# Helping Foster Parents Manage the Addiction to Unhappiness in Their Foster Children: A New Approach to Preventing Placement Failures

Martha Heineman Pieper, Ph.D. William J. Pieper, M.D.

#### Abstract

Foster children who are taken from situations of abuse and neglect and placed with caring foster parents often provoke foster parents into ending the placement. There has been no convincing explanation for this seemingly irrational behavior and no successful and beneficial way to manage foster children's antisocial and self-destructive behaviors. Based on the understanding of child development, psychopathology and treatment that we have developed in our research over the past several decades as psychotherapists, parent counselors, consultants, and program managers, we offer some new and effective ways to help foster parents understand and care for their foster children. Specifically, we describe how children who are abused and neglected by their birth parents confuse the unhappiness they experience with genuine happiness they believe their parents want for them. As a result they develop needs to re-experience the unhappiness they have misidentified as happiness. When these children enter foster placement, this addiction to unhappiness causes them to react to the pleasure of feeling safe and cared for by unknowingly trying to re-create the familiar (and, therefore, comforting) misery and conflict they experienced in their birth families.

When caseworkers help foster parents understand what is driving their foster children's negative behavior, foster parents will find it easier to avoid taking this behavior personally and to maintain their commitment to their foster children. This understanding also leads to effective parenting strategies for managing children's antisocial and self-destructive behavior and for making constructive use of foster children's visits with birth parents.

#### Introduction

It is well established that multiple placements of children in foster homes are harmful - they make dysfunctional children worse and functional children dysfunctional. In spite of this knowledge, the number of placements experienced by children in foster care remains disturbingly high. The cause of multiple placements has been attributed to many problems, including: inappropriate choice of foster parents; inadequate assessment; increasingly troubled children coming into the system; lack of training of foster parents; large caseloads resulting in lack of supervision and services to the foster family; and failure adequately to compensate foster parents. While all of these shortcomings certainly contribute to the problem of multiple placements, in this article we focus on one of the most important causes of placement failures: the alienation of foster parents from foster children that results from these children's antisocial and self-destructive behavior.

Whereas 19th century advocates for children believed that a good home was all troubled children needed to start fresh (which is why child placing was called "child saving") it has been known for nearly a century that it is not enough to move children from bad homes to good ones. Rather than relaxing and enjoying the benefits of their improved situation, most children appear driven to recreate the type of relationship conflict from which they have been rescued. What has never been understood, though, is **why** so many children seem to do everything in their power to provoke their foster or adoptive parents to reject them and have them removed.<sup>2</sup>

'See recent complaint filed against the Department of Children and Family Services, April 16, 2003 by Patrick Murphy, Public Guardian for Cook County. In the 291 cases he studied there had been an average of 7.4 moves per child.

<sup>2</sup>For the remainder of the article, we will focus on foster placements, but our discussion is equally applicable to adoptive placements. Moreover, we are excluding from this discussion placements that fall apart because foster parents themselves are abusive or neglectful. When foster parents prove no better at parenting than the birth parents from whom children have been removed, the problem is failure to assess correctly the ability of the foster parents to parent and not a lack of understanding of the child's emotional dynamics.

Popular explanations for this irrational behavior have included: the children have "identified with the aggressor" (their birth parents); they are testing the foster parents; they have learned to be manipulative; they have inherited bad temperaments; and they are incapable of forming close relationships. None of these explanations has proved particularly helpful. For example, the "bad temperament" and "identification with the aggressor" explanations don't fit either with the fact that there is often a "honeymoon" period in which the child behaves appropriately and seems to be making an excellent adjustment or with the fact that many children who are behaving in antisocial and destructive ways can be helped to become positive, loving participants in their new family. We are going to describe an entirely different way to think about why so many foster children seem determined both to reject the overtures of their new families and also to recreate the chaos, abuse, and conflict from which they have been rescued. This understanding can be used to help foster parents to remain patient and committed to the children in their care and to parent more effectively, and to help caseworkers to become more effective at working with foster parents and children to prevent re-placements. This knowledge can also be used to improve assessments by making more accurate predictions about how children will behave, by improving the fit between child and foster parents, and by identifying children who will need either a therapeutic foster home, psychotherapy, or both in order to have a chance of remaining in placement.

