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ATTACHMENT IN LATE-ADOPTED, RESIDENTIAL-CARE AND COMMUNITY ADOLESCENTS: A MULTIMETHOD COMPARATIVE STUDY

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"HIGH RISK" CHILDREN IN ITALY

LATE-ADOPTED

2nd Coutry in the World for **International Adoptions** [IA], after USA (CAI, 2017)
- **1400 – 4000 p.a. from 2010-2018**
  - 43 – 47% adopted between 5-9 years old
- Mostly from Russian Federation
~ 1000 Domestic Adoptions [DA] p.a.

International research findings:
- Overrepresented in mental-health services ($d = .72$, Juffer & van IJzendoorn, 2005).

In **ATTACHMENT: less security** ($d = .80$) **and more disorganization** ($d = .36$) than community and early-adopted peers, but **less disorganized than institutionalized ones** (Van den Dries et al., 2009).

RESIDENTIAL-CARE

21.035 children (~16.534 excl. UMs)
- 62% from 14-17 years old (~ 86% > 5 years)
- **48% from international countries,**
- mostly from Eastern Europe (*e.g.* Albania).
(Autorità Garante Infanzia e Adolescenza, 2017)

International research findings:
- High rates of mental-health problems (Campos et al., 2019; McLaughlin et al., 2011).

In **ATTACHMENT: more insecure** ($d = .77$) or **disorganized** ($d = .76$) **than community and adopted** peers (Lionetti, Pastore & Barone, 2015; Van den Dries et al., 2009).

⇐ **High rates of ADVERSE PAST EXPERIENCES** ⇒

(e.g. abandonment, neglect, abuse, multiple caregivers a/o ruptures of meaningful bonds)

"HIGH RISK" ADOLESCENTS?

Adolescence is a stage with a normative increase of insecurity in attachment (Allen & Tan, 2016; Layne et al., 2014), therefore "high risk" adolescents are supposed to be even more at risk than peers.

FEW studies on these groups during adolescence, with <u>different findings</u> with:

➢ **Representational measures** (e.g. narrative interviews; **unconscious** attachment representations):

- **Little or no differences** in attachment between **late-adopted** and community adolescents (Pace et al. ,2018; Vorria et al., 2015), except for Escobar & Santelices (2013) where adoptees were more insecure.

- **Residential-care** adolescents with **higher rates of insecure or disorganized classifications** than normative distributions or adopted peers (Bifulco et al., 2016; Vorria et al., 2015).

➢ **Self-report measures** (e.g. questionnaires; **conscious** attachment representations)

- **no differences** were found among biological, adopted and residential-care samples (McSherry et al., 2016).

RESEARCH QUESTION

Utility of a **multi-method approach** for a comprehensive view of the phenomena, as narrative and self-report measures assessed different aspects of the attachment (unconscious and conscious), with possible contrasting findings (Lionetti, Pastore & Barone, 2015).

In this study, both a semi-structured interview and a self-report to answer at a dual level:

Are there differences in attachment patterns among late-adopted, residential-care and community adolescents?

Hp: little or no differences between late-adoptees and community adolescents; more insecure and disorganized attachment in residential-care group → only with the representational measure.

PARTICIPANTS

Within a larger multi-method research (N = 174), **75 adolescents** (aged 11-19 y, M=15.5y, 53% boys) have been **sub-sampled to match for gender and age** (*p* > .05) from three groups:

