

**Dating/Getting Acquainted** – This phase generally occurs during pre-placement visitation. All parties are on their “best behavior” and are engaged in learning more about each other. Children and families rarely experience “love at first sight” and the getting acquainted phase allows them an opportunity to begin the attachment process. At this point, however, there is no real attachment. The parents and child are often engaged in activities such as going to the movies, eating out or playing miniature golf. It is recommended to adoptive parents that they provide some “reality” for the child during this phase by maintaining a schedule, expecting children to have manners and setting some limits. Consequently, when the child does move in with the family, there will already be some guidelines and expectations in place.

**The Honeymoon** – This phase is characterized by excitement and great optimism. Everyone is eager for the adoption to occur. There is great anticipation and expectation for the newly forming family. The child is on their best behavior, and all family members get along well. Often the adoptive parents feel that the caseworkers’ warnings and cautions were unwarranted, or they believe themselves to be one of the lucky families who will have minimal problems. In reality, the child at this phase is emotionally detached from the family, and is likely to be superficial in his/her relationships. The child gains considerable gratification from being the center of attention. The parents frequently overlook inappropriate behavior and they minimize the importance of problems.

**Ambivalence** – During this phase, the child’s behavior is no longer compliant. Rather, the child begins to resist the parents’ authority, begins to test the parents’ ability to define limits, and tests the parents’ commitment. The child often struggles with feeling of distrust, divided loyalty, resurrected grief, and fear of attachment. The child concurrently desires closeness with the adoptive family, yet fears being rejected and/or abandoned. The child also struggles with feelings of disloyalty to the biological parents and former caregivers if he/she attaches to the adoptive family. Consequently, the child may intermittently display both attachment behaviors (clinging, whining, neediness) and disengagement behaviors (aggression, hostility, behavioral acting out, and/or direct rejection of family members).

The family also experiences ambivalence. As the child’s testing behavior escalates, the parents may question their decision to adopt, or may question whether the agency gave them the “right” child. Each of the adoptive parents may have different perspectives of the adoption yet are not communicating their fears and concerns to the other parent. Extended family members may withdraw their support. Siblings may feel resentful or threatened, and their behavior may regress. The parents may fear discussing their ambivalence with the worker or even with each other, as this may exacerbate their feelings of disappointment and failure. If the family and child are unable to navigate through the Ambivalence Phase, it is likely that the adoption will disrupt.

All family members must understand that ambivalence is a normal and expected part of the adjustment process. Feelings must be aired and validated. The worker can remind parents of similar periods of ambivalence early in their marriage, or after the birth of a child, and ask them how they dealt with it them. The family must learn to understand and accept the child’s

experience and to provide support, while maintaining appropriate discipline and behavior management. Often, understanding the nature of their own ambivalence minimizes the parents' disappointment and enables them to maintain a commitment to the child and the adoption. The child's ambivalence may most effectively be addressed and resolved by an attachment figure with whom the child feels most secure.

**Reciprocal Interactions** – When adoptive families are able to cope with their ambivalence in a constructive manner, they generally progress to this phase. They are learning to accommodate their feelings and responses with the needs and feelings of their child. During this period, family members begin to develop feelings of closeness. The adoptive parents feel less threatened and tend to manage the child's misbehavior with less resentment. They also recognize and come to appreciate the child's individuality. Unless the child has serious attachment problems, he/she typically begins to trust family members, begins to believe he/she is going to stay, and works to establish a place for him/herself in the family unit. It is evident that affectionate bonds are being formed through the reciprocal "give and take" among all the family members. The family begins to have more good days than bad. They are anxious to share small accomplishments with the child and now have sense of hope the adoption will succeed.

**Bond Solidification** – All family members feel increased satisfaction with family relationships. Attachments between the family and child have been strengthened. The family has re-established its equilibrium and has re-stabilized. A new family system emerges that has accommodated the child's needs, abilities, likes and dislikes. The family plans a future that includes the adopted child. The child now sees him/herself as part of the family, and has begun to incorporate adoptive family traits into his/her identity.