The essence of this new perspective, which we will describe in greater detail shortly, is that no matter what kind of care young children receive, that care acquires the meaning to the child of being loved and loveable. When babies and young children are treated abusively and neglectfully, they believe they are getting ideal caregiving, and they grow to want and need more of this kind of caregiving. This unrecognized "addiction to unhappiness" (Pieper & Pieper, 2002) explains why many foster children who are placed in loving, stable homes provoke and all too often completely alienate their foster parents to the point that their foster parents insist on their removal.<sup>3</sup> In other

words, children disrupt their placements because they are seeking the particular kind of happiness they felt with their birth parents.

One of the benefits of understanding that learned (though unrecognized) needs for unhappiness often drive foster children's seemingly willful and ungrateful behavior is that foster parents, caseworkers, and supervisors can avoid becoming actors in the drama the child is unknowingly trying to script. They will not be drawn into the trap of taking the child's provocative or rejecting behavior personally; rather, they will retain the objectivity necessary to help the child to tolerate and, subsequently, enjoy the warmth available in a loving family.

Most importantly, all children, no matter how antisocial or self-destructive, retain a spark of the desire for genuine love and affection with which they were born. This is why difficult foster children who receive informed caregiving from foster parents will eventually come to prefer the happiness of being genuinely cared for over the unhappiness they have mistaken for happiness. It is never too late, in other words, to help foster children to reconnect with their inborn wish for genuine closeness and positive relationship experiences.

The ideas we present in this paper derive from our reconceptualization of child development, of the origins of psychopathology, and of the essence of effective therapeutic interventions. We developed this psychology and philosophy of mind, which we call intrapsychic humanism, in the course of naturalistic research conducted during our practice as psychotherapists, parent counselors, program managers, and consultants (Pieper & Pieper, 1990). Intrapsychic humanism has been applied with demonstrable effectiveness in numerous practice contexts, including residential care for severely mentally ill clients, day treatment for retarded children, cross-cultural school social work practice, child psychotherapy, and parent counseling.4 We have also made the insights of intrapsychic humanism available to the general public in a guide for parents (1999) and in an adult self-help book (2002).

<sup>&</sup>lt;sup>3</sup>According to the National Foster Parent Association, up to 60 percent of foster parents quit in the first year when they discover what a difficult job they have undertaken (Annie E. Casey Foundation, 2002).

<sup>&</sup>lt;sup>4</sup>For interested readers, a comprehensive bibliography of published articles applying intrapsychic humanism is available on the website, intrapsychichumanism.com.

### The Addiction to Unhappiness

One of our central discoveries (1990), which has been supported by subsequent child development studies (Meltzoff & Moore, 1983; Chamberlain, 1998), is that every child is born loving her parents and believing that every experience she has is intended by them and is good for her. In this way, the child's mind is very different from the adult mind. Every baby and young child equates effect and cause — if she feels happy and comfortable, she is convinced that her parents want her to feel that way and that, therefore, how she feels is how she should feel. But if she is unhappy and uncomfortable, and her parents don't step in to comfort her, she is convinced that her parents want her to feel that way and that what she experiences is the ideal way to feel.

Because every baby is born adoring her parents and wanting to be just like them, every baby is destined to copy her parents - not just how they walk and talk (that will come later) - but how they treat her and how they make her feel. Long before she develops speech, locomotion, or cognitive reasoning, a baby will throw her heart and soul into the effort to make herself feel just like she feels when she is with her parents. When parents respond positively and lovingly, their young child is inspired to seek more of the happiness that occurs when she is able to cause her parents' caring responses. If she goes uncomforted, has too much expected of her, or is abused or neglected, she will do her best to recreate the unhappiness she feels, believing that these feelings represent true happiness. The confusion of unhappiness with happiness that causes children to learn to need unhappiness usually occurs before children have language, and certainly before they have mature cognition.

When parents follow bad parenting advice or are themselves too troubled to parent adequately, they may leave babies to cry, respond with spankings and other punishments, isolate children who are unhappy or angry, or, in the cases that often result in children being removed from the home, neglect their children's basic needs or become emotionally, sexually, or physically abusive. When parents regularly make their children unnecessarily unhappy, their children confuse the unhappiness they feel with happiness because, like all children, they assume that whatever they feel is what their parents want them to feel and is good for them. Since they have no language, no standard of comparison, and no ability to know that when parents leave them uncomforted or become incomprehensibly angry, their parents are not intending to parent in harmful ways, babies and young children become

convinced that the unhappy feelings they come to want represent true happiness. As a result, these children develop unrecognized needs to re-experience the unhappiness they commonly feel. As adults, they continue unknowingly to need and to re-create unhappiness.