LATE-ADOPTED (n = 25)	RESIDENTIAL-CARE (n = 25)	COMMUNITY (n = 25)
Country of origin: 20% Italy (DA); 80% foreign (IA; 44% East Europe, 24% Asia.,8% South-America.,2% Africa)	***Country of origin:*** 60% Italy; 40% foreign (16% both East-Europe and South America, 4% both Asia and Africa)	***Country of origin:*** 96% Italy; 4% foreign (Eastern Europe)
Age at adoption (y) M = 5.3, SD = 3.3	***Age at institutionalization (y)*** M = 11.5, SD = 3	
Lenght of adoption (y) M = 9.5, SD = 3.8	***Lenght of institutionalization (y)*** M = 4.4,SD = 2.4	
One (0.04%) at risk mental-health problems*.	Eleven (44%) at risk mental-health problems*.	None (0%) at risk mental-health problems*.
Pre-adoptive adverse experiences: **96% YES**	**Pre-institutionalization adverse experiences:** **100% YES**	**Adverse past experiences:** **96% NO** (4%, n =1, father's loss)
(37.5% parental abandonment or death; 25% neglect in family of origin; 12.5% early institutionalized; 12.5% single mother with psychological difficulties; 8.5% physical abuse).	(34% domestic violence; 32% neglect in family of origin; 22% parents with physical/psychiatric disabilities or substance abuse or prisoned; 4% physical abuse; 4% sexual abuse; 4% abandonment).	
- 80% previously institutionalized (M$_{lenght\ (y)}$=2.7)	- 60% multiple placements	

*exceeded cut-off of risk for the Total score (70) of emotional-behavioral problems at the Child Behavior Checklist (CBCL 6-18).

MEASURES

- **FRIENDS AND FAMILY INTERVIEW** (Steele & Steele, 2005; Pace & Zavattini, 2009), a semi-structured interview for 10-17 years old children, that assess attachment representations in the patterns *Secure-Autonomous (S)*, *Insecure-Dismissing (Ds)*, *Insecure-Preoccupied (P)* and *Disorganized-Disoriented (D)*, both in terms of classifications and scores. For the purpose of the study, authors considered also the subscales overall coherence and the following, related to the IPPA's ones for each attachment figure: evidence of secure base/safe haven (mother and father), social competence and quality of best friendship (both peers).

- **INVENTORY FOR PARENT AND PEER ATTACHMENT** (IPPA; Armsden & Greenberg, 1987; Pace, San Martini & Zavattini, 2011), the most used self-report questionnaire to assess the attachment during adolescence (Wilson & Wilkinson, 2012). The IPPA provides a score in the subscales Trust, Communication and Alienation and a total score of Security of Attachment. the only scale considered in this study, separately for mother, father and peers.

- **Demographic data sheet *ad hoc*** (Pace et al., 2019) to collect data on participants, their family and their past experiences, filled by the adoptive and biological mothers and by the institutional caregiver in the residential group.

