not around very much in her life on an emotional or
physical level. Even further, I get the sense that Crystal feels as though her mother chose her
boyfriends over her daughter. When I asked Crystal to describe the relationship she had with
her birth mother she said with sad, tearful eyes:

I mean it’s pretty sad. She didn’t treat us well, like she would pick her
boyfriends over us. She never sat down and helped me with my homework or
none of that stuff, she was always out stealing and doing bad stuff, stealing to
get money for us, so we really didn’t have a relationship. Although it has been
eight years since Crystal has lived with her birth mother and been in her ‘care,’
it is evident through Crystal’s crackling voice and watery eyes that the pain of
feeling denied by her birth mother is still very real within her.

When asked why she entered foster care, Crystal had this to say:

Well my mom, she was stealing and she got caught. Well at first she was in
and out of jail and we were living with our relatives for a while and the last
time she went to jail we were with my grandma. A week before she went to
jail she told us that she wasn’t able to take care of us and that we were going
to stay with our grandma for a while so she could get back on her feet and that
week her and her boyfriend went to jail and so she wasn’t able to get us back.
So at that time we were living with our grandma and it just didn’t work out.
She was doing drugs and stuff.
At this time, Crystal and her sisters went to what she called a “temporary foster home for six months.” After six months, Crystal was separated from her two sisters and was sent to a foster family about whom she says:

We didn’t get along at all. We argued all the time. We argued over stupid stuff.

It’s not really that stupid. She would want me to clean my room and I didn’t want to and so I argued all that stuff and I got sent to a youth shelter a couple of times and the last time I decided I wanted to stay there and lived there for three months and then I was off to the group home.

Crystal spent the next two years of her life at a group home in central Iowa. Crystal initially described this experience as follows:

It was okay. I don’t get along with girls that much so it was a challenge.

Some of the girls I did get along with, but then they got angry and they took it out on other people there besides talking about their feelings.

Curious, I asked Crystal why she thinks she does not get along with girls very well and where she believes this comes from. This is what she had to say:

Probably my mom. She was with all her boyfriends and then the only girl she hung out with was probably my aunt and our cousins. My mom and aunt always got into arguments and I’ve seen my mom in plenty of fights with girls so it’s just that there’s no point in getting in fights, especially over guys.

Later on, Crystal came to recognize that her stay in the group care was by and large a positive experience. For the first time in Crystal’s life, she had people with whom she could share her thoughts and feelings—people who were there for her. When asked to elaborate on how this experience positively impacted her life, Crystal said:

I don’t know, it was just probably being able to express my feelings a lot because
when I was with my mom I kept everything inside. I never told anybody nothing and then we had all those group sessions and therapy sessions; I got to express myself to everybody and tell people how I felt. I got to learn how to control my anger and all of my issues.

When asked what that meant to be able to open up, Crystal’s eyes filled with tears as she said, “I felt like people cared, like I didn’t have to keep it in anymore.”

When I asked Crystal, “How did you feel when you were with your birth mom?” she said, “I was always quiet and shy.” When asked why, she replied with the following explanation:

Because I felt like, because my mom already had problems, I didn’t feel like giving her more problems than she already had. Like my sister hitting me and the abuse and all that and I just didn’t think she would care all that much.

At age eleven, Crystal’s birth mom’s rights were terminated. After two years in the group home, a family came forth for Crystal. So at age fifteen, Crystal moved in with the Smiths, her current foster placement. Although Crystal has officially aged out of the foster care system, she will live with her foster family until she moves out this summer to attend a local community college. Crystal described her initial experience of moving in with the Smiths by saying:

When I first moved in there I was so happy. I was really happy because I got to meet my foster mom and she was so nice. I got to go to church and I loved singing in the choir and then I had two [foster] sisters and I knew one from Y camp, so I already knew her and she also had a husband. And I just wanted to be in a family rather than be at the group home with all these girls that I don’t know and I can’t get anything accomplished.
Today, Crystal says that she is happy. “I’m not stressed and depressed all day. I’m trying to graduate high school and I’m doing okay. So I’m just happy.” After graduation, Crystal will attend a local community college where she will obtain her associate’s degree. Upon completion, she will transfer to a state university where she will then pursue her bachelor’s degree in early childhood education so she can make her dream of being a kindergarten teacher a reality.

Crystal says that her involvement in Elevate to Inspire “has meant a lot.” She also added

Like, I was a person that always sat back and didn’t want to tell anyone my story and I never wanted to talk and speak in front of anybody like that and, um, now that I’m in Elevate to Inspire, I feel like I’m part of the group and people respect me more for what I say and do.

Ben

Ben has a secure attachment style to his birth mother, but a secure attachment style to his birth father, a secure attachment style to his adoptive mom and has never participated in a romantic relationship. He is an eighteen-year-old Caucasian man who is eager to graduate from high school this spring. Ben’s positive attitude and smile are salient features of his personality, in spite of recognized learning difficulties; Ben does not let them get in his way. Ben is quick to tell me that he can play several instruments such as the violin, guitar, and bass and informs me that they are all very similar to each other. He has taught himself to play each instrument and is currently trying to form a rock band. Ben’s gentle demeanor is very warm. Before we started the interview, Ben let me know right away that he is very open and does not have anything to hide. I thanked him for his openness.
Ben and his younger sister are currently living with his paternal aunt, who adopted both him and his sister. Ben was fifteen when he went to live with his aunt and sixteen when he was adopted. Ben is very fortunate that his aunt has been present in his and his sister’s lives. Although Ben has never spent a day in foster care with a non-relative placement, Ben’s life has been nothing short of heartbreaking. When I asked Ben to tell me what his relationship with his birth parents was like, this is what he had to say:

At first it was kind of good with my mom and stuff. And then I think it was around 2000 I went to live with my dad, and my mom kind of bad-mouthed our dad, and we went to live with him for a long time. After a while I learned that my dad was the greatest man ever for a dad. I loved him so much and then after growing up a few years I learned that my mom is a spiteful, mean person and she had an abusive and druggy boyfriend that did bad things and he kept us up one night the whole night just because he couldn’t control his temper. After that, we had to have supervised visitations with her. We had to have visits in an office because her house was unsafe, and then they moved it back in the house, and then someone came into the picture from DHS [Department of Human Services] and said “Absolutely not. Visits cannot happen in the house,” and so the visits continued to be at the office and then after a while no more. They terminated her rights from parenting. And after my dad passed away, almost two years ago now, we got adopted by our aunt.

On several occasions Ben expressed to me how great his father was. At one point, Ben’s eyes filled up with tears as he spoken so lovingly about his father. Intrigued to learn more about this relationship, I asked Ben to tell me what life was like with his father while in his care. This is what Ben shared with me:
It was great. I loved it. I watched him make food and stuff. It was like, when I was fifteen or something and I could cook, I made a meal for him when he came home. I wanted to make a meal for him because he was tired and just wanted to sit down, and there were a couple of times I could tell from his eyes that “Oh Ben, you shouldn’t have made this for me, I already ate.” But he was a good man, he would eat a little bit.

When I asked Ben to tell me about the relationship with his mother this is what he shared.

She made us go down to the farmer’s markets and she tried to teach us that it’s okay to steal or grab a can of pop out of people’s vendors. And she wanted us to go dumpster diving to see if there was any good stuff in there worth saving and that is embarrassing. But it’s cool, I’m an open person. She would put dirt on our faces and have us beg for money from people so that she could have a little bit of extra money. When I asked Ben how this made him feel, he offered:

“That wasn’t a good mother. She should have made better choices in her life than she did instead of throwing it all away. She should have tried to get a good, decent job like other mothers do to support their family”.

Ben is currently deciding whether he would like to have a relationship with his birth mother. In the future, Ben plans to attend a local community college. When I asked Ben what he would like to do in the future, this is what he shared with me:

I’d like to try and see if I can make it out in the remodeling world and see how great I would be doing that. I’m not very sure where my pictures are, but I have some pictures of me building some steps for a house and I made a staircase like,
like [points to a stair case nearby], and I knew what I was doing from my previous year in woodshop class and I know how to match up the wood on the staircase and I did that.

Brandon

Brandon has an insecure attachment with his birth parents, a secure attachment to his foster parents and an insecure attachment style in romantic relationships. Brandon is a twenty-five-year-old Caucasian man who is currently working nights as a security guard. He is the father of two young girls, ages four and five. Brandon’s daughter Lily lives with him full-time and his other daughter Olivia lives with her mother full-time, but has weekly visitation with Brandon. Brandon is currently in family court to obtain full custody of Lily. Brandon argues that Lily’s birth mother, his ex-fiancé, is emotionally and mentally unstable and is therefore unable to appropriately parent Lily. Although Brandon graduated from the foster care system at age eighteen, he is currently living with his foster family and has been for the last year in an effort to save money. Brandon made it clear to me that his foster family is the closest thing to a real family that he has ever known. Brandon’s intense demeanor and attitude were initially so sarcastic that I had to take a step back and acclimate myself to his intensity. Initially, Brandon acted very apprehensive towards me and quite honestly was intimidating. By the middle of the interview, though, I felt at ease and I could tell Brandon was comfortable too, as he was beginning to joke with me. It became clear that I had achieved a rapport with Brandon when he welcomed me to stay and meet his daughter, Lily. When I asked Brandon to tell me about the relationship he had with his birth parents, this is what he grimly said:

Um, my parents’ rights were terminated pretty early.

As far as my father’s side goes, I pretty much want them all to die, preferably painfully. My mother’s side of the family, the same thing. Um, I did end up
meeting up with them again when I was sixteen and, ah, my great-grandmother had died and they were all gathered in Knoxville, and Lynn [foster mom] went down to see what was going on and, I don’t know, establish a semi-cordial meeting. Like, some of them showed up when I graduated high school, but the only member of my biological family that I actually talk to is my sister.

When I asked Brandon why he said that he hoped his parents die a painful death, he provided the following response:

Well I have this interesting family issue where all of my father’s side of the family is genius-level psychopaths and my mom’s side of the family are all genius-level mental cases, it’s interesting, I don’t know. My father was the largest source of abuse and other fun and interesting things [note sarcasm].

Our mother was too checked out to be really aware of what was going on.

“What kind of abuse was going on?” I asked.

“Sexual, emotional, physical—as a matter of fact, I was shot when I was two or three and had a 22 ran straight past my leg.”

Brandon was very candid about telling me that he still suffers from problems today associated with his abusive childhood. When Brandon entered the foster care system at six-and-a-half years old he had enough rage, fear, and sadness within him to ignite a dormant volcano. Why shouldn’t he be enraged? The very people who he was told were supposed to protect him failed to offer him the most minute level of security, protection, and nurturing. Although it would seem that Brandon and his siblings entered foster care due to the abuse inflicted upon them, they actually came under DHS radar for a different reason. Brandon explains his entry into foster care as follows:
It came to the attention of DHS here in Iowa that my brother and I pretty much did whatever the hell we wanted to do. On several occasions we just took off and she [birth mother] would call the cops later on frantically, later that day because she would have no idea where we were. There were several incidents where my brother and I managed to fire a rifle through a duplex wall. There was another accident and there was a girl who wouldn’t stop calling me Bobby so I picked up a wrench and threw it at her and she ended up having to go to the hospital.

“Did you ever tell anyone about the abuse?” After taking a deep breath, Brandon responded, “Yes and no. See apparently, because there were so many weird behaviors, quirks and problems, we were all tested for various forms of abuse and it was all positive and yeah, happy day” [note sarcasm].

At six-and-a-half years old, Brandon and his younger brother went to live with a foster family. Commenting on this experience, he says:

I think I ended up in a foster home to start with and my brother and I were still together and we blew through that, and then we went to another foster home and blew through that, and then there was residential treatment and we terrorized that and then they [DHS] split up my brother and I after the trip down to St. John’s residential treatment center] in Missouri.

Brandon would spend the next three years in and out of foster homes, residential homes, and group homes. All that just assisted in fueling his rage and deepening his distrust for people. Brandon was introduced to the foster family that he calls his parents when he was nine-and-a-half years old. At that time, Brandon was very violent with other foster siblings and therefore couldn’t remain in the home. From there, he went to another foster placement
and spent the next two years there, struggling emotionally and being unable to properly bond with his foster family due to his extreme emotional and psychological issues. From there, Brandon went on to stay with two more foster homes and had two stays at a local hospital for his emotional issues. At age fifteen, Brandon finally returned to the care of Lynn and Glenn, his current foster parents. While Brandon moved out of their home at nineteen, he moved back a couple of months ago, as he is trying to save money to gain custody of his daughter, Lily.

When asked how his foster family has changed his life for the better, Brandon said:

“Well, when I had first moved here from Girard, Iowa, I was about the closest thing to a sociopath you can be without actually being one. The only trait I didn’t share was that I wasn’t harmful to animals.”

“What other kinds of traits did you have that you think would qualify you as a sociopath?” I asked him. This is his response:

Fires, bed-wetting, you know, extremely callous behavior to injury, as a matter of fact even these days I don’t have full emotional range. Now, since my daughters have been born I’ve made a lot of progress on that level, because you can’t interact with a small child if you don’t really have any feelings. Now, I do actually have an emotional range. I don’t have a tendency to attack someone who annoys the hell out of me. Brandon recognized that it had taken him a long time to get to a place where he has an emotional range. The coming passages will reveal more about the consequences that Brandon’s childhood has had on his emotional self.

When I asked Brandon what his hopes are for the future, he said:
I’d like to get out of my job I’m working at now, but it doesn’t seem to be working very well. All my plans are secondary to just paying the bills and to raise Lily and spend as much time with Emily [oldest daughter], so quite honestly, I don’t know.

Jennifer

Jennifer has an insecure attachment to her birth mom, a secure attachment to her adoptive parents and an insecure attachment style with romantic relationships. Jennifer is an eighteen-year-old African-American woman about to graduate from high school this spring. Jennifer has a very open, humorous, and bright personality. Jennifer is an avid creative writer and dreams of publishing her novel someday. She is also vice-president of the Elevate to Inspire group.

When asked what her relationship was like with her birth parents, she said, “Good. I don’t know who my dad is, but I was really, really close with my mom. We spent a lot of time together even though she was sick most of the time.” When I asked her to tell me more about her mother being sick, this is what she shared: “Yeah, um, she was severally depressed, bulimic, and also she had hernias and seizures and, like, we called them ‘black-outs,’ but there were times where she would forget who we were.”

Unlike all the other research participants—apart from Julie whose birth mother suffered from mental retardation—Jennifer was not removed from her mother’s care due to neglect, per se, but rather simply because her mother lacked the ability and the skills to properly take care of Jennifer and her younger siblings. Furthermore, Jennifer was very quick to point out that she had many good memories while living in her mom’s care. “When I was little,” she said, “my mom and me and my two little brothers used to joke around all the time
and clown around and stuff. It was fun. We have a lot of good memories; we were really close.”

Despite Jennifer’s birth mom’s apparent mental illness, Jennifer never believed that she would end up in foster care or that her mother would be unable to parent. When asked why she initially entered foster care, Jennifer said, “Well, this is my second time being in foster care. The first time my mom left us for three days in the apartment with my older brother, and we all got taken away for three years.” When Jennifer and her siblings were left alone in the apartment, she was only five years old, her twin brothers were two, and her older brother—who was left with the burden of responsibility to care for them—was only twelve years old. Jennifer does not remember what happened during these three days; she just knows that they were all taken away and put into foster care for three years, where they were all split up from each other for except the twin boys. Jennifer was quick to point out that “I moved a lot because I was bad.”