In one way it is adaptive that the young child identifies her every experience with the happiness of being perfectly cared for. We know that an acceptable level of feeling cared for by important others is necessary for physical survival. It is well-documented that when babies and young children are left in institutions in the care of staff who don't engage with them in a one-to-one manner, these youngsters wither away and even die, in spite of the fact that they have adequate nutrition and physical care (Spitz, 1945). What kills them is the absence of a relationship that can provide them with a minimal experience of feeling loved.

Let us contrast the child who withers and dies for lack of a meaningful relationship with the child who suffers physical and emotional abuse. Unless the abuse is fatal, the abused child will usually not waste away, because she does have a significant relationship with at least one adult. If this child had the capacity to be aware that she was being made unnecessarily miserable and that the cause lay with the inability of her beloved parents to respond to her appropriately, she would not thrive and probably not survive. It is highly adaptive, in other words, that babies and young children are incapable of evaluating the quality of the care they receive. But one byproduct of this blind spot, with consequences that reach far into adulthood, is that children are convinced that whatever they feel, including uncomforted or gratuitous unhappiness, is really the ideal happiness intended by their perfect parents. When children mistake unhappiness for happiness, they continue to believe they are getting perfect love from their parents and their physical and cognitive development will proceed. But the fact that they have unknowingly learned to need unhappiness will interfere with their ability to take care of themselves and to form and to maintain close, positive, meaningful relationships with others.

Because children have an inborn desire to treat themselves and others as their parents treat them, when they are victims of severe abuse or neglect, they develop unrecognized needs to cause themselves and others equally extreme forms of unhappiness. They may become suicidal; find it nearly impossible to learn; become anxious, manic, or depressed; turn to arson or other types of property destruction; or become physically aggressive. One physically abused

child could only calm down enough to go to sleep if she hung herself from the clothes rod in her closet until she was dizzy and weak.

The addiction to unhappiness is powerful precisely because it operates under a person's radar. When unhappiness is confused with happiness, unhappiness either goes unnoticed, or feels deserved, or feels inevitable and in control of a person. The positive aspect of this process is that once the nature and dynamics of an addiction to unhappiness are understood, children (and adults) can be helped to learn to regulate themselves in constructive rather than destructive ways.

## Needs for Unhappiness Can Add Extra Misery to Losses

Children in placement have experienced tremendous losses. Their birth families were unable to care for them adequately; they have been removed from these parents, whom they love and in most cases want to stay with; they may have been taken away from their friends, their school, and, often, their siblings; and they have been placed in a strange home with foster parents whom they don't know and who have their own way of doing things.

These losses would be extremely significant in and of themselves. In addition, though, children who have learned to need unhappiness respond especially poorly to frustration because they have developed needs to soothe themselves by turning on themselves or others when things go wrong. This is especially true of children in foster care. When these children made a mistake or were upset or angry in their birth families, they were likely to have been treated with ridicule, a raised hand, forced isolation for long periods, or other harsh punishments.

Jill<sup>5</sup> is an example of a child who unknowingly compounded the pain of every loss she experienced by comforting herself with anger and self-hatred. In her birth parents' home, when she had cried, whined, or become angry when things didn't go as she wanted them to, Jill's birth parents became angry and punished her severely, often making her drink water from the toilet bowl. Because like all children, Jill thought her parents were perfect, she did not blame her parents for this abusive behavior.

While it made her miserable, she felt that she deserved it and that it was the proper and loving response to her naughtiness.

Not surprisingly, when she encountered disappointments in her foster home, Jill sought soothing by turning viciously on herself or others. If she lost at a card game, she would bite her arm until it bled. If her foster parents told her it was time for bed whereas she wanted to watch more TV, she would throw things at them and scream at the top of her lungs. Once her foster parents understood that these "crazy" behaviors were attempts to comfort herself by recreating the painful way her birth parents had made her feel when they didn't approve of the way she was responding to frustration, the foster parents felt less angry, confused, and helpless. They were able gently to let Jill know about imminent disappointments and to help her anticipate that she might unknowingly try to react to those disappointments by turning on herself or them. They offered hugs and understanding words as an alternative way to cope with losses.

At those times when Jill fell back on her old way of soothing herself, the foster parents were able to remain positive. They would hold her or take her to her room and sit with her, all the while telling her that they knew that she thought throwing or breaking things or hurting herself would help but that she would feel so much better if she would let them comfort her. Over time, Jill's need to respond to disappointments by soothing herself with aggression and self-inflicted pain did diminish, and she became increasingly able to turn to her foster parents for genuine comfort.