PROCEDURE

The research have been prior **approved by the Ethical Committee for the Research (CER) of the University of Genoa** and with an **institutional agreement with the Social Services for Minors** in Liguria, North-West Italy.
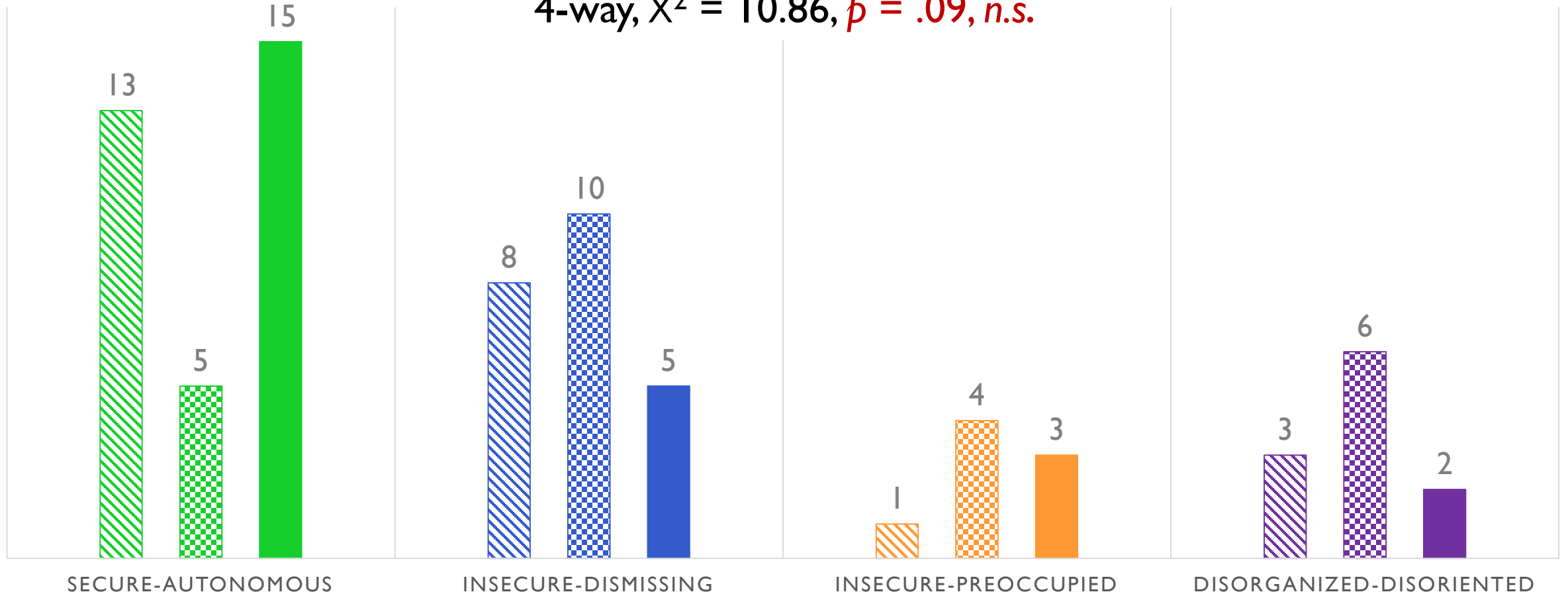
The participants in the high-risk groups have been recruited through the social services while the community adolescents were contacted and assessed by M.A. students belonging with the research team. Each adolescent and her/his legal care-taker signed an **informant consent** for the voluntary participation, prior informed of the purpose of the study, the procedure and rights of privacy and withdrawn.

All the adolescents were assessed in HOME-VISITING, in one session that lasted about 1.5 h.

FFI, 4-WAY CLASSIFICATIONS: NO DIFFERENCES

◪ LATE-ADOPTED   ▦ RESIDENTIAL-CARE   ■ COMMUNITY

4-way, X^2 = 10.86, p = .09, $n.s.$

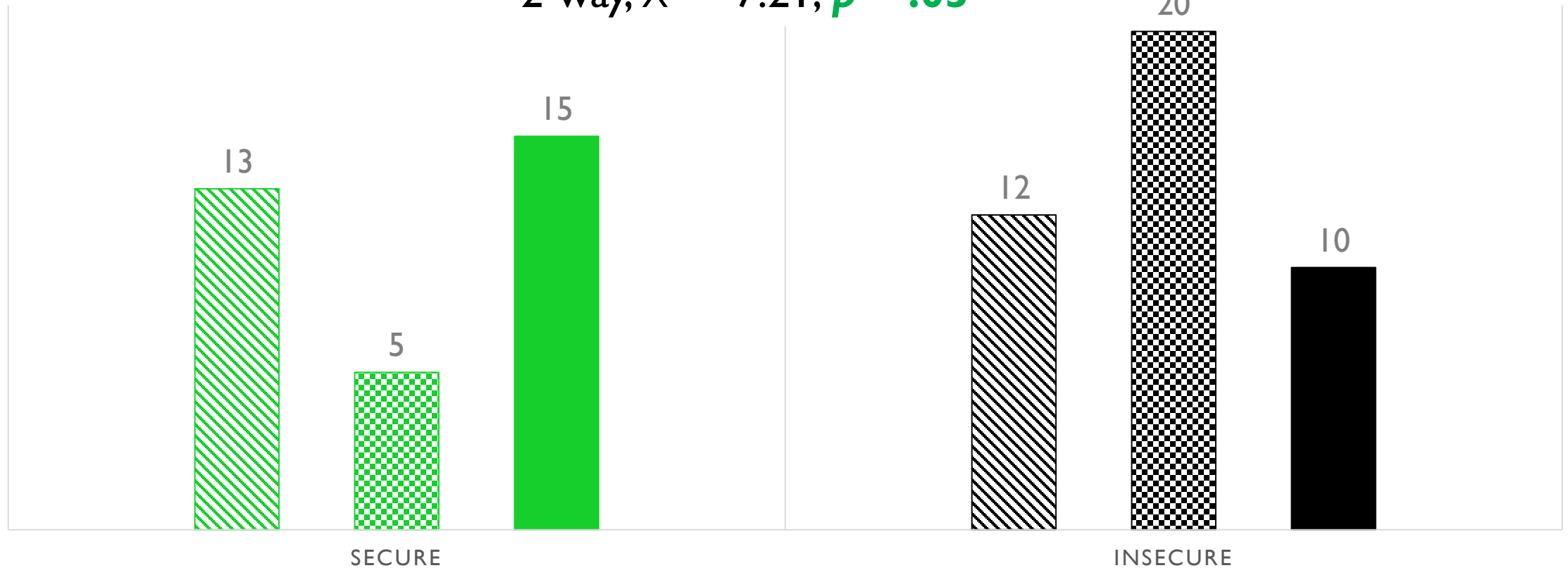|	SECURE-AUTONOMOUS	INSECURE-DISMISSING	INSECURE-PREOCCUPIED	DISORGANIZED-DISORIENTED
LATE-ADOPTED	13	8	1	3
RESIDENTIAL-CARE	5	10	4	6
COMMUNITY	15	5	3	2