“Why do you think you were bad?” I asked.

“I guess because I acted out in school and home and threw temper tantrums, probably because I missed my mom.”

After spending three years in over a hand full of foster homes, Jennifer and her siblings were finally reunited with their birth mom. At that point, Jennifer was eleven years old. While family reunification efforts typically do not last this long, exceptions were apparently made in Jennifer’s family’s case. Perhaps this was because her birth mom suffered from a mental illness, and sometimes courts are more patient and sympathetic in such situations. So at eleven years old, Jennifer was back with her birth mom who still had ongoing mental health issues and suffered from black-outs. Jennifer and her younger siblings
were not with their birth mom very long before they returned to foster care. In elaborating on this experience, Jennifer said:

My mom found out this big old thing that the racist people, the KKK, were coming to Dubuque because she said that someone burnt a cross in front of her friend’s house and she was like “we have to move.” And so we moved from our apartment to this other apartment. We didn’t end up staying there. We didn’t have beds or anything. We just slept together on the floor on this mattress on the floor and, like, we didn’t go to school during that time. But it wasn’t for a long time—probably three weeks or something—and then we ended up going to a homeless shelter and then we stayed there for a while. We ended up getting some Greyhound tickets and going to Ames, but when we got to Ames we didn’t have a place to stay so we ended up in a hotel.

Jennifer revealed to me that her mother was very paranoid at times. After spending a night in a hotel, Jennifer and her siblings and mother ended up living in the basement of a homeless shelter—a shelter which was actually for men. Jennifer made sure that I knew that she did not mind living there and taking the bus to school and back from the homeless shelter. She was just happy to be with her mom and brothers. What led up to Jennifer and her younger brothers being placed in foster care for the second time is quite sad. As Jennifer explained:

My mom ended up leaving us at the neighbor’s house for a couple of days and we found out that she bumped her head and had to go to the hospital, because she would bump her head sometimes and then forget stuff, and I guess she just passed out and bumped her head on things and that’s when had a case worker get involved, and that’s when we ended up going into foster care because my
mom called DHS in the hospital because she was feeling suicidal so she—the
caseworker—puts us into foster care.

Jennifer has been in foster care ever since. Her older brother currently lives with his
father, but Jennifer has no contact with him. Her younger siblings were both adopted by the
same family. Jennifer remains in close contact with her twin brothers today.

When Jennifer was twelve, her birth mom voluntarily consented to terminate her
rights. When I asked Jennifer how this made her feel, she said, “I don’t really feel anything.
It’s just a fact of life.” Jennifer went on to tell me that she received a phone call from her
birth mom telling her that she was going to voluntarily consent to terminate her rights.
Jennifer says that her reaction was “whatever.” When asked if she felt abandoned, she said,
“Yeah because I was expecting her to get us all back together because that was the goal, was
to get us all back together. It was just messed up and we’d been through so much and she
just gave up.”

Jennifer spent the next several years in seven foster homes and two residential
treatment facilities, and she also had two respective hospital stays before being taken in by
the Smiths, her current foster family. She has been with them since the age of twelve. When
I asked Jennifer if she feels part of the family, this is what she said:

Kind of. Um, they don’t do anything wrong. They treat me like part of the
family, but you always think back, like, well my family was really close; we’d
hug and kiss a lot and we always told each other “We love you,” and they’re
just not like that. They’re affectionate, but they’re not as affectionate as my
family was.

Jennifer did tell me that she calls her foster parents “mom” and “dad” and said that
she trusts them and feels very safe there.
All in all, Jennifer says that she has been in thirteen foster homes. In the future, Jennifer hopes to have finished college and be working on her novel that she says is almost finished. Jennifer hopes to be an English teacher someday.

**Rhonda**

Rhonda had an insecure parental attachment, an insecure foster parent attachment and has an insecure attachment style in romantic relationships. Rhonda is a twenty-two-year old Caucasian woman who will graduate this spring from an Iowa state college with a bachelor’s psychology. Rhonda has supported herself through schooling without any familial emotional or financial support. Rhonda has big plans for her life. This summer she intends to go to Washington, D.C. to participate in an internship program. After her internship, she hopes to attend graduate school to become a therapist and work with children who have faced similar adverse situations with their birth families and respective foster care homes. Someday Rhonda would like to live in California. Although I didn’t get the opportunity to have a face to face interview with Rhonda I was able to correspond with her via email and phone. When asked what her relationship with her birth mother and father was like, this is what Rhonda shared with me:

My relationships with my mother and father before entering foster care wasn’t what I would call normal, but I at least looked at my mother as a mother and someone who took care of me. My dad didn’t play too much of a role in my life even though he lived in the same house with us. He was always involved in things of his own interest like: the dogs, his cars, or whatever. He never attended any school functions and never really inquired about how I was. He was also really abusive, mainly emotional to me. He had spanked me pretty hard out of anger before and hit me with a belt before, but mainly he was...
emotionally intimidating and controlling. It didn’t take much to set him off so I was constantly feeling under pressure like I was being watched for the next wrong move I made.

Rhonda found herself in the foster care system at eleven-and-a-half years old.

Rhonda recalled that:

One day, my brother and I must have had an emotional breakdown or something and we got really mad and started destroying the house. I think we had so much anger based on all the crap that had occurred over the past few months and we had no outlet or anyway of releasing our feelings. But, my mom ends up calling one of her friends because she couldn’t control us and her friend ends up calling the police. The police come and take me away to Still Point [hospitalization psychiatric ward]. So I ended up staying there for five nights without any explanation of why I was staying in there for so long and what for.

Rhonda’s experience is not unique. Too often, children who enter the foster care system are treated as though they have done something wrong when in fact it was really their birth parents’ actions that led up to emergency placement. From being hospitalized due to what was believed was an emotional breakdown, Rhonda went on to live with three foster placements and would never go back to live in the care of her birth parents. Although Rhonda spoke very little about this, it was found that Rhonda’s birth parents were unfit to meet the needs of their children, and thus, their parental rights were terminated.

When I asked Rhonda to tell me what her foster care experience was like, she gave the following reply:
The first home I lived in I didn’t get anything explained to me as to why I was there and the woman [foster mom] was in her early seventies so it was a very different experience than what I was used to. She wasn’t very emotionally supportive. She would give me hugs or whatever, but I never grew up giving hugs. My mother never explained to me what a period was, and I had to learn from the neighbor lady, so when I got my period while living with this older woman, she wasn’t sensitive at all. She pretty much told me to throw away my disgusting underwear and didn’t sit down and explain anything. I never got the feeling that she cared about me. She used to say comments to like “You don’t appreciate anything do you?” I’ve never been an unappreciative kid so I didn’t understand what she was talking about. She used to call up my birth mom and complain about me and one day I couldn’t handle that anymore and didn’t feel like I had anywhere else to turn so I just blew up one day while my foster mom was on the phone with my mom. I can’t remember the details about that, but all I know is that I was immediately taken out of that home after living there for seven months and was moved to another home.

Rhonda lived with her second foster care parents for nine months. This is what she shared about this experience:

The foster parents were in their early twenties with two very young children. I quickly found out that they either didn’t know how to parent or simply just didn’t care about the foster kids they brought in. I was very suspicious of them, mainly because they never talked to us, they would sit and talk about my biological parents badly right in front of me, and had ridiculous punishment
practices. For example, when one of my foster sister’s money was stolen, my foster parents punished her too and wouldn’t let her go anywhere until someone confessed to stealing the money. Also they’d ground us for a week for accidentally leaving a light on. They also made us walk to school in rain or shine. I once called up my foster mom to get a ride home from school and she said she didn’t want to wake up the baby, even though it was pouring down rain outside. When I came home upset that she wouldn’t pick me up, she reversed the blame on me and told me if I was going to have an attitude I could go upstairs. I later found out that the reason I never received clothing allowance was because the foster parents used it buy themselves clothes. Another suspicious thing was that not only were my foster parents doing foster care, but also my foster dad’s sister and her husband, and my foster dad’s parents were also doing care. His sister and parents took in at least five or six kids each. They would make fun of the kids in front of them continuously and would use corporeal punishment. After me and my foster sister complained about how we were being treated; we were both taken out of their home. I was never explained to by my social worker as to why I was being put into a third home, but my foster parents sat us down and gave us the explanation that our foster mom was about to have a baby and keeps blacking out in the shower, so you guys have to go to a new home. I didn’t see the relevance or how that related to anything but oh well.

In April of 1998, Rhonda moved in with her third and final foster care placement.

This is what she so candidly shared:
The environment was definitely different than the other two homes. I stayed in that home until I graduated from high school in May of 2003. I’ve lived there on and off in between school years and such, and still keep in contact with them. My foster dad had no interest in foster care, and apparently lost interest and motivation in it after their first set of foster kids were adopted out. My foster dad was really close to the two boys who first lived with them and I think it must have been hard on him to see them go after getting so attached to them. I believe he agreed to do foster care before marrying my foster mom, but I think he changed his mind for some reason I just explained. It didn’t matter to my foster mom, because she wanted to continue doing foster care. I believe my foster dad took out all of his insecurities as a parent and as husband out on not only his foster kids, but his stepdaughter and now his real kids as well. When I first moved in my foster mom told me she didn’t like me, she told me that years later. I don’t think that’s very appropriate to say to someone, especially as sensitive as me and someone who is supposed to play a mother’s role in your life but anyway. I was very paranoid coming another home, which I think any kid would be, and so I would take everything I observed into consideration. I mainly felt when I first moved in there that I was something that was broken and needed to be fixed.

In short, Rhonda’s experience with her third family was not a success. Throughout the three years Rhonda spent with her last foster family, she frequently felt like an outside—someone who was being laughed at when she wasn’t in the room—and like someone who was not completely and fully welcomed into the family unit. Rhonda recently severed ties
with her foster family after an experience that reified to her that she is not part of the family.

This is what Rhonda had to say:

My foster mother’s parents just invited my foster mom and her family along with my foster mom’s brother and his family on a cruise this past Christmas. The foster children weren’t invited. That was the final straw as far as I’m concerned. I’m at a cross-road in my life right now and I don’t care to have any family because there is no trust.

Jocelyn

Jocelyn has an insecure attachment style to her birth parents, an insecure attachment style to her foster parents and a secure attachment to her husband. Jocelyn is a thirty-four-year-old Caucasian woman with an amazing amount of energy and newfound goals which she is actively pursuing. After thirteen years of being a hairstylist, Jocelyn decided to go back to school to get her human services degree in order to help children in foster care. While it has been over a decade since Jocelyn was in the foster care system, many of the systemic problems that created difficulty for Jocelyn remain problems for foster youth today. Problems such as high placement rates and maltreatment by foster parents are problems that Jocelyn and nearly all participants faced while in the foster care system. Jocelyn is nearly finished with her associate’s degree and will begin studying human services in the fall at a local Iowa college. She explained, “I hope that I can continue to work with youth in the system and share my story and be some inspiration to them, that you don’t have to be your past, and you can over come being a victim.”

I did not have the pleasure of meeting Jocelyn in person, as she lives several hours away and instead used email and phone as a means for corresponding.
Jocelyn entered the foster care system at age fifteen, a relatively uncommon age at for foster care entry. The reasons that brought Jocelyn to foster care are—like all of my participants’ stories—tragic and unique. Jocelyn shared her story by saying:

I had just turned fifteen. I initially left the home to live with a friend and her family, after my stepfather had been making sexual advances towards me. This was not the first time he acted sexually toward me. Several years prior, he was caught by my mother masturbating with me in the room. I just ignored him, but my mother didn’t take any action. So when I was fifteen, it came to a head because I was dating a guy that I thought I was in love with and my mother made us break up because we were having sex. Makes a lot of sense, I thought to continue to date this man [mother’s boyfriend] make sexual advances toward me, but it wasn’t okay for me and my boyfriend. So I left my mom a note in her purse to tell her either he [mother’s boyfriend] moves out or I do. She told me I couldn’t make her make that decision, so I moved out with my friend. I stayed at my friend’s for about a month. Having me stay put some financial strain on the family so my friend’s mom called DHS seeking some assistance for having me there. This is when they [DHS] got involved. My mother was given the choice to have her partner move out or sign me into care, and she signed. I entered my first foster home the night before Thanksgiving 1987.

When I asked Jocelyn what foster care was like, I was horrified, yet not totally shocked by her response:
My first home was not fun. I felt like I was Cinderella. I was the only girl. The family had three boys of their own and they were younger than I was living in the home and they had a grown daughter that they didn’t have a close relationship with anyone. I didn’t stay there long. The mother was quite old-fashioned, and I was going to wear shorts to school in the spring and she was not going to hear of it, so she flipped my cereal in my lap. I went upstairs, dried off my shorts, and walked out the door to catch the bus; I called my social worker from school.

Jocelyn went on to spend two years at her second foster home. Jocelyn had this to say:

This family was an older farm family and all their children were grown. There were three foster boys and I was the only girl, all teenagers. My foster father was a recovering alcoholic and the mother the famous enabler; they attended regular AA (alcoholics anonymous) meetings. The boys in the house were recovering as well, but I have no addiction issues, but I attended because my stepfather who was the reason I was in care was an alcoholic and they thought it would be helpful. I do think in some ways it was helpful. Also in this home, one of the foster boys made sexual advancements toward me. At the end of my stay with this family I began drinking a bit, and as you could imagine it was not acceptable, so I was asked to leave. This was when I met my future husband. I was moved to another foster home for the summer between my junior and senior years of high school. I moved in with my husband in October and graduated in May we got married August ’91. If I hadn’t got married, I am scared to think of how differently my life would have turned out.

Jocelyn went on to live with just one more foster family before exiting out of foster care. This is what she shared about this brief experience:
My last foster family, I was just buying my time because I knew it was only for awhile, and it was in a different town than I had previously been in and was ready to get back. I didn’t really cause problems; I was just wanting to be somewhere else.

Out of the three foster care placements, Jocelyn identified her second family as being the family that she was closest with.

Mary

Mary has an insecure attachment to her birth parents, a secure attachment to her foster parents and an insecure attachment style in romantic relationships. Mary is an eighteen-year-old Caucasian woman. She is currently in her last year of high school and will graduate in December of 2007. Mary aspires to become a therapist for troubled teens someday. Mary currently lives with her maternal grandparents and, even though her birth mom’s rights were terminated nearly nine years ago, Mary recently began having face-to-face contact with her and is even contemplating living with her in the near future.

This particular interview took place at Mary’s grandparents’ home, because Mary was not feeling very well. Before I knocked on the door, I was greeted with a sign letting me know that someone who lives in the home uses an oxygen tank and therefore anything flammable could not be brought into the home. When I entered the home, I was greeted by the family dog, a very small boxer dog that took a liking to me throughout the interview and managed to keep my coat warm. I don’t know where Mary sleeps in this house, as I could see all the rooms from where I sat on the couch. The house was in total disarray. It was very dirty with clothing, food, knick-knacks and the like scattered everywhere. Mary told me that her birth mother would be stopping by soon and that we needed to begin with the interview as soon as possible; her birth mother doesn’t like to hear Mary speak about why she entered
foster care. This is because she still denies having used substances—one of the reasons why her parental rights were terminated on behalf of her three biological children. Mary’s demeanor was what I would call laid-back, almost as though we had known each other for a long time, a feeling that I truly felt with all participants.