Without this understanding, foster parents are often tempted to lecture or punish children who come unglued in response to loss. They tell them that life is filled with ups and downs and they must learn that things will not always go their way. They send them to their rooms to be by themselves, take away their allowances or favorite activities, or impose other punishments. Unfortunately, these negative responses strengthen the child's unrecognized needs for unhappiness by convincing her yet again that unhappiness represents the type of deep love she wants and deserves to feel.

In each case example, the names and identifying information have been changed to protect children and their families.

### The Aversive Reaction to Pleasure

The addiction to unhappiness is responsible for a phenomenon we call the *aversive reaction* to pleasure, which is one of the most common yet unrecognized causes of placement failures. It is the reason foster children seem not to appreciate the efforts and advantages of their new foster families and appear to do everything in their power to get themselves rejected and ejected.

Every child is born wanting genuine pleasure. That desire is never entirely extinguished by learned needs for unhappiness; rather it remains active to some degree. But when the child's definition of genuine pleasure becomes altered to include experiences of unhappiness, the child comes to need both genuine pleasure and also the unhappiness she has misidentified as genuine pleasure. The result is that genuine pleasure alone is no longer satisfying - she also needs experiences of unhappiness that she has confused with genuine pleasure. So this child unknowingly becomes driven to sprinkle her successes and real pleasures with experiences of unhappiness that she either doesn't recognize as such or doesn't know she is causing.

When people who have learned to need unhappiness react to genuine pleasure by unknowingly seeking out experiences of unhappiness, we say they are having an *aversive reaction to pleasure*. Aversive reactions to pleasure occur daily in commonplace ways, but most people are entirely unaware of them. An example of a mild aversive reaction to pleasure in someone with an addiction to unhappiness is the man who gets a promotion at work and leaves his raincoat on the train he takes home.

Because most foster children have been neglected or abused, the experiences of unhappiness they confuse with happiness are often quite horrible. Accordingly, the type of unhappiness these children unknowingly pursue in their aversive reactions to pleasure can be very dangerous to themselves or others. It is not uncommon for children who find themselves in a loving foster home to react to this pleasure by destroying property, or by physically threatening other children in the home or, even, the foster parents themselves. They may also harm themselves either directly, for example by banging their heads against hard surfaces, or indirectly, by putting themselves at risk (jumping from trees, skateboarding in traffic, etc.).

### How An Understanding of the Addiction to Unhappiness Can Reduce Placement Failures

We have explained that the reason foster children in good placements try to make themselves and those around them unhappy is that they are unknowingly seeking happiness in the form of unhappiness. At the same time, foster children never lose their inborn desire for genuine happiness and loving relationships. In the remainder of this article we illustrate how foster parents can use this knowledge to avoid personalizing the behavior of angry and difficult foster children, and how caseworkers can help foster parents to parent accurately and effectively so that children will be increasingly motivated to turn away from their learned needs for unhappiness and to pursue the genuine pleasure available to them in the foster home.

### Handling Extreme Reactions to Loss and Aversive Reactions to Pleasure

Before a child is placed in foster care, any adequate assessment process must identify the nature and degree both of the child's aversive reactions to pleasure, and also of the child's responses to loss. If the child has a history of aversive reactions and reactions to frustration that cannot be handled within a normal foster home setting, placing the child in that setting will only result in yet another placement failure. For example when a child's aversive reactions to pleasure take the form of setting fires or cutting herself or others with knives, most foster parents will be unable to manage her. This child may need temporary placement in a therapeutic foster home or an institutional setting while she receives psychological treatment that can help her respond less destructively to the pleasure of living in a benign and caring home.

Once careful assessment has determined that a foster home is suitable and that a particular child's reactions are not so severe as to contraindicate her placement in a regular foster home, foster parents will find confidence and compassion in the knowledge that their difficult child is not willfully or incorrigibly bad but rather is trying to soothe herself by recreating happiness as she knows it. For example, foster parents will be much more able to respond constructively to their foster child's provocations when they are aware that children who have been abused and neglected will react to their improved situation by trying to get foster parents to "care" about them in the same ways as their birth parents did.