FFI, 2-WAY CLASSIFICATIONS: RC LESS SECURE

◩ LATE-ADOPTED   ▨ RESIDENTIAL-CARE   ■ COMMUNITY

2-way, $X^2 = 7.21$, *p = .03**

Residential-care were more insecure than late-adopted an community peers, which not differ each other.

FFI SCALES: DIFFERENCES IN SCORES

Measure M (SD)		LATE-ADOPTED (25)	RESIDENTIAL-CARE (25)	COMMUNITY (25)	ANOVA p
Secure-autonomous		2.6 (0.8)	1.7 (0.7)	2.7 (1)	.000**
Insecure-Dismissing		2 (0.9)	2.4 (0.9)	1.5 (0.8)	.005**
Insecure-Preoccupied		1.6 (0.6)	1.6 (0.7)	1.6 (0.7)	.09 *n.s.*
Disorganized		1.4 (0.7)	1.8 (0.9)	1.3 (0.6)	.04*
Overall coherence		2.7 (0.6)	2.4 (0.4)	2.9 (0.6)	.005**
Safe Haven/Secure Base	Mother	2.6 (0.9)	1.7 (0.7)	2.7 (1.0)	.000**
	Father	3.5 (4.6)	1.7 (0.7)	2.2 (0.9)	.09. *n.s.*
Social competence		2.9 (0.5)	2.5 (0.8)	3.2 (0.7)	.003**
Quality of best friendship		2.6 (0.5)	2.5 (0.6)	2.8 (0.7)	.24. *n.s.*

Note. Significance levels with $p <$ *.05. **.01.

FFI SCALES: BONFERRONI'S POST HOC

	Group	Comparison group	Mean difference	SE	*p*	CI LB	CI UB
	C	LA	0.14	0.24	1	-0.46	0.74
Secure-autonomous	**C**	**RC**	**1.02**	**0.24**	**.000****	**0.42**	**1.62**
	LA	**RC**	**0.88**	**0.24**	**.002****	**0.28**	**1.48**
	C	LA	-0.42	0.25	.28	-1.02	0.18
Insecure-Dismissing	**C**	**RC**	**-0.84**	**0.25**	**.003****	**-1.44**	**-0.24**
	LA	RC	-0.42	0.25	.28	-1.02	0.18
	C	LA	-0.11	0.21	1	-0.63	0.40
Disorganized	**C**	**RC**	**-0.51**	**0.21**	**.05***	**-1.03**	**0.00**
	LA	RC	-0.40	0.21	.19	-0.92	0.12
	C	LA	0.16	0.15	.85	-0.21	0.53
Overall coherence	**C**	**RC**	**0.50**	**0.15**	**.004****	**0.13**	**0.87**
	LA	RC	0.34	0.15	.09	-0.03	0.71

Note. Significance levels with *p*< *.05. **.01; C = community. LA = Late-adopted. RC = Residential-care.