When I asked Mary to tell me what kind of relationship she has with her birth parents, this is what she quickly said:

We never had a bond. When I was a little girl, I was always outside with my friends and, well, she was too stressed out when we were kids, because my sister and brother weren’t doing what they were supposed to do and I was always gone and my mom would get beat by her boyfriends and beat us up, so that’s why I really never had a bond with my mom. Because I just felt like I needed to be away from home to get supported.

The abuse that Mary referred to came from her birth mom’s boyfriend. Mary went on to tell me that her birth mom’s boyfriend never physically abused her but had abuse her siblings. When I asked Mary to tell me about the relationship she had with her birth father, she said the following:

There’s really none, either because he was always taking me away from my mother and drugs were an issue with my father. He really never did take care of me. He stole money from us and for us to take care of us. There was really no bond with him.

When I asked Mary why she entered foster care this is what she shared:

Um, from the DHS and courts, my mom was on drugs and the men she dated and just the living style we were in. It wasn’t safe and we would have food and clothes, but it wasn’t safe to go home to and I think that’s about it.
Mary was nine years old when she entered foster care. Upon entering foster care, Mary was sent to live with a foster placement who she described as being “really old.” Mary was in this placement for over a year. During this time, her birth mother’s rights were terminated and thus began many of what Mary denoted as behavioral problems. Mary unabashedly told me that she is bipolar and that she had a lot of behavioral problems upon entering foster care. These behavioral problems were the catalyst for bringing Mary to nearly six treatment facilities over the course of five years.

Although Mary lamented the emotional challenges of being in placement and the sadness associated with feeling isolated, she was able to recognize many positive improvements that were brought to her life during her time in placement. Mary elaborated:

It really helped me. Because honestly, if I hadn’t gone through the experience I did when I was with my mom when I was younger I would have been doing the same stuff. It just made me realize that you need to forgive and forget, not forget but forgive people and to take responsibility for your actions and to speak your mind, which is what I have no problem doing, just basically coping strategies for the real world.

Mary believes that her struggles with being bipolar caused her emotional difficulty. She believes that the experience of being removed from her birth mom provided her with the opportunity to learn about her bipolar condition and how to cope with it. On the other hand, Mary remarks that it was also a very lonely time, as no one came to visit her during her five years of placement. After Mary’s birth mom’s visitation was suspended, no one visited Mary any longer, making Mary feel abandoned and lonely. “I beat myself up because I had nobody,” she explained. “When I would get down I would beat myself emotionally and
sometimes physically.” Mary was nearly twelve when she went into placement and was sixteen when she was discharged.

In addition, Mary has been with four foster families and was recently adopted by her last foster care placement. However, she has returned to the temporary care of her maternal grandmother since, according to Mary, things with her adoptive mother are not working out. Moreover, Mary wants to live with her biological mother again. Even though Mary was very articulate in telling me that she neither bonded with her birth mom nor trusted her, Mary believes that her mother has changed. When I asked Mary to talk to me about wanting to live with her birth mom again, this is what she said:

Yeah, but sometimes I feel like this isn’t my family and I don’t belong.

Because I’ve been away for so long and they’re keeping me updated on what’s happened in the last seven years. I don’t know, sometimes they just really don’t listen to me because I’m a kid, they say. But kids notice a lot more things than what adults think. I don’t know, I just feel like sometimes they don’t want to listen to me and it’s hard.

When I asked Mary to elaborate more on what was happening in regards to her living with her birth mom, she shared the following details:

Well right now we’re just playing it by ear, you know, being with my mom, but I’m kind of comfortable where I am at just because, you know, I’m with people I love and love me, but one thing I don’t want to go back to is the lifestyle that brought me into foster care in the first place, which is kind of hard, because you’re with your family and you get more freedom and I guess I’m starting to fall back in that, running around and stuff like that and sometimes I catch myself saying, “Well if I did it when I was younger I can do
it now and get away with it,” and so it’s kind of getting away with it what you can.

Like every other participant I interviewed, Mary made sure to tell me that she was never going to be like her birth parents.

Curious about why Mary’s adoptive placement was not working out, I asked Mary to talk to me about this. She shared the following explanation:

The woman I got adopted by is really giving up on me. We used to have a really good bond when we first got started and knowing how she works and I work and our triggers, we kind of reached a turning point where we had to get away from each other. When I was with her she never supported me, she cared more about the boys than she cared about me or any of the girls that were there. I guess the main people that I go to, to get me things are my boyfriend and my mom, which they did but they got pretty sick and tired of it and they kept telling me “No, I can’t get that for you because we don’t have any money,” and then I would go to my adoptive mom and she would say, “No, I don’t got no money,” and then she would whip out $20 for the boys to go to the mall, which, I kind of thought that $20 could have gone towards what I needed, and I felt like she didn’t want me to begin with that “She just did it for the money.” Like, she knows how to manipulate, let’s say that.

Mary feels abandoned by her adoptive mom and is now reaching out to her birth mom, who is trying to make amends with her. Right now, Mary’s biggest concern is separating herself from an abusive boyfriend who she has been dating for a year.

Mary has just recently gotten involved with Elevate to Inspire, and in speaking about her role in the program, she said the following:
We help teen foster kids feel comfortable and help foster parents accept teens and just helping kids. We’re working on a document right now and it’s about um, stuff, like rules and regulations that foster parents should follow. It’s a guide for foster parents. Perhaps it will be Mary’s role in Elevate to Inspire that will provide her with the positive and supportive community she needs, as well as the self-esteem to make the choices that she is going to have to make to better her life.

Amanda

Amanda has an insecure attachment style to her birth parents, a secure attachment style in her foster parent relationships and an insecure attachment style in romantic relationships. Amanda is an eighteen-year-old Caucasian woman who will be graduating this spring from an alternative high school in central Iowa. Amanda has battled and overcome a lot of obstacles in her young life and has a lot to be proud of this spring when she walks down the aisle in cap and gown to receive her diploma. Amanda gave birth to her daughter when she herself was fourteen. She had no support system, no place to live, and no one to help guide her along. On the day of the interview, Amanda was very upset. She cried to me at the beginning of the interview about her daughter’s struggles with asthma and about the trouble she is having with her boyfriend. I listened to her during this time and offered her positive advice when it was appropriate. Amanda is a young woman who appears to be full of determination, goals, and strength. She has already exemplified her strength in being able to raise her daughter with little to no support.

When I asked Amanda to talk me about why she entered foster care this is what she shared:

I don’t know exactly why. I was taken away from my dad’s care when I was like six or seven and it was because
he was abusing drugs and the environment wasn’t good and I think that’s kind of when I realized at a young age, no matter what, if I was with my mom or dad the environment wasn’t good; it wasn’t stable, and so my mom had moved me back and forth, like from state to state, to keep me away from my dad. When I was thirteen, she made me go back and live with him. He wasn’t on drugs then, but still wasn’t stable and I think I kind of had gotten pregnant and I think I did things that I wouldn’t normally have done in order to ask for help and so I guess I didn’t really think I entered foster care because I had gotten pregnant. I went to House of Mercy—it’s a shelter for teen moms who are trying to make better situations for their babies—and I had decided to go there, even though I needed a court order. I had told my DHS worker that I wanted to go there. I knew it would be better for me and for my daughter, but I felt that when I went there they [the staff] kind of pointed fingers at me like I was a delinquent and I had never had no problems with the court or nothing like that, it’s just that it kind of made me feel like, okay, maybe I am a bad teenager and maybe I shouldn’t be doing this and was there for like a year and all the foster care parents that I had tried to go to only wanted my daughter because they wanted babies, and so I felt like I’m not important anymore; I’m over this cute little baby age and I have a big responsibility so then they [DHS and House of Mercy] were like “We can’t find any other placement for you so you’re going to have to go live with your dad,” which wasn’t a good idea, because that’s what I was trying to get away from.

Amanda was sent back to live with her dad, a man that had molested her repeatedly as a child, a fact which Amanda made her DHS worker aware of. Later on, Amanda lamented
to me about how this systemic failure occurred and the events that led up to her and her baby being forced to live with her biological father:

I was sixteen, it was February 14, 2005 and my DHS worker—the whole plan was to try to get me into independent living because everybody knew I wasn’t happy about going back to live with my dad—but it was my only option. And we went back to court February 14 and she [DHS worker] told me that she was going to close my case because she had a very heavy case load, even with all the problems that was going on.

With no where else to turn—ended back up with her biological father and stepmother. She describes the situation as follows:

My step-mom would intentionally push me when I would pick up my daughter. And there was a severe case of head lice among my little brothers and sisters and my step-mom would treat their heads but wouldn’t treat the house, and so it was constantly going around, and so I was constantly doing things to my daughter’s head and my head. Like, I’m a white girl, but I’m wearing grease on my hair to make sure I don’t get it, you what I’m saying. We had a three-bedroom house and there were like six kids and two adults and a baby, so, seven kids and two adults, so it was just a small environment and I couldn’t handle it. Nobody would help me get to school. All of my sisters and brothers got rides to school, but when it came to me I had to take the bus. I felt like just because I had a baby everybody expected me to do everything on my own, so I felt like, if I have to do everything on my own, then why I am staying here? I worked full time, went to school full time, and was paying rent. Even though I was paying rent and money to them, it seemed like water was
getting shut off, the electric was getting shut off, we didn’t have no phone
sometimes, our couches were getting taken away, because you know with that
rent-to-own thing, they were taking our furniture and it seemed like okay,
“You guys are working full time at a car center warehouse, making a lot of
money and I’m working full time at Wendy’s. Yeah, it’s minimum wage, but
I worked 40 hours a week and I’m pulling up my part and you guys still aren’t
making ends meet, so I would run away. I would call YESS [youth emergency
shelter] and be like “can you meet me at Quick Trip or somewhere close?” I
was like “I need help!”

Although Amanda’s father and stepmother were no longer abusing substances, their
home was not sanitary or healthy for a new baby or any child for that matter. Furthermore,
Amanda had been very clear about her long history of molestation with her birth father—a fact
that DHS apparently did not believe was concerning enough, because they still placed her and
her young baby in potential harm’s way. Each time that Amanda ran away from her unstable
living environment, she brought her daughter with her. She explained this by saying:
I always took my daughter with me, but there were several times where my
step-mom knew what I was doing and would try to make sure that I didn’t take
any clothes or anything for me and my daughter. One time she grabbed the
back of my coat and—I had a hood on—and she grabbed the back of my coat
and it left this big huge red rash thing and it was horrible. Amanda attributed
the failure of family reunification to lack of family counseling services and
said: It’s just that we weren’t ready to move back in with each other. We
didn’t have enough family counseling, you know, because they wanted to
close our case because their case load was too big and I feel like we didn’t get
all of the things that we needed to get worked out because—as I kid I had a problem. Like, he was on drugs and he didn’t remember what happened but, like, when I was a little girl he used to touch me. He never made me have sex with him or anything like that, but he would touch me and make me touch him. I tried to talk to my DHS worker about it and she was going to make me talk about it and I did, and he was like “Well I don’t remember.” “I understand you’re on drugs but I’m not going to sit here in front of your face while you lie about it. Like that one time, the worst memory I have with being over there [in birth father’s care], me and my best friends were playing. It was Halloween time and we were playing with these mask things and one of my friends took mine away and I was like “I was playing with that” and my dad woke up from this deep sleep and was like “Don’t worry about that Amanda. I got something for you to play with,” and he showed himself to everyone and I was like so embarrassed and that was like the first time that DHS was concerned.

Amanda was five years old when her birth father exposed himself in this instance. After this experience occurred, Amanda went to go live with her birth mother—with whom she currently shares no relationship because her birth mother ignores both Amanda and her daughter and has never been there to provide emotional, physical, or financial support. Amanda cried heavily while telling the story above. It appeared that there might still be hurt within Amanda surrounding this issue that took place with her father. Amanda went on to live five months in the care of her birth father and stepmother before finding refuge at a local shelter for teen girls. With the best intention to provide herself and her new baby with the
most stable, healthy, and appropriate environment possible, the system did not come through for Amanda and her new baby girl for reasons that should never occur.

While in shelter care, Amanda was able to build a supportive community that assisted her with accessing public and affordable housing. The amazing piece of this story is that Amanda has always remained in school and has only missed school during times that her daughter was ill and child care was not available. Amanda uses the local bus system to get herself and her daughter around and has no shame in doing so. Amanda is just relieved to be on her own and to be able to provide her daughter with the stable environment that she was not afforded as a child.

When I asked Amanda if she had ever spent time in foster care this is what she shared with me:

I was in a foster home for two months when I lived with my mom. My mom sent me to foster home for two months, because she wanted a break and so I moved to a foster home for two months. I liked it [laughs]. She [foster mom] had two girls that she had adopted and, I don’t know, I saw their family and just wanted that kind of family. I know the grass isn’t always greener on the other side but, like, 1 the girl [foster sister] was always telling me about the problems they were having and I, like, I’d take those problems any day of the week over what I’ve went through. That’s life I guess.

I can’t help but wonder what Amanda’s life would be like right now if DHS would have been able to find her a loving, stable home when she was a young child and riding the perpetual roller-coaster between her birth mom and birth father’s seemingly unstable homes. I was truly humbled by Amanda’s strength and courage and further impressed by her ability to forgive her birth father for all the pain that he his actions have had on her life thus far. She
explained, “I always believe you have to forgive people, because otherwise they have that over you for the rest of your life. It’s true, no matter what, so that’s why I have to forgive him.” What a powerful and courageous thing for Amanda to be able to do. Amanda cried as she told me this, making more evident to me how real the pain still is for her and may always be.

While Amanda is uncomfortable leaving her own daughter alone with her birth father, Amanda explained:

My daughter really did bring our family together, because he was so against me having a daughter that was biracial and against me having a daughter at 14 and he wanted me to get an abortion and my step-mom wanted me to give it up for adoption, but I just couldn’t do either of those things. But when I had my daughter, I was so surprised my dad was in the waiting room to see her, because the only kids that he was in the waiting room to see born was me and my younger sister. And so it was really surprising, and when he saw my daughter I could just tell that he was connected forever. And that’s ‘his baby.’

If he goes one or two days without seeing her, he is calling me and asking me “Where’s my grandbaby at and what’s she doing?” Like, people say that kids change the families and that is so true, because it really brought me and my step-mom together and my real dad together, because I had such a bad relationship with my step-mom and now we’re able to sit down and talk about some things. I wouldn’t say that I’m close with her, but now I can ask for things like advice. I know that she’ll come get me if I need her, and before, it wouldn’t have been like that.
Amanda’s optimism has built some very positive goals for herself. After graduation this spring, Amanda plans to attend a local community college in the fall to study business and sales/marketing. After receiving her associate’s degree, Amanda hopes to transfer to Drake University, where she will study television and radio production. Amanda aspires to own her own business someday, a business that would offer haircuts, manicures, and even sell clothes to men and women. Amanda hopes to live in a big city someday, like New York or somewhere in New Jersey, she said. Amanda has big dreams for her life.