Ten-year-old Jim responded to the pleasure of being placed in a secure and caring foster home by unknowingly doing everything he could to provoke his foster parents to treat him as abusively as his birth parents had. In his birth family, whenever he made a childish mistake, such as knocking over his milk, his birth parents kicked him, hit him, and locked him in his room for hours and, on one occasion, for days. The first week he spent in his foster family went smoothly because Jim felt greatly relieved at being treated with kindness rather than anger. However, without realizing it, he began to feel the absence of the abuse he had confused with caring in his birth family, and in response to this discomfort, he tried to provoke his foster parents into making him feel as his birth parents had.

When for the second consecutive night Jim, "accidentally" dropped the dishes he was clearing, shattering them and spraying food all over the floor, he looked at his foster mother defiantly, and said, "I know you're going to get me now." The foster mother had learned from her caseworker that Jim was unknowingly hoping for a harsh response that would satisfy his desire to feel the same "happiness" he had felt with his birth parents. This awareness allowed her to avoid the temptation to gratify his need for a punitive response. She made a mental note to use plastic plates for a while and said to Jim: "I'm not going to 'get you,' sweetheart. The only thing you're going to get is the broom and dustpan and you can help me sweep up. After we get this cleaned up, would you like to play checkers?" The foster mother's calm and warm response gave Jim a chance to recognize that there was a different and far better way to feel happy than by provoking a critical, punitive response.

Not unexpectedly, Jim had an aversive reaction to the pleasure of having his provocation responded to with love rather than with harsh words and punishments. The next day he wrote obscene words all over the wall of his room. When his foster mother came in to tuck him in and saw what he had done, Jim yelled, "You think you're such a saint – let's see what you do this time!" Jim's foster mother knew that Jim was having an aversive reaction and that anger or punishments would only intensify his unrecognized needs to suffer and to make others suffer. She said, "I'm going to do what I did last time – help you clean up. I know you are having trouble getting used to living here,

and I'm not giving up on you!" The foster mother perceived that, in spite of himself, Jim looked relieved.

Over time, the foster mother's ability to understand that an addiction to unhappiness underlay Jim's provocations and her capacity to respond with caring rather than punishments allowed Jim to develop a conscious attraction to the closeness available in the relationship with his foster mother and to lose interest in the unhappiness he had mislabeled as happiness. If the foster mother had responded to Jim's provocation with punishments and disapproval, his need for a "happiness" made up of negative relationship experiences would simply have been strengthened.

# Using Loving Regulation to Manage the Difficult Child

Because many children in foster care have learned to need a kind of unhappiness that includes relationship conflict and self-inflicted pain, foster children can be very hard to manage. They may start physical fights with foster siblings, be verbally abusive, destroy property in the home, refuse to participate in chores, and so on. Foster parents are typically advised to respond to unwanted behavior by imposing various forms of discipline, including time-outs, disapproval, removal of privileges, sharing feelings of disappointment or anger, and imposing extra chores. Our discovery is that contrary to popular belief, disciplinary measures make difficult children worse because they gratify their learned needs for unhappiness rather than their inborn desires for genuine, constructive pleasure (Pieper & Pieper, 1991).

# Why Discipline is Harmful and Loving Regulation Is Helpful

We define discipline as managing children's behavior in a way that adds unpleasantness in the process, as when parents tell a child that she cannot talk to her friends on the phone for a week because she lied about getting her homework done (Pieper & Pieper, 1999). Discipline is thought to be an effective deterrent because it makes wrong-doing unpleasant. The problem, of course, is that unpleasantness is just what children who have developed an addiction to unhappiness are seeking. Discipline backfires by strengthening the child's motives for unhappiness she has confused with happiness and weakening her inborn desire for genuine, constructive pleasure.

To the extent that it does work, discipline works for only one reason – adults are bigger and stronger than children and they control the goods children need to survive. Adults can force children to do or to stop doing almost anything – how they choose to use that power, though, shapes the kind of happiness children seek and the kind of adults they become. In addition to feeding the child's addiction to unhappiness, discipline teaches children the harmful lessons that might makes right, that they should treat themselves harshly when they make a mistake, and that they should use coercion toward others who don't do what they want.

We advocate the use of an approach to managing children's behavior we call *loving regulation*. This strategy takes into account children's inborn need to copy how we treat them. Accordingly, loving regulation separates the punitive and manipulative components of discipline from the regulatory components and retains only the regulatory component. If parents manage children's behavior while simultaneously showing them love and affection, children learn that it is not necessary to turn on themselves when things go wrong and that they can remain close to others with whom they disagree.