IPPA SCALES: DIFFERENCES IN SCORES

M (SD)

IPPA, Attachment Security	LATE-ADOPTED (25)	RESIDENTIAL-CARE (25)	COMMUNITY (25)	ANOVA p
Mother	84 (17)	78 (21)	93 (11)	.010**
Father	88 (20)	75 (27)	83 (18)	.15, *n.s.*
Peers	89 (12)	87 (15)	93 (12)	.32, *n.s.*
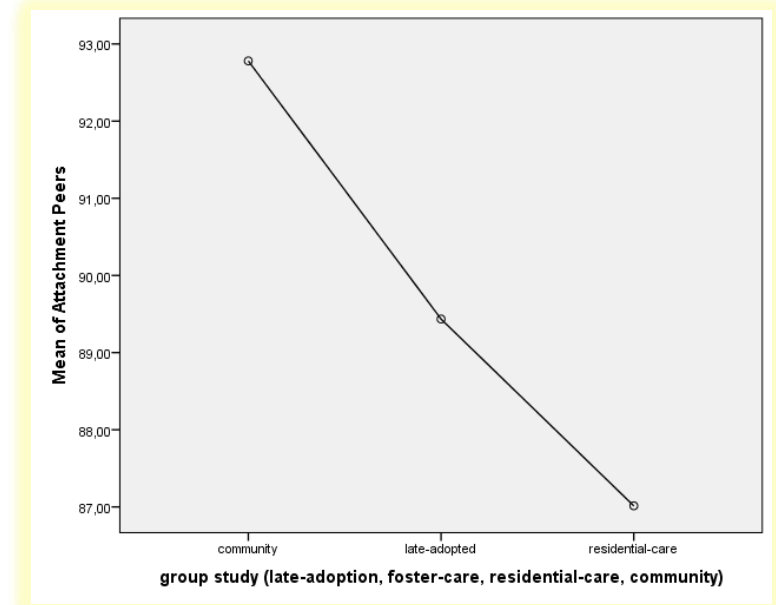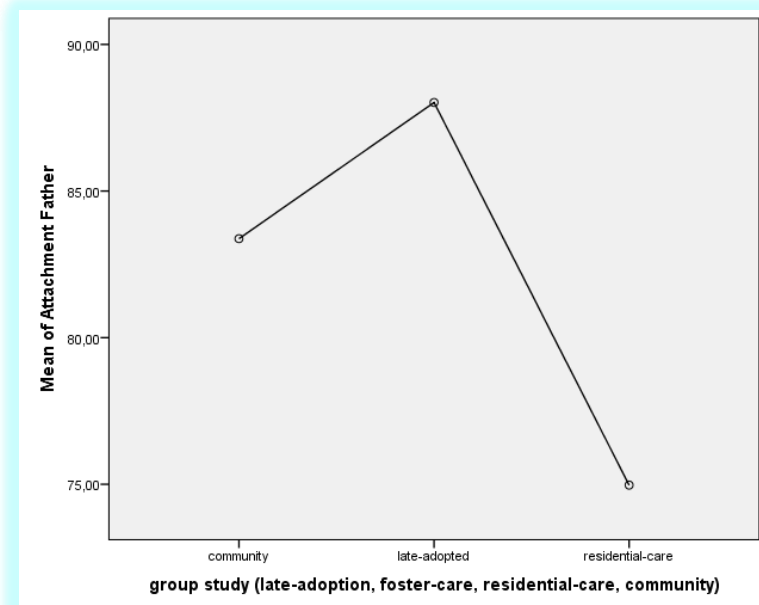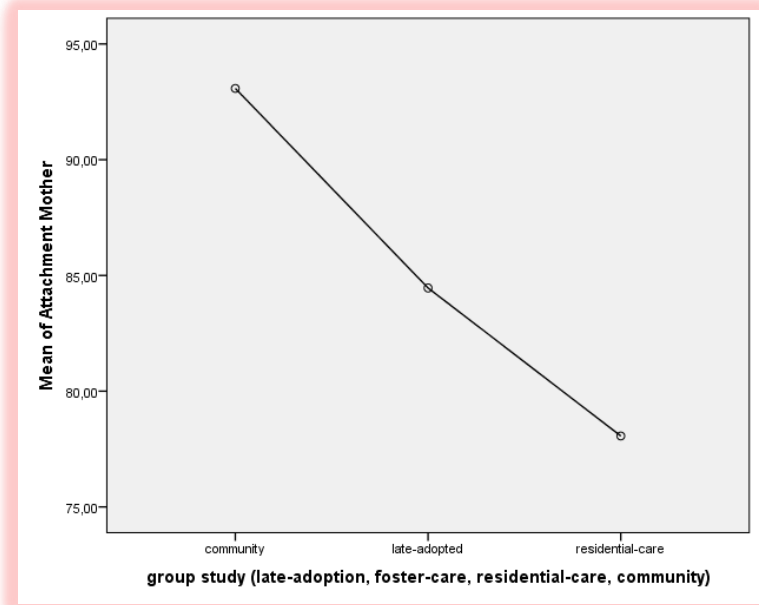
CORRELATIONS FFI - IPPA