This section has examined (1) how, why, and at what age each participant entered the foster care system, (2) what each participants’ relationship was like with their birth parents and foster parents, and (3) each participants’ attitude towards romantic relationships. The coming sections will examine how Bowlby’s attachment theory corresponds to the young adults in this study.
ANALYSIS

One of the objectives of this study was to explore the applicability of attachment theory to young adults raised in foster/adoptive care and to propose adaptations to the theory that might enhance its explanatory power. Therefore, I needed to use an approach that would assist me in drawing upon themes from the data. To accomplish this goal, I adapted Charmaz’s (2006) practice of qualitative coding.

Qualitative coding involves naming segments of data with a label that simultaneously categorizes, summarizes, and accounts for each piece of data. Coding allows us to make analytic interpretations of our data. (Charmaz, 2006, p. 43). This involved taking segments of data collected from interviews and sorting them according to categories and themes. Charmaz suggests that as qualitative researchers interact with their data through the coding process that they ask: “Which theoretical categories might these statements indicate?” (2006, p. 45). Doing so allowed me to see how my data corresponded to Bowlby’s attachment theory as well as discover nuances in my data. I noted instances where the correspondence between my data and attachment theory were not clear and used them to either refine the meanings of attachment theory with respect to the study group, or in the case of several emergent patterns, propose an adaptation to the model itself.

Through the analytic process I was able to examine how attachment theory corresponds to the participants’ experiences with attachment through each major phase of their lives. Also, throughout the findings section I use many to refer to four or more participants who shared similar or the same sentiments as a participant that is quoted. Also my method for classifying participant’s attachment styles is based on the participant’s narratives of their relationships. Participants that have an insecure parental attachment were classified as such because they were unable to recall positive memories about their birth
parents and the relationship, did not have positive feelings about their birth parents, did not want a relationship with their parents and simply expressed that they did not feel an attachment to their birth parent. Also, participants with insecure attachments expressed that they were unable to predict and depend on their birth parents, which is an important classification of an insecure attachment according to attachment researchers (Bowlby, Ainsworth, Hazan & Shaver, Fraley). Likewise, participants who recalled fond memories, positive relationships, and positive feelings about their birth parent are recognized as having a secure attachment styles. In addition, these participants recognized that they were able to predict and depend on their birth parents. This method of classification applies for the foster/adoptive parent relationship as well. Participants who expressed a negative attitude, anxiety and a general distrust for romantic partners were classified as having insecure attachments to romantic partners. Similarly, participants who recalled positive feelings, a good attitude and the desire to trust romantic partners are classified as secure attachment styles.

Finally, please refer to figure 1 on page 146, which illustrates the three attachment based experiences-- birth parent relationship, foster care relationship and romantic relationship. The purpose of figure 1 is to illustrate the relationship between insecure birth parent relationships and the attachment style outcomes for romantic relationships. The numbers that appear on figure 1 indicate the positive and negative relationship between birth parent attachment styles and romantic relationship attachment styles. In figure 1, number 12 represents the twelve participants who acknowledged an insecure birth parent relationship and number 1 represents that one participant of the twelve expressed a secure attachment style in his/her romantic relationships. For the three participants who acknowledged secure
attachment to their birth parents, two of these participants recognized a secure attachment style in their romantic relationships.
RESULTS

Bowlby’s attachment theory states that in order for a secure attachment to develop in early childhood, children must be able to predict what is going to happen in the birth parent relationship (whether their parents are going to respond to their needs and how). Secondly, children must be able to depend upon the birth parents to consistently provide support, nurturing and safety. Bowlby concludes that both of these important qualities result in the child’s ability to trust the birth parent. Leading attachment researchers conclude that (Bowlby: 1973, Ainsworth: 1982, Hazan, Shaver: 1987, Fraley: 1994) trust is the necessary and sufficient condition for a secure attachment in both child-caregiver and romantic relationships. Moreover, trust is built upon predictability and dependability. Indeed, each of these theoretical components was represented in the data, as well as an important variable not included in the original attachment theory model: loyalty issues with birth parents, regardless of the nature of the birth-parent relationship.

Later we will learn how participants’ abilities to establish secure attachments with their foster or adoptive parents were colored by their need to feel loyal to their birth parents, whom in most cases had either lost custody of them or voluntarily consented to terminate their parental rights. This variable suggests that attachment theory can be improved in its ability to understand the attachment process when it has been disrupted by entry into foster care.

Using coding and thematic analysis, I analyzed the stories to determine how participants experienced attachment through each major phase of their lives. In the analysis you will learn how attachment theory corresponds to the participants’ experiences of attachment. I examine each major life phase in the following order: (1) birth parent relationship; (2) foster or adoptive parent relationship and (3) romantic partner relationship.
Finally, I evaluate the relevance of attachment theory among youth placed into foster care. The qualitative data analysis is used to identify the specific factors that underlie each aspect of attachment theory for the phenomenon at hand. For example, I allow the data to inform my understanding of the factors that contribute to my respondents’ perceptions of their caretakers as predictable. Below is a table that represents the attachment styles of each participant in this study. The attachment styles represent the insecure and secure attachment styles in their birth parent relationships, foster/adoptive relationships and romantic relationships. In the table BP represents birth parent relationships, FP/AP represents foster and adoptive parent relationships and RR represents romantic relationships.

**Table 1. Attachment styles of participants**

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BIRTH PARENT RELATIONSHIP

Predictability

Twelve out of fifteen participants (80%) recognized that they did not feel a secure attachment to their birth parents. It is important to point out that only four participants lived in families where both birth parents were present in the home. Of these twelve participants, each recounted reasons why they felt that they were not securely attached to their birth parents. Each participant recalled feeling as though they were in a constant state of uncertainty, such as not knowing if their parents were going to be there to feed and protect them. Bowlby’s attachment theory states that predictability is the first step in building trust between children and birth parents. In the participants’ narratives, I classified uncertainty as unpredictability. For example, Sam recalls events that made him feel uncertain and as though he could not predict what was going to happen while in the care of his birth parents.

At night I didn’t know if they were going to fight. It was an uncomfortable situation to be in when they were fighting, like even when they drank. If they drank then they were just belingerent and they yelled at each other. There was always a lot of uncertainty, not knowing if there was going to be food on the table or if we could count on them.

Attachment theory asserts that children’s ability to predict what is going to happen enables them to depend on their birth parents. As Sam illustrates above, uncertainty leads to a feeling of confusion and ultimately the assumption that children cannot depend upon their parents. Here, as in other cases, participants’ feelings of unpredictability were manifested by a lack of ability to know what was going to happen in the birth parent relationship. The data demonstrates that the ability to predict what is going to happen in the birth parent relationship is an important step in feeling secure and establishing a secure attachment.
Heather mentioned proceeding with caution when she moved in with her foster parents. When I asked her why she felt she needed to proceed with caution, this is what she said: “Well, I had always done that proceeding with caution since the time I was little because of being with my birth mom. You never knew what was going to happen. There was always something going on, but you never quite knew. So I am very guarded with my feelings and emotions.” Like Heather, many participants expressed feelings of proceeding with caution. And, like Heather, many participants described feeling discomfort about their inability to predict what was going to happen while in the care of their birth parents.

Felicia comments on an experience that demonstrates how important predictability is in forming and establishing trust, something lacking in Felicia’s relationship with her birth mother.

There were times when we got the EBT card and she’d [birth mom] and she’d say oh I’m going to go grocery shopping and then never come back and me and my brother had no food and if one of my Aunts did not live next door I wouldn’t have had no money, no food. I was fourteen. What was I suppose to do? That hurts when your Mom can look your right into the eye and say “I’m gonna come back” and never comes until a few weeks later and thinks everything’s okay.

Mary’s comment below reminds us that in addition to children needing to be able to predict what’s going to happen in the birth parent relationship, predictions must yield positive outcomes in order for trust and a secure relationship to be established. “It was pretty much the same everyday. I knew what I was going to come home to. I knew if I left I would be better off. I just pretty much knew when to leave.” Mary went on to discuss that she knew each day her birth mom would be physically abused by her paramour, something which
became predictable. While Mary in general could predict what was going to happen, the outcomes were not positive and did not enhance Mary’s feelings of comfort and safety in her home.

Speaking about predictability, Rhonda says “I could not predict my father’s behavior. All I did was try to be good to avoid having to worry about what he would do next.”

The participants affirmed that being able to predict positive outcomes in the birth parent relationship is an important and necessary component of a successful attachment. Without the ability to predict, the participants felt uncertain and as though they could not count on and trust their birth parents to meet their emotional and physical needs. Even further, the participants’ accounts suggest that predictability and dependability are mutually exclusive; when participants could not predict what was going to happen they were also unable to depend on their birth parents.

*Dependability*

All of the twelve participants (80%) who expressed feeling that they did not have a successful attachment to their birth parents, recalled feeling that they could not depend on their birth parents. In early childhood, dependability is an important and necessary characteristic of a successful relationship between children and their parents. Below, Hannah recounts a sad memory that she feels illustrates why her inability to depend on her birth parents:

I remember one time when we had this sort of jamboree thing at school and I was really excited about going to it and my dad didn’t want to take me that night and so I didn’t have a ride and so I couldn’t go. I was really upset about it. It was heartbreaking. We never really got to do anything when we were younger, so um, I really couldn’t depend on them for anything. At an early age, I assumed a
parenting responsibility over my younger brother and sister and cooked meals and took care of them.

Hannah went on to discuss the dynamics of the parenting role she assumed with siblings. She did so, she said, because she felt that she couldn’t depend on her birth parents to take care of her and her siblings. Rhonda says “I couldn’t depend on either parent. My father wasn’t there, and I guess you could say my mother wasn’t either. She was wrapped up in her life.”

Jennifer said that she could depend on her birth mom to a point. When I asked her to clarify this she said, “I could depend on her if she could provide it. She had all these problems so she didn’t have a job and um we just got money other ways.” Like several participants, Jennifer suggests that depending on birth parents is unreliable when she says “I never knew what would happen next. Illustrating this, Sam says, “Just like not knowing if they were going to fight, it was an uncomfortable situation.”

Crystal talks about the strained relationship she had with her birth mom and her inability to depend on her: “It’s pretty sad. She didn’t treat us well, like she would pick her boyfriends over us. We just never clicked. She never sat down and helped me with my homework or none of that stuff. She was always out stealing and doing bad stuff.”

As mentioned, of the 12 participants (80%) who recognized not having a secure attachment to their birth parents, each recognized not being able to predict and depend on them.

Trust

As we have learned throughout this study, it is the responsibility of parents to create a system of trust for their children. Attachment theorists such as Bowlby, Ainsworth, Hazan, Shaver and Fraley suggest that trust is created by parent’s consistent nurturing and positive
response to the needs of their children. In the early stages, consistent care and nurturing allows children to begin to believe that they can predict what is going to happen and eventually allows them to consistently depend on their birth parents. Both predictability and dependability help to create trust for children and their birth parents, as illustrated by the participants’ accounts.

Attachment theorists suggest that children’s ability to trust their parents reflects a secure attachment between children and their birth parents. Each of the twelve participants (80%) who recognized an insecure attachment to their birth parents said that they couldn’t trust them. The necessary components of predictability and dependability were not present in their relationships with their birth parents, which negatively impacted their attachments to their birth parents. Indeed, my results suggest that as attachment theory would predict participants attachments were negatively impacted by not being able to predict and depend on their birth parents during early childhood. In fact, participants’ accounts inform us that their inability to form meaningful and trusting relationships with their birth parents was in part due to them not being able to depend on them and predict what was going to happen, impacting their ability to trust them.

When I asked Hannah, who expressed that she was not securely attached to her birth parents, to define what it means to be attached to a parent this is what she said:

I would say just um trusting them and knowing that you can depend on them, um I think is a big thing in being attached to somebody. Love is good thing, just knowing I think to be attached to someone you have to know that they really care about you, that they really want you in their life and they really want you around, I think is really important.

Hannah went on to say “I had no trust for my father. I didn’t really have a lot of respect for
him growing up. Just seeing what he did, how he treated women, us, my mom and his attitude toward things.”

Amanda said “I do not trust my father. I would never leave my daughter alone with him.” Scarlett, whose sole parent was her birth father prior to being put into foster care, said “We [her and her fiance] were talking about my father watching our kids someday when we have them and I was like there’s no way I’m letting my father watch my kids, so no I don’t trust him.”

Brandon suggests several reasons why he couldn’t trust his birth parents. “There was sexual, emotional and physical abuse [caused by his birth parents]. My father was the largest source of abuse and our mother was too checked out to be really aware of what was going on.” Similarly, Mary recalls feeling a lack of trust and safety for her birth mom by saying, “My mom would get beat by her boyfriends and then beat us up, so that’s why I really never had a bond with my mom because I just felt like I needed to be away from home to get supported.” When I asked Jocelyn if she trusted her birth parents she said, “No.”

In speaking about her birth mom, Heather says, “I couldn’t trust her at all. She was very manipulative and only looked out for herself and that was it, I think that probably helped me in a way because now I know how to look out for myself, but it didn’t help me to trust her at all.”

Here we are able to see how a lack of secure attachment is related to many of the participants’ inability to trust their birth parents, which is impacted in part due to most of the participants’ inability to predict what was going to happen in the birth parent relationship and depend on them for support, safety and guidance.

Of the 15 participants, 3 participants (20%) recognized an attachment with their birth parents and recalled feeling that they could trust them. Jennifer says, “I guess I could trust
my mom,” but later said that she could not always depend on her mother. Julie, whose birth mother is mentally challenged, indicated being able to trust her mother, but not as a source of protection and care. Julie says, “I’ve always been the parent and she the child just because I’m a fairly intelligent person and resourceful.” “It was not a normal attachment because I could not depend on my mom to care for me.” Sam says “Yeah, I kind of trusted my parents.”

The participants who acknowledged that they were able to trust their birth parents also communicated hesitation, as each recounted not being entirely able to depend on and predict what was going to happen in the birth parent relationship. As you can see, the reasons that disabled participants from establishing secure attachments with their birth parents are the missing components that attachment theorists assert are the necessary and sufficient conditions to establishing a secure child-parent relationship—predictability, dependability and trust.

The twelve participants (80%) who recognized an insecure attachment with their birth parents indicated that they were typically unable to predict or depend on them. Unpredictability impacted the participants’ ability to trust their birth parents and ultimately impacted the quality of their attachments to them.

In the next section, I will explore how these participants experience attachment with their foster parents after being placed into foster care. According to Bowlby’s attachment theory, insecure attachment styles have life long implications and thus affect future relationships. If this theory applies in all cases then it would be likely that I would see high rates of insecure attachments among the twelve insecurely attached participants with their foster or adoptive parents. We will explore the dynamics of these attachments in the next section and examine how predictability, dependability and trust each play a role in
establishing attachments between the fifteen participants and their foster parents.
FOSTER CARE OR ADOPTIVE CARE RELATIONSHIP

Thirteen participants out of fifteen (87%) recognized feeling a secure attachment with their primary foster or adoptive care parents. Although twelve participants (80%) recognized an insecure attachment with their birth parents, thirteen participants expressed having a secure attachment to their foster parents. According to Bowlby’s attachment theory, a lack of attachment between child and birth parent carries life long implications. Ainsworth argues that an insecure birth parent relationship is reflected through high rates of attachment disorder or disruption. Based on these studies, we would assume that in our research most of the twelve participants who did not have secure attachments to their birth parents would be unable to attach to their foster parents. However, the thirteen participants who had a secure attachment with their foster or adoptive parents reveal that a transformation occurred which allowed them to form successful, healthy attachments. This transformation involved a number of important steps. First, the participants needed to learn that they could predict what was going to happen, that their foster parents were committed to them, and that they could depend on them. These important components allowed participants to begin to trust their foster parents. Participants also identified several other important steps that were necessary for them to work through as well as their foster or adoptive parents; I will discuss this later in this section.
Predictability

The thirteen participants (86%) who recognized having a secure attachment to their foster or adoptive parents expressed that in order for them to build secure attachments they needed to be able to predict what was going to happen in the relationship. For example, Jennifer comments on the secure relationship she has with her foster parents: “They’ve been there for me a long time, I trust them.” Like many of the other participants, Jennifer demonstrates that through the consistent commitment of her adoptive parents she’s learned to be able to predict that they will always be there for her. Likewise, Hannah tells a story that demonstrates that she can predict that her foster parents will be there for her. “One time, I ran out of gas and I called my foster dad and he came and got me and it’s just little things like that I know they would do anything for me because they care about me a lot.” Brandon said “I love and respect my foster parents; they’ve been there for me through everything and never left me.”

Some participants expressed that being adopted by their foster parents increased their feelings of security, while for others adoption was not necessary for secure attachments to occur. Heather says, “Being adopted really helped, because after that I knew that they were my mom and dad. After I knew that there was a commitment to me and my sister I kind of said okay.” For Hannah, adoption was not necessary to make her feel that her foster parents were not going to leave her; their actions had already demonstrated their commitment. “They would have adopted me, but like for going to college, there’s a lot more aid for kids who age out of foster care as opposed to being adopted, so that’s the only reason we did that.”

Sam speaks about his relationship with his adoptive parents: “There were boundaries and I knew I was in check and I knew what to do and how to be around people. I learned a lot of responsibility and I knew that they would always be there.” In commenting about being
adopted Sam said, “I felt like I belonged more in the family, not that I didn’t belong before, but um, there wasn’t really any difference. They treated me the exact same as the other kids. It wouldn’t have made any difference to me had I not been adopted, I knew they were committed.”

Like many of the participants, Neila compared the relationship she has with her foster parents to the relationship she had with her birth parents:

Well, I don’t hide things from them; when there’s something wrong I tell them and I always know what’s going on”. They’re the first people I go to, because they understand what I am going through and how I feel.”

Crystal said, “I’m happier now than when I was with my birth mom. I’m not stressed and depressed all day. I know what’s going to happen.”

The participants’ stories illustrating predictability contain a constant theme: Youth in foster or adoptive care need to be reassured that their foster parents will not leave them and will provide for their emotional and physical needs.

*Dependability*

For the thirteen participants (86%) who had a secure attachment with their foster or adoptive parents, the ability to depend on them was also a necessary component in securing this attachment. According to attachment theory, dependability is the second step in forming secure attachments. Participants demonstrate that dependability is not only a characteristic of secure attachments for children in birth parent relationships, but also for young people in foster or adoptive care.

Julie speaks about her relationship with her foster parents: “I could always depend on them; I love them very much. They’ve been really supportive and they’re still in my life and when I got married last year, my foster dad walked me down the aisle.”
Crystal said, “I really do feel part of the family. They’ve been there for me and I know I can depend on them for anything.”

Hannah said, “I am able to rely on my foster parents. If I have a problem, I know I can call them and they’ll help me out if they can. They’ll do anything to help me out that they can, if I needed it.”

Scarlett said, “I think I got the approval I needed or wanted from Jonnie, my foster mother. She continued to be there, no matter what I did, no matter how hard I tried to push them away.” Here as in other cases, Scarlett tested the relationship by misbehaving in an effort to know for sure if her foster parents are really committed. My data demonstrates that predictability and dependability are important and necessary components in building secure attachments for youth in foster or adoptive care.

Attachment theorists suggest that predictability and dependability create a secure, trusting relationship for children and their birth parents. My data demonstrates that the unique characteristics of the attachment process experienced by youth in foster or adoptive care require not only predictability and dependability, but also additional factors that attachment researchers have not yet explored. We will explore the nuances in the data after examining the participants’ discussion of trust.

**Trust**

Unlike children in birth parent relationships who should automatically trust their birth parents if the necessary steps are taken, children in foster or adoptive care have experienced disruption in attachments with their birth parents. In this study, for example, 12 participants out of 15 (80%) recognized insecure attachments with their birth parents. These participants had every reason to be skeptical as they entered relationships with foster or adoptive care parents. As Heather said, “If you can’t trust the person who gave birth to you, you can’t trust
anybody else.” Heather’s sentiment is not unique, but rather characterizes many of the participants’ initial feelings as they entered foster care.

In this study, thirteen out of 15 participants (86%) identified being able to form secure attachments with their foster and adoptive parents. The act of participants’ forming secure attachments was a process that was not always easy, as we will discuss. Participants spoke about the trust that they felt had been established with their foster or adoptive care parents. Brandon said, “I don’t trust anyone easily, but I trust my foster parents.” Jennifer said, “I trust them, I call them mom and dad.” Hannah said, “I can always trust them and that they’ll be there for me for whatever I need.”

Felicia said, “I trust them now, but at first I didn’t trust them, but now I trust them more than anybody. I can tell them anything and they’ll believe me and they have all the trust in me.” Felicia represents the experience of many participants, as she reveals that establishing trust is a process and is more complex than attachment theory might suggest. Beyond predictability and dependability, the data suggests other factors uniquely experienced by youth in foster or adoptive care who attempt to establish secure relationships.

*Loyalty to birth parents*

For the thirteen participants who recognized having a positive, meaningful attachment to their primary foster or adoptive care parents, attachment did not necessarily come easily. Children entering foster care enter the system with having already been failed by their birth parents, the people in their lives that society says should protect them and provide for their basic needs. This fact alone often creates complex situations for children entering foster care by impacting their ability and desire to establish secure relationships with foster parents. Interestingly, my data suggests that in spite of the insecure attachment and even neglect some participants experienced in the birth parent relationship, participants felt loyalty to their birth
parents. Participants said they needed to overcome and deal with loyalty to their birth parents in order to establish a secure attachment with their foster or adoptive parents. Additionally, foster parents or adoptive parents needed to address the issue of loyalty to birth parents with their foster or adopted children. In essence, the participants’ stories indicated that they needed proof from their foster or adoptive parents that they were not trying to take the place of their birth parents, regardless of the nature of that relationship.

Lorisha said, “I needed to know that they were not there to take my mom’s position.” For many participants, hearing their foster parents verbalize this as Lorisha’s foster parents did was enough for the participants to begin to let down their guard and feel comfortable getting close to their foster or adoptive parents. Julie said, “I wanted to keep my mom as my mom and my foster parents to stay in their role and they were okay with that.” As with many of the participants, Julie’s realization that her foster parents were not trying to replace her birth mother was a complex process. This process involved letting go of the birth parent relationship, a relationship that will likely never be mended.

Like many of the participants who are securely attached to their foster or adoptive parents, Crystal still has issues with maintaining loyalty to her birth mother.

“I don’t call them [foster parents] mom and dad because I already have one. I know they are not going to try to take the place of my mom or dad, but I would rather call them Mr. and Mrs. Smith. I’m not afraid of calling them mom and dad, it’s just that I already have a mom and dad.”

Like many of the participants who wrestle with issues in maintaining loyalty to their birth parents and forming bonds with their foster or adoptive parents, Crystal does not have a positive relationship with her birth mom and does not know her birth dad, but yet still feels the necessity of recognizing their existence and importance.
Mary said, “I would rather be somewhere where I feel like I belong; in foster care I really didn’t belong because they’re not my biological parents and I’m really not up for meeting a new person.” Here, like other participants, Mary expressed her sentiments in that she has a family, even though her birth parents rights were terminated. Mary still acknowledges the relationship, which was characteristic of many participants.

When speaking about the secure attachment she has established with her foster parents, Hannah says:

I’m attached to them now, but at first when I moved in it was hard because it’s kind of hard when you’re a kid and you don’t know who to be loyal to. You have birth parents and you’re like, ‘Well, I don’t want my real parents to be mad if I love my foster parents.’ I didn’t know who I should call my mom and dad, but my foster parents never made it an issue. They said, ‘This is your mom and she’s your mom and we know that.’”

Hannah’s experience reflects that of many participants who needed to hear their foster or adoptive parents say that they were not trying to take the place of their birth parents. For many participants, this reassurance was enough to allow them to move closer towards establishing a secure relationship.

Heather commented on the role that loyalty often plays in impacting children in foster or adoptive care in establishing secure attachments: “Because as a black person you’re taught that no matter what they do they’ll always be your birth parent so you’re supposed to have connections.” Lorisha, who is also African-American, stated that, “My foster mom taught me that my mom’s my mom and no matter what she does she’s the one who brought me into this world and I should always respect her no matter what’s going on.” My data did not show that race was a factor in the degree to which children in foster or adoptive care experience the
need to be loyal to birth parents.

As the data suggests, participants who experienced multiple family transitions (i.e., foster care) do not experience attachment as a child would experience in a birth-parent relationship. Moreover, these participants experience attachment differently and as a result they engage in the attachment process differently. While their stories demonstrate that predictability and dependability are necessary and important factors in building a secure attachment, their stories also indicate that learning to deal with loyalty issues with their birth parents is an important step in establishing secure attachments with foster or adoptive parents. Even further, these participants must redefine their relationship to their birth parent and must realize that their birth parents are never going to parent them again. For many of the participants loyalty issues involved a triangulation of realizing their birth parents were out of their lives, and the need to deal with this reality by letting their birth parents go and finally the realization that while their foster or adoptive parents want to parent them they do not want to take the place of their birth parents.

Based on these interviews, I suggest that it is possible for children who have had an insecure relationship with their birth parents to enter into healthy, secure attachments with foster or adoptive parents so long as the important steps are taken such as: predictability; dependability; trust and loyalty issues; all which as demonstrated by the participants help to facilitate positive and meaningful attachments. Although Bowlby and Ainsworth do not assert that it is impossible that children with insecure attachment to their birth parents will be unsuccessful building attachments in future relationships, they do assert that it is unlikely. Whereas the participants of this study suggest that if all the important steps are taken by the foster or adoptive care parents, a secure attachment is possible between the child and their foster or adoptive parent. Even further, since the average age of our participants at the time
of foster care entry is 9.8 years old, we know that these are children according to Ainsworth and other attachment theorists have already developed their attachment style. However, according to this study, thirteen participants were able to overcome the characteristics of insecure attachment styles and form successful and secure relationships with their foster care or adoptive care parents.

The two participants in this study (13%) who recognized not having a secure attachment to their birth parents or their foster care parents expressed not being able to attach to their foster parents for the following reasons: (1) Couldn’t trust their foster care parents or couldn’t depend on them because of something that had happened; (2) didn’t feel a part of the family unit and felt as though they didn’t belong. Both of these participants had several foster families and entered foster care at nine years old and recounted troubling stories related to their foster care experiences.

Rhonda said:

I simply don’t feel like lines of communication are open, so that is what makes me not want to be closer to them. My foster dad isn’t involved and didn’t care about us foster kids so he’s not really part of the picture. I don’t think it’s possible to have a bond with my foster mom, because she’s not my biological mother, she says she loves me, but I don’t believe it. I never felt part of the family.

Jocelyn said, “My first home was no fun, I felt like Cinderella. I was the only girl. In the second home one of the foster boys made sexual advancements toward me. I didn’t feel safe here.” It is clear that these two participants never felt part of the family unit, something that the other thirteen participants experienced.

Finally, what this study suggests is that Bowlby’s attachment theory can apply to
children raised in foster care or adoptive care, but that there is a need to examine other factors in order to better understand the attachment process of children in foster or adoptive care.

The participants have illustrated that attachment styles in child-caregiver relationships can be relearned and that attachment styles formed in the child-birth parent relationship are not always reliable indicators of outcomes for future attachment relationships.

The intriguing question we must now examine is how (or if) the young adults in this study who recognized an insecure attachment with their birth parents will go on to form successful relationships with romantic partners. In this next section I will examine how the participants’ views on forming attachment with romantic partners is impacted in most cases by the negative relationships they had with their birth parents. As we shall see, the participants’ experiences demonstrate what Bowlby and other attachment researchers have long argued: the child-birth parent relationship has life-long implications.
ROMANTIC RELATIONSHIPS

The next area of research which my research addresses is how young adults who have been raised in foster or adoptive care experience romantic relationships. Of the study sample, four participants out of 14 (27%) recognized having a secure, healthy attachment to their current romantic partner; two were married and two were in committed relationships. Ten participants acknowledged having been in at least one or more romantic relationships, but were not in a relationship at the time of the study. One participant had never been in a romantic relationship and therefore is not included in this portion of the study.

In this section, I examine how participants’ feelings about forming attachments with romantic partners was influenced by the relationships they had with their birth and foster/adoptive parents. To review, twelve out of fifteen participants (80%) recognized an insecure attachment with their birth parents and thirteen participants (86%) expressed the ability to establish secure, healthy and meaningful attachments with their foster or adoptive parents. While one would assume that these participants, (86%) who had secure attachments with their foster parents would be able to enter into romantic relationships without anxiety, fear and a negative attitude, my data does not demonstrate such a presumption. Instead, my data demonstrates that for these participants, the birth parent relationship was more important and left more of an imprint on their feelings and attitudes as it related to forming relationships with romantic partners.

Most notably, when I asked participants to discuss their feelings and experiences regarding romantic relationships, overwhelmingly they discussed their anxiety, fears, and negative attitude about romantic relationships—emotions that they attributed to their relationships with their birth parents. When I asked participants to discuss the importance of predictability, dependability and trust in their romantic relationships participants addressed
how their inability to predict what would happen and to depend on and trust their birth parents has ultimately impacted their ability to predict what’s going to happen, depend on and trust their romantic partners in adulthood. I found this finding particularly insightful. It reflects what attachment theorists have long argued—that the child-birth parent relationship has lifelong implications.

As discussed, romantic relationships are different from child-birth parent relationships, because in order for them to be successful they must include reciprocal predictability, dependability, and trust. In child-birth parent relationships it is the parent who must create a system of trust, not the children. In a romantic relationship, both adults must work to create a positive, healthy, and secure attachment.

In this section, I examine the purpose of the study: How the disrupted birth parent relationship impacts romantic relationships.

*Predictability*

I asked participants how important they feel it is to be able to predict what is going to happen in their romantic relationships. In answering, participants told stories about how they felt their anxiety about being able to predict what’s going to happen in romantic relationships was impacted by their inability to predict in their birth parent relationships. Most of the participants’ perceptions of romantic partners were based on their experiences with their birth parents, regardless of time spent in foster care, often with loving and healthy families.

When I asked Amanda to discuss the importance of predictability, she said, “I get jealous not overly jealous, but I feel that all men cheat and will never stop. My dad cheated and my mom cheated on my dad and step-dad and everybody cheats. All men cheat, so it’s like,” “Why are you any different”? For Amanda like many participants, although their romantic partners gave them no reason to think that they could not trust them and or predict
what was going to happen next, most participants seemed to enter romantic relationships with uneasiness, anxiety, and fear that their romantic partners would abandon them.