As **pilot investigation of the integration between the unconscious or conscious level of the attachment representations** separately in each group, Spearman's correlations have been conducted between FFI and IPPA .

FFI, subscales	IPPA, Security of Attachment								
	Mother			Father			Peers		
	LA	RC	C	LA	RC	C	LA	RC	C
Safe haven/Secure Base Mother	n.s.	**.456***	**.491***					.438*	
Safe haven/Secure Base Father				n.s.	n.s.	**.526****			
Social competence	.445*						**.622****	**.419***	n.s.
Quality of best friendship							n.s.	n.s.	n.s.

Note. Significance levels with *p*< *.05. **.01. LA = Late-adopted, RC = Residential-care, C = community.

DISCUSSION & CONCLUSIONS

Results **with the FFI are in line with the international findings with representational measures** (Bifulco et al., 2016; Pace et al., 2018; Vorria et al., 2015), supporting:

- **positive effect of the adoption** on late-adoptees' attachment (Pace, Di Folco, Guerriero & Muzi, 2019; Steele, Hodges, Kaniuk & Steele, 2010).

- **higher risk** of insecurity and, worst, disorganization for the **residential-care group** (Bifulco et al., 2016).

➢ Results with the **IPPA** are **contrasting** with McSherry and colleagues (2016; early adolescents).

➢ **UTILITY OF A MULTI-METHOD APPROACH.** IPPA provides information on the conscious opinion and «openess» in talk on the topic, FFI on possible unconscious vulnerabilities in attachment at a deeper level:

- **helpful in detect the «covered» vulnerability** in the «earned or developed secure» (Hesse, 2016), such many late-adoptees can be labeled.

- Correlations FFI-IPPA were different among groups: **LA** group no correlations, suggesting **less integration of conscious/unconscious attachment representations** (unexpected along with secure classifications).

STRENGHTS, LIMITS & FUTURE DIRECTIONS

STRENGHTS:

- the use of a multimethod approach;
- **for the first time, the FFI have been used in residential-care adolescents** in Italy.

LIMITS:

- small sample size, which limited the statistical power (e.g. no differences in 4-way FFI distribution);
- the correlational design (no causality as longitudinal);
- **the heterogeneity in the high-risk groups**.

FUTURE DIRECTIONS OF RESEARCH:

- The comparison on larger sample, as the complete sample of this research (N=174).
- Effects of differences in the **attachment to mother** (e.g. risk-factor for **emotional-behavioral problems**).
- The role of the father in each group (e.g. "«*adoptive-enhanced fatherhood*», Levy-Shiff et al., 1997; Pace & Muzi, 2019).

THANK YOU!

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