When I asked Heather to talk to me about predictability and its level of importance in her marriage, she said that while she feels that she can predict what’s going to happen next in her marriage with her husband, she does not trust him. When asked why she said, “I was taught you really can’t trust anybody.” Although Heather clarified that her husband has never committed any acts that would cause her to distrust him, she says that she has never trusted him and is not willing to. When I asked her why she said, “If you can’t trust the person who gave birth to you then why should you be able to trust anybody else”? Heather’s sentiments are representative of many participants’ feelings and attitude towards romantic relationships; as she refers to her birth parent relationships instead of the secure attachment she has with her adoptive family.

When I asked Scarlett, who is engaged to be married, to discuss the importance of predictability in her relationship, she shared this story: “Sometimes I’ll be with my friends and I’ll be like,” “Hey, go hit on Kevin and see what happens and try to tempt Kevin and see what happens.” Like many participants, Scarlett feels the need to push predictability-- to test whether she can trust her partner. When I asked Scarlett why she does this, this is what she shared: “I do still have a low self esteem. I’m afraid of something happening. I’m afraid that I finally have someone who’s wonderful in my life and things are going how I want them to and I’m wondering when’s the next big disaster going to happen to screw it all up.”

When I asked Mary to discuss predictability as it relates to a romantic relationship that she has been in for one year, this is what she said:

It’s really hard. Because you know there are times that I think it myself he doesn’t love me, he doesn’t like me. Sometimes I think that my Mom doesn’t
love me, doesn’t like me, even though I know she does, it’s just what I’ve
gone through in the past years.

Mary is currently in a relationship with a man who is physically and verbally abusive to her. Earlier we learned that Mary was removed from her birth mother, in part because of domestic abuse. Although Mary was able to verbalize that she knows that such maltreatment is not appropriate, she also knows who is influential in her decision to remain in an abusive relationship for a year: “My mom. Just because of what’s happened in the past years with my biological mom and her boyfriends.” Mary’s experience demonstrates that the birth parent relationship has had lasting impressions and possibly impacted her ability to form healthy and meaningful romantic relationships. While Mary romantic relationship imitates her mother’s experience, Hannah actively avoids taking on her mother’s characteristics in regards to dating. When I asked Hannah to discuss predictability and its role in her romantic relationship she said:

I have found that I am very cautious in relationships like I don’t want to date men like my father and so when I am dating people and I see a temper come out and then they get mad at something I always put up my guard, even if I know that they would never hit me or do anything like that. It really scares me because like if I see two people arguing I want to run away instantly. I hate seeing that, because it takes me back to how I grew up and stuff. I don’t want to turn out like my parents did.

Like many of the participants, Hannah must be able to predict that her partner is not going to be physically or verbally abusive. Hannah’s relationship with her birth parents and the behaviors they modeled are something she avoids, and which have resulted in fear, anxiety and negativity about forming relationships with romantic partners.
When Rhonda was asked to discuss predictability this is what she shared:

I worry that they will leave or not be there when I need them to be and that they won’t care. My dad has no respect for women and no respect for even himself. I don’t think he cared a day in his life about his own children, I felt like we were just there. So, when I think of possible intimate partners, I don’t want them to be anything like my dad but I worry they will be like him. For example, they will not care about me, I will be the one make every effort for communication, and it will be like pulling teeth to get them to a favor for me.

That’s why my dad is like so I worry that is what every guy will be like.

Like many of the participants, Rhonda addresses fear that she will not be able to predict what’s going to happen in romantic relationships, based on her negative experiences in the birth parent relationship.

When I asked Julie to talk to me about predictability, its role in her marriage and whether she thinks it is an important part of a healthy relationship, this is what she said:

Finally, I am not worried that he will leave and after a couple of years. I just kind of realized that he’s here and there’s nothing short of intentionally making it possible for him to leave me, I couldn’t get rid of him. It took a couple of years before I could be sure that he wasn’t going to leave and to be sure that I knew what was going to happen.

Julie’s account reflects those of other participants. After a period of unease and anxiety, only four participants were able to let down their guard and have a secure attachment to their romantic partner.
Dependability

When the participants were asked to discuss dependability and its role and perceived importance in their romantic relationships, they again discussed dependability based on their past experiences and feelings. Once again, participants’ stories demonstrated how influential their relationships with their birth parents had been. When I asked Hannah about dependability and its role in her romantic relationship, this is what she shared: “It’s important for me to be able to depend on my boyfriend, something that is not easy for me to do, because of what I’ve been through in the past.” Hannah, like many participants refers to the instability of the relationship she had with her birth parents as it relates to her difficulty in getting close to, depending on, and ultimately trusting her romantic partners.

When Amanda was asked to discuss dependability, this is what she shared:

I’m very selfish when it comes to being in a relationship with a man. I feel like not that’s all about me, because I’m a very giving person, but I want someone that needs me as much as I need them but it’s like if I feel like I’m not coming at least second or third, compared to family and friends in the upper ranking then I’m upset.

Like many participants, Amanda lays out conditions for depending on romantic partners and what must take place.

When Brandon was asked about dependability, this is what he said: “I don’t depend on them,” a sentiment expressed by many participants.

Jennifer elaborates on this sentiment:

The one thing I worry about if I get into a relationship is being dependent on that person because that’s really lame so my goal before I get a boyfriend is to get really independent because I don’t want to be dependent. I don’t want to
be like, “Where are you at?” If he leaves me I don’t want to fall a part. I want to be able to be chill about it. I don’t want to freak out, but be able to move on.

Rhonda, like many participants, mentions fear and worry in depending on romantic partners. “I worry that they will leave or not be there when I need them to be.”

**Trust**

Of the four participants (27%) who had a secure and meaningful relationship with their romantic partners, each recounted stories illustrating their difficulty in initially trusting their romantic partners and letting their guard down, an emotional and complex process for the participant and their romantic partners. Again, participants referred to the birth parent relationship when discussing trust and its role in their romantic relationships. For instance, when I asked Amanda if she trusts her current boyfriend, this is what she shared: “With some things. I don’t trust him with women. I don’t trust him when he tells me where he’s been or what’s he’s been doing, but I trust him with my deepest and darkest secrets.” When I asked Amanda if her boyfriend had ever cheated on her or given her reason to believe she can’t trust him, she said, “No.” When I asked her why she didn’t trust her boyfriend, she said, “My dad cheated on my mom and my mom cheated on my dad and step-dad and everybody cheats. All men cheat.” Like many participants Amanda also attributes her distrust to her fear of abandonment. When I asked Amanda why she was afraid of being abandoned, this is what she said: “It’s happened all my life, so maybe just because I’m away from my parents, doesn’t mean it’s going to stop. What makes it different now, because you’re not my mom?”

Similarly, when I asked Felicia to talk to me about her experience with trust in romantic relationships this is what she shared:

I guess when guys would try to talk to me or hook up with me I think they are just there to hurt me because a lot of times I got hurt, so I mean being in
foster care and meeting dudes, and then getting hurt it’s just all too much at
one time. I haven’t talked to a lot of dudes, but the ones I have have hurt me
and stuff and so that made me push a lot of guys away. Basically I just feel
like I can’t trust them. Are they there to love me or are they there just how
everyone else was to come in my life and move on out like everyone else.

Heather, who has been married to her husband for three years, said that although her
husband has never given her a reason to distrust him, she does not trust him. When I asked
her why she said, “Because I just have trust issues. I trust my kids because they came from
me. I was taught that you really can’t trust anybody. I could never trust my Mom, so why
should I trust anybody else?”

When I asked Sam if it’s difficult for him to trust romantic partners, he said, “I guess.
I don’t want to start something that’s not going to end like it should, like what happened with
my parents. I don’t want to get into a relationship if I am not one hundred percent sure that
everything I need out of a relationship will happen.”

Julie, who has been married several years, said this about trust:

It took a couple of years before I could trust him. I was always afraid for like
the first while that the next time we talk he was going to break up with me.
The first couple of years I was worried about that, but now I know that if he
leaves then it will because of something out of our control.

Julie’s comment reflects the difficult process that most participants shared. Most
participants’ negative attitudes about establishing trusting romantic relationships were
impacted by an insecure birth parent relationship and their fear of abandonment.

When I asked Hannah if she trusts romantic partners easily, she said:

No, it’s really hard for me to trust people and get attached to people because I
just don’t want to get attached and it not work out. I don’t want to get left again. I think I feel abandoned by my parents sometimes. I don’t want to fall in love with somebody and then get hurt and have them leave and something not work out, it’s hard for me. You can ask my boyfriend now.

Like many participants, Hannah’s comment reflects her fear of trusting romantic partners, which has been impacted by her feelings of abandonment by her birth parents.

**Feeling unlovable or unworthy of love**

Feeling unlovable or unworthy of love, which burdens many of the participants in establishing secure and meaningful attachments with romantic partners, was a theme that emerged from the data. Predictability, dependability and trust do not fully explain the romantic attachment process experienced by young adults in this study. The need to overcome feeling unlovable or unworthy of love was another factor worthy of consideration.

Each participant recounted having a low-self esteem regarding romantic relationships that each attributed to the relationships with their birth parents. In addition, each of the four participants who had a secure attachment with their romantic partners (28%) also had formed a successful attachment with their foster or adoptive parents, but did not have secure attachments with their birth parents.

In this passage, Scarlett describes feeling unworthy of love and her disbelief that her fiancé could love her.

I didn’t see how anyone could like me or want to be close to me. That was the image I got from everybody else. That was how I perceived my dad beating me. Why did he do it? Because, I wasn’t worthy of love. I felt like my aunt and uncle gave me up because I wasn’t worthy of them and so if no one else could like me why should I. That turned into if I don’t like myself why should
anybody else? I still feel like I don’t deserve him like I don’t deserve the best for me, like he’s too good.

Hannah said this about her feelings of being unlovable:

I never had a high self esteem growing up because I never really had anybody take notice of me and I never felt like I was loved and then you get into bad relationships and that doesn’t help either. I think that it’s hard for me to be in relationships because I can’t really give myself to other people.

When I asked why, Hannah said: “I am afraid to, because I never really had to when I was younger. I kept to myself apart from taking care of my younger brother and sister.”

Common among many participants’ stories, Hannah’s comments reflect the impact that feeling unlovable and unworthy of love has on establishing healthy and positive romantic relationships, something that still challenges Hannah and many of the participants.

Here, Rhonda discusses the shame she feels for being in foster care, even though it was for reasons outside her control. “I thought I would never find someone if they knew my baggage. I thought I would be alone all my life.” Although Rhonda has been married to her husband for sixteen years she says, “I put my husband through hell trying to test his loyalty.”

Like many participants, just as she had once test her foster parents, Rhonda’s feelings of being unworthy of love and unlovable caused her to question why anyone would love her, compelling her to test the loyalty of her husband. Rhonda said, “I worry that I’m not good enough. I worry of them leaving me if I make some type of mistake or messed up.”

In order for the participants to be able to establish successful and meaningful relationships with romantic partners, they must be able to feel loveable and worthy of love. As illustrated above, participants who struggle with feeling unlovable and or unworthy of
love also worry about abandonment and fear of trusting romantic partners. These fears prevent attachment.

Finally, while attachment theory is reliable in helping us understand how healthy attachments are built in romantic relationships, it is not reliable in examining the attachment process that occurs among young adults who experience family disruption and go on to live in foster or adoptive care. Furthermore, attachment theory does not take into account other factors that are similarly important to predictability and dependability in order for trust to be built in romantic relationships such as needing to feel worthy of love. Additionally, attachment theory does not explain why some adults who had insecure attachments with their birth parents and secure attachments with their foster parents are incapable or unwilling to form secure attachments to romantic partners.

Interestingly, of the ten participants (71%) who expressed not trusting romantic partners and not wanting to, all expressed not having had a secure relationship with their birth parents. Additionally, all but two of the fifteen participants went on to have secure relationships with their foster or adoptive care parents. Three participants were married, although one participant did want to be married any longer at the time of interview. In addition, one participant recognized being in a physically abusive dating relationship at the time of the interview. Among the ten participants who did not trust nor want to trust romantic partners, I identified a factor that the participants revealed which contributed to them not wanting to form attachments with their romantic partners-- feeling unlovable.

Finally, one of the shortcomings of attachment theory is that it does not explain how and why a child can establish a secure attachment with foster or adoptive care parents but fail to be able to do so in romantic relationships. To date attachment researchers have not examined how young adults go on to develop secure attachments with foster or adoptive care
parents upon entering foster care with insecure attachment styles that they developed in the birth-parents relationship. Additionally, attachments researchers have not examined the impact of insecure birth-parent relationships on romantic relationships. To date, the findings of Ainsworth’s Strange experiment is still used to predict future attachment styles based on the child-birth parent relationship. The Strange experiment assumes that the attachment style developed in the birth-parent relationship will follow children into their relationships throughout their lives. The findings from my study indicate that there is a need for attachment researchers to study attachment based relationships.

All participants who recognized an inability to form secure relationships with romantic partners rationalized not entering into romantic relationships and or not trusting romantic partners based on the distrust and insecure attachment that they had with their birth parents. Nevertheless, all but two of these participants had formed secure attachments with their foster or adoptive care parents. In the next section I will examine social and environmental factors that impact families and child outcomes.
SOCIAL AND ENVIRONMENTAL FACTORS

Assuming a meso and macro level perspective takes into account that “People’s private lives are affected by what is happening in the society around them. Many of their personal troubles are shared by others, and these troubles often reflect societal influences” (Lamanna & Riedmann, 2006, p. 11).

Such social factors include but are not limited to: parental mental illness; substance abuse; poverty; single parenting; divorce; and child abuse all of which can and do often impede upon the ability of parents to successfully care for and raise their children. Even further, such social factors influence the socialization of children. In this study, poverty, parental mental illness, substance abuse, single parenting, divorce, and child abuse are a myriad of social factors that are involved in the socialization process of the participants. Table 2 indicates the specific social issues that played a role in each of the participant’s birth parent relationships where primary socialization took place. The knowledge of this information was gained during the interview process. Please note that below each participant’s name I have included the attachment style of each important attachment relationship such as; birth parent relationship (BP); foster or adoptive relationship (AP or FP); and romantic relationships (RR). The attachment styles are indicated as follows: ‘I’ represents an insecure attachment style and ‘S’ indicates a secure attachment style. As noted earlier, because Ben reported not having been in a romantic relationship he is not included in the romantic relationship portion.
### TABLE 2  Social issues impacting participants

|      | Heather | Felicia | Scarlett | Julie | Hannah | Sam | Neila | Crystal |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |
|------|---------|---------|----------|-------|--------|-----|-------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|
| BP   | I       | I       | I        | I     | I      | I   | I     | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       |
| AP   | S       | S       | S        | S     | S      | S   | S     | S       | S       | S       | S       | S       | S       | S       | S       | S       | S       | S       | S       | S       | S       | S       | S       | S       | S       | S       | S       |
| RR   | I       | I       | I        | I     | I      | I   | I     | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       |
| Substance abuse | Substance abuse | Substance abuse | Substance abuse | Substance abuse | Substance Abuse | Substance Abuse | Substance Abuse | Substance Abuse | Substance Abuse | Substance Abuse | Substance Abuse | Substance Abuse | Substance Abuse | Substance Abuse | Substance Abuse | Substance Abuse | Substance Abuse | Substance Abuse | Substance Abuse | Substance Abuse | Substance Abuse | Substance Abuse | Substance Abuse | Substance Abuse | Substance Abuse | Substance Abuse | Substance Abuse | Substance Abuse |
| Child abuse | Child abuse | Child abuse | Child abuse | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Parental Mental Illness | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Domestic Violence | Domestic Violence | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| Ben | Jennifer | Rhonda | Jocelyn | Mary | Amanda | Brandon |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |
|-----|----------|--------|---------|-------|--------|----------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|
| BP  | S        | I      | I       | I     | I      | I        | S       | S       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       |
| AP  | S        | S      | I       | S     | I      | I        | S       | S       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       |
| RR  | not applicable | I      | I       | I     | I      | I        | I       | S       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       | I       |
| Substance abuse | Substance abuse | Substance abuse | Substance abuse | Substance abuse | Substance abuse | Substance abuse | Substance abuse | Substance abuse | Substance abuse | Substance abuse | Substance abuse | Substance abuse | Substance abuse | Substance abuse | Substance abuse | Substance abuse | Substance abuse | Substance abuse | Substance abuse | Substance abuse | Substance abuse | Substance abuse | Substance abuse | Substance abuse | Substance abuse | Substance abuse | Substance abuse | Substance abuse | Substance abuse |
| Child abuse | Child abuse | Child abuse | Child abuse | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Parental Mental Illness | Parental Mental Illness | Parental Mental Illness | Parental mental illness | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Domestic Violence | Domestic Violence | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

**Poverty**

“In 2006, 36.5 million people were in poverty, not statistically different from 2005” (U.S Census bureau, 2006, p.10). Sociologist Anne-Marie Ambert says that the following structural aspects of the organization of the American society constitute the major causes of family poverty:

Low-paying and part-time jobs, particularly among women and minority groups; the decline of well-paid entry level jobs in manufacturing; discrimination and
segregation, which prevent various population groups from accessing good schools and job opportunities; unemployment related to low educational qualifications in some segments of the population; pay inequity by gender (women are paid less than men for comparable job qualifications) and lack of social benefits and health insurance for families. (2001, p.166)

The consequence of poverty on families is devastating. Ambert says that “Children born into indigence or who are poor for many of their formative years are denied the opportunity to actualize their abilities, to receive a good education, often to live in a safe neighborhood, and even to be fed adequately”(2001, p.166). Consequentially, the stress that poverty places on the parental unit is also devastating. Because many parents are forced to work several low-wage jobs they often lack the time to spend with their children, time which is invaluable in building healthy attachments. The stress of unemployment also hinders the emotional state of parents, often leaving them feeling worthless, disengaged and alienated. This level of stress can undoubtedly impact parents’ desire and ability to engage in the attachment process with their children.

Additionally, families affected by poverty often lack social capital. “In families, social capital is often conceptualized as the time and energy that parents invest in their children” (Stewart, 2007, p. 45). Coleman (1988) explains that social capital can be lacking in a family if an adult member is missing, such as in single parent families, or if parents and children don’t get along. Single parent families are very vulnerable to poverty. “If current trends continue, says Rodgers (1996) over half of the present generation of children will at some point live in a single-parent family before age 16. Ambert says “these children are much more likely to be poor than those who live with both parents. In 1991, 53 percent of mother-headed families were below the poverty level, compared to nearly 22 percent for

In 1958, child development expert Urie Brofenbrenner published a paper titled *Socialization and Social Class through Time and Space* in which he argued that working-class parents use physical punishment more frequently than middle-class parents. Middle-class parent, he argued, most often employ “reasoning, isolating and love orientated discipline techniques (Erlanger, 1974, p. 68). Subsequent research suggests that although “there are substantial differences in how parents of differing social classes position raise their children” (Kohn, 1990, p. 389), “the differences are not so much in how parents discipline but why they discipline” (Bidwell, Vander Mey, 2000, p. 170). What’s important is that these researchers point out that there are differences in the way that parents parent according to their social class.

In my study, all fifteen participants recounted living in poverty while in the care of their birth parents. When I asked Hannah to talk to me about the environment of her birth parent’s home this is what she shared:

We didn’t get a lot of hugs, kisses, stuff like that and we were really poor. We grew up poor, we didn’t have a lot of money and things and so we didn’t do a lot. We didn’t go out and do things. We didn’t have nice things and it just wasn’t a very loving environment.

While Hannah refers to the physical and emotional consequences of poverty, here Heather discusses some of the material consequences that poverty and unsanitary living conditions had on her: “My foster family bought me new clothes because all of my clothes had holes in them because rats and roaches ate through them while I was at my home.”
Here, Amanda discusses how living in poverty with her birth father and step-mother made her feel:

I was constantly doing things to my daughter’s head and my head, like I’m a white girl, but I’m wearing grease on my hair to make sure I don’t get lice. That was not comfortable to me. We had a three bedroom house and there were like six kids and two adults and a baby, so seven kids and two adults, so it was just a small environment. I couldn’t handle it.

Here Crystal discusses ways that her birth mother would get money to help support her and her brothers: “My mom had a boyfriend and she’d get money from him and then she had this one person that she was black mailing so we’d get money from them too or like we’d get food from food pantries and stuff like that.”

The participant’s accounts demonstrate that poverty within the family can cause the following issues: increased stress in the home; lack of food; parents’ involved in illegal activity to procure resources; lack of supervision; lack of attention by parents; going to school wearing inadequate clothing; and social embarrassment. As the participants and sociological literature suggest poverty is interrelated to other social issues that negatively impact the family such as; substance abuse, divorce, and child abuse.

Substance Abuse

Eleven of the fifteen participant’s birth parents abused substances such as alcohol, marijuana, and crack cocaine. Sociologists Hawkins, Catalano, and Miller say “Parental alcoholism places children at risk of developing problems and of becoming victims. The presence of an alcoholic parent often disrupts family functioning, impairs proper parenting, and increases the likelihood of divorce (1992, p. 440). “Children of alcoholics are often affected by interparental conflict and violence” (Fitzgerald et al., 1993) and “Families that
combine alcohol and violence also tend to suffer from episodic unemployment and poverty, as well as erratic parenting practices—all situations that in themselves place additional stressors on children” (Ambert, 2001, p. 440). Kornblum and Julian note the following:

The emotional effect, which is part of any family crisis, is heightened when the crisis itself is socially defined as shameful. The effects of those of alcoholism and drug use produce negative reactions. The children of an alcoholic or drug addicted parent frequently develop severe physical and emotional illnesses. Since alcoholics and drug users are often unable to hold jobs, the outcome may be poverty for their families. (2001, p. 131)

For Amanda, like many participants entry into foster care occurred in part because of parental substance abuse. Amanda says: “I was taken away from my dad’s care when I was like six or seven and it was because he was abusing drugs and the environment wasn’t good.”

When I asked Scarlett about her relationship with her birth father, the issue of substance abuse was a salient feature that impacted their relationship. Scarlett recalls this by saying: “My father was a druggie and he abused me so when I finally got out of the house I hated him. He would also beat me and there are also reports of sexual abuse, but I don’t remember it.” Like many participants whose birth parents abused substances, Scarlett was capable of recalling ‘good times’ which were when her father was not abusing drugs, although these instances as she recalled were rare.

Like Scarlett, Sam also remarked that the relationship with his birth parents was impacted by drug use. “As for the relationship, there wasn’t much quality time spent together. They drank a lot, there was drug use and they smoked a lot. We spent a lot of our time outside doing miscellaneous things.”
As a young adult, Neila has chosen not to have a relationship with her birth father because of his drug use. Here Neila says: “I don’t have a relationship with him because he did drugs and stuff and I don’t want to have a relationship with him right now.”

The participants’ experiences demonstrates that parental substance abuse can and does impact children’s perceptions and attitude of their parents, the quality parenting and quality time parents spend with their children. In addition, Scarlett points out a critical factor of parental substance abuse in that it influences other social issues within the family such as: poverty, child abuse, and divorce. As sociologists have demonstrated (Ambert, 2001, Kornblum, Julian, 2001, Fitzgerald, 1993, Hawkins, Catalano, Miller, 1992) abuse of substances impacts the institution of family in a number of negative ways that are nevertheless impacted by and influence other negative issues within the family such as: child abuse, poverty, and divorce.

Child abuse

Nine participants of the fifteen participants in this study expressed having been victims of physical abuse by their birth parents. Of the nine participants, four participants, (Rhonda, Scarlett, Brandon, Amanda) expressed having been sexually abused by their birth parents. One participant (Rhonda) acknowledged that their stepparent was the perpetrator of the sexual abuse. Between 850 and 1,800 deaths result each year from child abuse, particularly from neglect among children younger than age five (Smithey, 1998). Ambert remarks that “The literature on child abuse tends to focus on children’s developmental outcomes rather than on their current suffering, struggles, and small victories. The everyday life of these children is not well documented at all” (2001, p. 412). “What is known is that overall, children who have been or are abused, on average, do less well in school (Sternberg, 1993), have more peer-related problems (Howes, 1988), and are less reciprocal in their relations (Salzinger, Feldman, Hammer, 1993). Salzinger, Feldman, and Hammer remark
that protective factors must exist for severely abused children who turn out well (1993).

“Protective and risk factors may be found at the microsociological level (the child’s personality), at the family level (supportive siblings or one parent who is warm), or at the macrosociological level (good schools and a neighborhood that is largely prosocial, (Ambert, 2001, p. 413).

Kaufman and Zigler (1987) and Widom (1990) have estimated the transmission rate of family violence to be about 30 percent or lower. “Abuse is not unavoidably transmitted, because several factors enter into play in the causality chain of transmission. This includes the meaning that people attach to having been abused” (Korbin, 1986). “Some children who are beaten interpret this as justifiable punishment, yet, because it has hurt them, they decide later on to utilize other forms of punishment with their own children” (Ambert, 2001, p. 413).

Sociologist, DiLeonardi (1993) remarks that “Physical child neglect is related to parents’ drug addiction and mental illness. Above all, it stems from poverty as well as the stressors and social isolation created by poverty.”

Sociologist Ambert says that “within a life course sociological framework, sexual abuse constitutes an inappropriate sexual socialization. One immediate consequence is that sexual contact with an adult focuses the child on his or her own sexuality from a less than healthy perspective very early on in life” (2001, p. 418). Subsequently, “the abused child begins to define herself in terms of sexuality and perhaps material gains” (Ambert, 2001, p. 418). Even further,

The incidence of child sexual abuse is even more complex to estimate than that of physical abuse because of the element of victims’ shame or ignorance, perpetrators’ complete secrecy, and lack of visible physical symptoms. Overall, the consensus is
that about one out of every four females is sexually abused before she reaches age 16.

(Ambert, 2001, p. 417)

The issues that sexual abuse and physical abuse manifest in the lives of children can be devastating. The participants in this study, five who experienced physical abuse and four who experienced sexual abuse demonstrate that the impact of abuse can impact parental attachment as well as perceptions of the self and of romantic relationships.

All the participants (nine) who experienced some form of abuse in the birth parent relationship also recalled having difficulty trusting romantic partners and forming romantic relationships.

Here Amanda recalls the embarrassment and shame of being sexually abused:

My dad just woke up from this deep sleep and was like “Amanda I got something for you to play with” and he showed himself to everyone and I was so embarrassed and that was the first time that DHS was concerned. I would never leave my daughter alone with him.

Like many participants, Amanda’s lack of trust for her father has been impacted by his abusive behavior. When I asked Brandon about his relationship with his birth parents, he immediately spoke of the physical and sexual abuse that was inflicted upon him by his birth father.

My father was the largest source of abuse and other fun and interesting things. Our mother was so checked out to be really aware of what was going on. On a regular basis my father sexually, physically and emotionally abused me. As the matter of fact, I was shot when I was two or three and had a 22 run straight past my leg.
When I asked Brandon how he coped with the abuse this is what he shared: “One, I ended up playing protector for my younger brother and sister. I took a lot that was headed their way and secondly I pretty much tried to kill anyone that came near me.”

Jocelyn says that “My mother’s husband sexually molested me and would also masturbate with me in the room. My mother didn’t take any action at all.”

When I asked Jocelyn how she feels the sexual abuse has impacted her life this is what she shared:

- I didn’t feel like I had any self worth. My own parent chose someone else over me.
- How was I worthy to anyone else or myself? I was fairly promiscuous as a teen, looking for anyone who would pay attention and show me affection. In my marriage, I have huge intimacy issues even with my husband to this day. Sex was something that was taken from me young, not something I had a choice about giving. I am not a sexual person because of that, my husband is and sometimes it does cause some hurt feelings.

The participant’s narratives demonstrate the influence that forms of abuse have on the socialization of children, impacting feelings of self worth, self esteem and how they view relationships.

Divorce

Four of the participants in this study expressed that their birth parents were divorced from each other. Because of the participant’s young ages when their parents divorced, participants were not able to recall what their experience of the divorce was like. Sociologist Cherlin points out that “Although most children do not experience developmental problems, divorce is certainly a strong risk factor and a source of stressors (1999). “Although differences are not large, on average, children and adolescents whose parents are divorced
tend to do less well in school and have more behavioral and emotional problems than children in intact families (Zill, Morrision, and Coiro, 1993). “They are also at greater risk for delinquency and for premature births” (Ambert, 1999). “Recent longitudinal studies following children up to age 33 indicate that, where emotional problems develop, the effect of parental divorce may last and can even intensify” (Cherlin, 1998). Of the four participants who’s birth parents divorced also recognized difficulty trusting romantic partners and forming romantic relationships.

**Single Parenting**

Six of the fifteen participants came from single-parented birth parent families. Although participants did not directly speak to the issue of being single parented, other factors that participants spoke about in the earlier narratives are reflective of issues that challenge single parents such as poverty. “Never married parenting, as well as parenting following separation or divorce, is problematic, because, it more often than not stems from poverty and leads to poverty” (Coley, Chase-Lansdale, 1998). Poverty alone is perhaps one of the most pervasive issues impacting single parents. In addition, single parents often lack the social support that is helpful in childrearing.

**Parental Mental Illness**

Five participants of fifteen in this study expressed that their parents had mental illnesses while parenting them. One participant’s (Julie) birth mother had downs- syndrome and mental retardation and was unable to care for Julie as a result. The other four participants acknowledged that their parent’s mental illness impacted their relationships with them as well as the overall functioning of the home environment. Ambert says that:

Parents who suffer from *severe depression* and mental illness place their children at a double disadvantage. First, these children are at greater genetic risk. Second, the
children have a higher probability of suffering from a stressful familial environment created by their parents’ illness, in part via detrimental parenting practices. (2001, p. 436).

When I asked Julie how her mother’s mental illness impacted their relationship this is what she shared:

I’ve always been the parent and she the child just because I’m a fairly intelligent person and resourceful. Mom is always more than happy to let me lead and she’ll follow along with whatever I say so um she’s really great. She never abused me or anything it’s just that she didn’t have the skills to take care of herself let alone a child.

Mary expressed that like her mother she also has bi-polar disorder. In commenting on this she said: “I have bi-polar and it’s really hard for me to deal with people screaming and yelling and my family does that a lot. So we get frustrated sometimes like when we’re not on our meds or whatever, but other than that we get along pretty good.”

When I asked Jennifer how her mother’s depression impacted their relationship this is what she said: “She was severally depressed all the time. There were times where she would forget who we were. She was also very paranoid and believed the KKK was after us so we moved a lot.”

Each participant’s narrative has demonstrated what the sociological literature on parental mental illness suggests in that the family environment tends to be unstable, unsafe and uncertain.

*Domestic Violence*

Three participants of the fifteen in this study recognized that their birth parents were involved in domestically violent relationships while they were in their care. “On average, children of abused mothers have more behavioral and psychological problems and exhibit
less interpersonal sensitivity (Rosenberg, 1987). “Other long lasting effects include lower psychological well-being in adulthood, increased risk for depression, as well as poor parent/child relationships” (Ambert, 2001, p. 408). Of these three participants, (Hannah, Sam, Mary), Hannah and Mary both recounted having been in domestically violent relationships themselves.

When I asked Hannah how she feels she has been most influenced by her parent’s relationship this is what she said:

I am very cautious in relationships. I don’t want to date men like my father. When I am dating people and I see a temper come out and then get made at something I always put my guard up. Even if I know they would never hit me or do anything like that it still really scares me. If I see two people arguing I want to run away instantly. I hate seeing that, because it takes me back to how I grew up. If they call me names and disrespect me, I’m just really cautious. I don’t want to turn out like my parents did.

When I asked Mary who’s been in a domestically violent relationship for two years why she tolerates such abuse this is what she shared: “My mom. Just because of what has happened in the past years with my biological mom and her boyfriends.”

Both Mary and Hannah have been socialized in domestically violent families; where they witnessed their mothers endure the brunt of spousal abuse. Consequently, Mary and Hannah’s views of romantic relationships were in part influenced by their birth parents who set forth the norms and standards.

Throughout this section I have explored how the following social issues impact the socialization of children in the family unit: poverty; substance abuse; child abuse; divorce; single parenting; and domestic violence. The family unit is perhaps the most powerful
institution of socialization because it is within the family unit that culture, values, knowledge, ideas, language and normative behavior is transmitted. For children, parents are social actors who teach children how to be members of society and in turn how to participate in society. Children learn from their parents what is normal and what is acceptable. For this reason it was especially important that I examine the social and environmental factors that played a powerful role in shaping the lives of participants and in turn play a profound role in shaping children’s lives throughout the life course.

Understanding the social issues that impacted the participant’s lives is also important as it recognizes that there are a plethora of factors involved in the attachment process that are beyond the control of the children and at times out of the control of parents such as poverty for example. Even further, the examination of the social issues involved in participant’s families further explains their need for foster care entry. In addition, the participant’s narratives and the sociological literature demonstrate that social issues are all interrelated and influence each other, which in turn disrupt the family unit from functioning healthy. In essence we can visualize poverty, substance abuse, divorce, child abuse, single parenting and parental mental illness as a circle constantly rotating and influencing each other. Sociologist C. Wright Mills (1959) said “The Sociological perspective enables us to grasp the connection between history and biography.”

By history, Mills meant that each society is located in a broad stream of events. Because of this, each society has specific characteristics—such as its ideas of the Proper roles of men and women. By biography, Mills referred to the individual’s specific experiences in society. In short, then, people don’t do what they do because of inherited internal mechanisms. Rather external influences—our experiences—become part of our thinking and motivations. The society in which we grow up, and
our particular corners in that society, lie at the center of our behavior. (p.5)

Mill reminds us then how powerful socialization within the family unit is and the need to consider individual traits and child outcomes as the result of socialization within the family and other social institutions that play a role in socializing children within the family unit. Lastly, I would argue that the examination of the social and environmental factors that impact family functioning are as equally important to consider when attempting to understand the attachment process of individuals. Even further, I would argue that a successful, positive attachment between a child and his/her parents is in part impacted by his/her social environment. Consequentially, the positive attachment is not solely the result of the consistent emotional and physical responsiveness of his/her parent, but also a result of his/her positive social environment. Likewise, I would suggest that an insecure child-parent attachment is not exclusively the result of inconsistent parenting but also the result of negative environmental and social forces on the family as this section examined.
DISCUSSION

After engaging in these interviews it became apparent that there were aspects of the attachment process related to child-foster parent relationships and adult romantic relationships that current literature has not yet captured. By listening to the participants tell their stories about their attachment based experiences in birth-parent relationships, foster and adoptive parent relationships and finally in romantic relationships, I was able to gain a more comprehensive understanding of the obstacles that participants’ faced in establishing attachments with foster or adoptive parents and romantic partners. Additionally, I was able to gain a better understanding of some of the social factors that impacted the participants’ ability to form successful, meaningful and trusting relationships with romantic partners because of negative relationships that they had with their birth parents.

This study has contributed to sociology by examining the sociological context in which the participants live and are first socialized, which is the family. In addition, this study examines how social problems and social issues such as: poverty; substance abuse; divorce and single parenting impact the functioning of families. In turn, this study examines the critical role that social and cultural environments have on families and children’s development. Moreover, a sociological perspective on the family differs from a psychological perspective as it examines environmental and social influences external to the family unit such as: culture; community; education; neighborhood and economics, all which shape families.

In this study I explored the profound influence that family has on shaping children. Important to note however, the family is where primary socialization occurs and as children grow up they are engaged in secondary socialization. Understanding the influences on
children outside of the family unit is very important. Sociologist Anne-Marie Ambert says that “After parents, schools have traditionally been considered, the main agent of socialization” (2001, p.211). Hannah grew up in a two parent family with parents who regularly abused substances, were physically and emotionally violent with one another and lacked the human and social capital to properly care for her and her siblings. Despite the adversity Hannah faced in her home environment prior to entering foster care, Hannah found refuge in school. “I really liked school, I kept my grades up and that was the only thing I had. I kind of leaned on school when I was younger.” Perhaps Hannah had a teacher in school who showed special interest in her or perhaps the structure of school such as knowing what to expect provided Hannah with the comfort and support she was lacking at home. Hannah went on to graduate high school as valedictorian.

Hannah’s story illustrates what research clearly demonstrates: children who grow up in troubled families yet have access to adult mentors have better developmental outcomes and improved life chances compared to kids who have no such mentorship. Mentors can be teachers, coaches, extended family members, family members of friends, neighbors, church clergy, etc.

Youth who enter foster or adoptive care not only enter into new families, but also new social environments such as: religious organizations; athletic clubs; and youth groups and are often afforded more social opportunities. Such opportunities are made available to youth in foster care in part because their foster families are given financial resources to help with child rearing and also because foster families typically have more financial resources altogether. In addition, foster families tend to be more active in the community, church organizations and play a role in encouraging their foster children to get involved in activities. Sam recognized that his adoptive family provided him with opportunities that would likely have not been
available to him in his birth parent family. “There would have been no chance for me to do
the things I did if I would have lived with my biological parents. I played four sports in high
school and I got to be in band.” Because Sam’s adoptive family had the financial resources
Sam was able to be involved with athletics and music and is now playing football in college.
Crystal recognized that one of the benefits of living with her foster family was getting
introduced to their church. “When I first moved in there I was so happy. I was really happy
because I got to meet my foster mom and I got to go to church. I loved singing in the choir.”

Important to note is that when youth enter foster care their social environments often
change drastically as represented by Hannah, Sam and Crystal’s stories. Because foster
parents typically have human and social capitol (which economically and disenfranchised
families often lack) they are able to provide a positive family structure and social
environment for their foster children. Moreover, children who enter foster care experience
resocialization by their foster parents. Through their foster parents, foster children relearn
their role as children, students and often their gender roles. Even further, foster children are
introduced to what is often a new set of ideas about values, faith, knowledge, rules and social
expectations.

Understanding the socio-cultural impact of foster care is crucial when we attempt to
understand how youth in foster care negotiate relationships with foster/adoptive parents and
as they learn to become members of society. My study, then, examines how young people
who experience disruption in their primary socialization contexts and are forced into the
foster care system experience attachment in their romantic relationships during late
adolescence and young adulthood. In doing so, it examines not only the relationship between
disruption in the birth family and romantic attachments, but also the relationship between
forced entrance into the foster care system and romantic attachments.
In this study I have used attachment theory as a framework to understand the attachment based experiences of the participants. Attachment theory emphasizes that in order for children to securely attach to their birth parents children must be able to predict what is going to happen, depend on their birth parents, and trust them. Adult attachment theory also emphasizes that in order for the romantic relationship to be successful, both partners need to be able to predict what is going to happen, depend on each other for support and love and ultimately trust each other. My findings support these claims and further suggest the relevance of the principles of attachment theory. However, my study suggests that attachment theory does not entirely explain the attachment process of children in foster care as they attempt to establish relationships with foster or adoptive parents and later in their lives when they enter into romantic relationships. Even further, my study demonstrates that beyond predictability, dependability and trust, participants also needed to overcome loyalty issues to birth parents in order to establish secure relationships with their foster or adoptive parents. Additionally, participants needed to overcome feeling unlovable or unworthy in order to establish trusting, healthy and secure relationships with their romantic partners. Also, our study suggests that attachments styles that are gained in the child-birth parent relationship are not always reliable indicators of attachment outcomes for future child-caregiver attachments. In this study, insecure child-birth parent attachment styles appeared to have more of an impact in effecting participant’s romantic relationships than their relationships with foster or adoptive parents.

Given these findings, I propose that the explanatory power of attachment theory, as a general framework for understanding the attachment process among children and adults would be improved by recognizing that attachment is experienced differently throughout the life course, especially when family disruption and multiple family transitions are involved.
Taking this into account would enable researchers to better understand how the attachment process is experienced differently by youth in foster care and later on in romantic relationships. Also, understanding that attachment theory is limited in its explanation of all attachment-based experiences among diverse populations might compel researchers to examine other groups that experience a disruption in caregivers. Such groups might include: children raised in foster care, orphanages or children who experience family disruption as the result of parental military leave. It is important to note that based on the participant’s narratives, attachment researcher’s belief that the child-birth parent relationship has life long implications is applicable to the findings in this study as evidenced by the quality of the majority of the participant’s romantic relationships based on their birth-parent relationships.

In understanding why some young adults who experience insecure attachments are able to form successful attachments with romantic partners while others are unable to do so I propose may be in part due to resiliency. Steven Wolin, who first studied alcoholic families, discovered that not all children growing up in the same family are alike. Some children in his study who experienced and suffered from chaos, neglect, and abuse developed serious emotional and behavioral issues and self-esteem problems. Other children who came from disturbed families appeared much less scarred as evidenced by lower rates of emotional, behavioral and self-esteem issues. These children grow up to be healthy, well-adjusted and happy adults (1988, para. 1). Resiliency may explain why some young adults with insecure birth parent attachments are able to move on and form secure attachments in foster or adoptive and romantic relationships.

Wolin conceptualizes resiliencies as distinct aspects of the self. All children obtain images of themselves from their parents’ statements and behaviors. Some reflections are pleasing, others are not. Troubled families injure their children by reflecting negative and
ugly images. To the extent that children obtain only negative reflections, they will grow up
to be damaged. To the extent that they found alternative images, they were able to rebound
(Wolin, 1988).

We must consider that participants in this study who established successful
relationships with their foster/adoptive parents also entered social environments that differed
greatly from their birth parent environments. Positive differences they recognized were:
financial resources, drug-free environments, access to community services, church
organizations, increased educational opportunities and the encouragement by foster/adoptive
parents to reach positive educational and personal goals. The two participants who did not
form successful attachments with their foster parents recalled not having an adult mentor
outside their foster families that they could trust. In addition, you will recall Sam and
Hannah (participants in this study) who are brother and sister. Unlike Sam, Hannah did not
feel that she could trust her parents or depend on them and therefore did not feel a secure
attachment to them. Hannah did not feel as though her parents cared about her or her
siblings. Although Sam recognized that there were problems in the home, he felt his parents
did care about him and that he was securely attached to them. I reference Hannah and Sam’s
story because it’s important to recognize that children of the same family are often treated
differently by their parents and often perceive their childhoods differently depending on their
experiences. In addition, children of the same family are afforded different opportunities
when they leave their homes and enter school, organizations and form friendships. Therefore
a child in a family might establish an adult mentor whereas his or her sibling might not be as
lucky.

Based on the interviews, it appears that participants feel much more anxiety about
trusting romantic partners than they do about trusting their foster or adoptive parents. A
possible explanation as to why ten participants in this study expressed a general distrust, anxiety and negative attitude about romantic partners may be in part due to the fact that prior to foster care most participants did not have a positive experience of witnessing an adult romantic relationship. In addition, thirteen foster/adoptive families in this study brought stability, structure, positive support, community resources, education and knowledge to the participant’s lives who recognized being securely attached to them. Because the social expectation is different for romantic partners, people in relationships are not expected to provide the kinds of resources that foster families are expected to provide to their foster children, resources that help to facilitate a successful attachment and positive environment. Even further, many of the participants in this study are still very young and therefore we can not be certain that some of the participants who expressed negative views about romantic relationships won’t change their attitude. Because many of the participant’s first experience of romantic relationship were based on their parent’s relationships many of which were negative, many participants recognized that their views are still being shaped by their environment and experiences.

In addition is important to note that resiliency is not necessarily an individual matter and that there are social factors and social influences that influence children’s lives in a number of ways. Such social factors include: poverty; child abuse; single parenting; divorce; parental mental illness; educational resources; community resources; and adult mentorship. While Wolin’s theory is provocative it does not account for social factors that may be in part influence resiliency as we have examined. Moreover, understanding social factors is important as we must understand the social factors that are outside children’s control and that play an important role in their socialization. While attachment theory is helpful in understanding the attachment process from a micro or individual perspective, it does not
explain the macro level social issues that are also important in understanding family
dynamics and the socialization of children. Such macro level issues are culture, poverty,
racism, discrimination, classism and the impacts of social stratification on families.

In conclusion, there is a need for future researchers to continue to investigate how
attachment is established by diverse populations of children and adults who have experienced
family disruption. I recommend that future researchers conduct longitudinal studies of
children who have been permanently removed from the care of their birth parents and placed
into foster or adoptive care in an effort examine their attachment process as it relates to
caregiving relationships, peer relationships and in romantic relationships.

In her work on stepfamilies, sociologist Susan Stewart (2007) draws upon extant
literature in explaining step-fathers lower level of engagement and warmth with their
stepchildren when she cites Glenn (1994) who says “An equally compelling argument for
these commonly cited findings is that stepfathers and stepchildren are not given an
opportunity to bond early in the child’s life. While stepchildren and foster children’s
experiences are very different from each other, they never the less must learn to renegotiate
relationships, attachment and to a lesser degree step children encounter some level of family
disruption. With this in mind, future researchers should investigate how the attachment
process of stepparent-stepchildren relationships is similar to foster parent-foster child
relationships as foster children and foster parents must also learn to negotiate each other’s
role in their lives.

Additionally, future researchers should explore how Wolin’s theory of resiliency links
with social factors that impact families and child outcomes, particularly families that are
economically and socially at risk. Future researchers should explore why some young adults
who are able to establish secure relationships with foster or adoptive care parents experience
challenges forming secure relationships with romantic partners. Finally, attachment theory would benefit from recognizing sociological perspectives as sociology would enhance attachment theory’s understanding of social and environmental factors that are involved in the socialization process of children.
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FIGURE 1

FIGURE 1. ATTACHMENT STYLE DIAGRAM

PA = Parental Attachment  FA = Foster Attachment  RA = Romantic Attachment

Theorized relationship
Positive deviance
REFERENCES