The foster parents of eight-year-old Carol believed that the best way to manage her difficult behavior was to discipline her by imposing consequences that she wouldn't like. Carol had been regularly and severely beaten by her birth father for being "naughty." When she was removed from her birth parents and placed with a foster family, she seemed happy and relieved to be in a safe place. Soon, however, her needs for unhappiness were stimulated by the pleasure she was feeling and she began to cause trouble in her new home. She refused to do her chores, wrote on the walls, was rude when confronted, and engaged in risky behaviors. The more her foster parents punished her by revoking privileges and giving her timeouts and extra chores, the more defiant and alienated Carol became and the worse she behaved. Carol began to terrorize the family cat and to shout obscenities out the window at passersby.

At their wits' end, the foster parents called the caseworker and asked that Carol be removed. The caseworker, who had been consulting with us, explained to the foster parents that Carol possessed learned, though unrecognized, needs to experience the misery of being punished, which she had confused with positive feelings of being cared for. When her foster parents disciplined her, she felt the same kind of unhappiness she had confused with happiness in her birth family. Her needs to comfort herself with these negative experiences were

strengthened, and her provocations increased.

The caseworker suggested that the foster parents use loving regulation to manage Carol's behavior. The foster parents, who really wanted to help Carol, agreed to try the new approach. When Carol didn't do a chore, they offered to work alongside her until it was done. When she wrote on the walls, they gave her a can of spot remover and helped her to clean up. If she was rude, they asked her to talk more politely but added that they knew it was hard for her to get used to new parents when she was probably missing her birth family. If Carol looked menacingly at the cat, they picked it up and held it until Carol relaxed. When she started to yell out the window at people, the foster parents simply closed the window and suggested they find something enjoyable to do together.

Most important, because they now understood that Carol was driven to re-experience the only kind of "happiness" she had ever known and was not choosing to be willful or disobedient, they did not personalize her negative behavior. They found that they maintained a reservoir of good will toward her they had not previously known was possible and were able to manage her behavior in a kindly and friendly way.

Carol was stunned by her foster parents' manifest caring in response to her "naughtiness." At first she thought it was a trick and screamed at them to "stop messing with my mind." As time passed, however, she began to acknowledge to herself that her foster parents seemed to care about her continuously and not just when she was "good." For the first time in her life she had glimmerings of being someone who could be genuinely loved and loveable.

Of course Carol sometimes re-doubled her efforts to provoke her foster parents, but when her foster parents (with the help of the caseworker) responded to her carefully and lovingly and her provocations failed, she felt more relief than disappointment. As the months passed, Carol began to reciprocate her foster parents' affection. She gave them occasional spontaneous hugs and shared with them the ups and downs of her life at school. One day her foster mother heard her talking to her favorite doll. Carol said, "I saw you break that cup. I'm going to give you the whipping of your life." Then she added, "No, I know you weren't trying to be bad. Come with me and I'll make you some tea. Don't worry, I won't hurt you."

Children learn to govern themselves effectively only by identifying with their parents' kindness and helpfulness toward them, and not by having their needs for unhappiness gratified. When foster parents can help their child make constructive choices in a context of ongoing closeness with them, the child will begin to realize that genuine happiness results from feeling loveable and loved rather than from the familiar comfort of unhappiness masquerading as happiness or from the gratification of any particular desire. When foster parents use loving regulation, children also learn that it is possible to disagree with what another person is doing and still love and care for that person.

Without a doubt it is most challenging to manage children's behavior when that behavior is severely antisocial or self-destructive. It is crucial that foster parents and caseworkers alike keep in mind that when foster children first experience loving regulation they may have an aversive reaction to the pleasure of being treated with kindness and their behavior may worsen temporarily. This regressive response does not mean that loving regulation is not working, but rather that the child needs time to perceive the superior pleasure to be had from closeness with her foster parents.

We should add that loving regulation works even with children who are too violent and self-destructive to live in a foster family. We have successfully used this approach to managing children's behavior in a residential program for adolescents who had become so dangerous and suicidal that not only were they unable to live outside an inpatient setting, but also by the time we encountered them, no other program was willing to take them (Tyson, 1995). After three years the Illinois Department Of Child and Family Services determined that the adolescents were doing so well that they could live in unrestricted settings.

### The Problem with Rewards

Like other parents, foster parents are often told to manage the behavior of difficult children by using rewards. They may promise that if the child behaves in a desirable way they will take her to a movie or go out for ice cream. Or they may offer some kind of token (gold stars, stickers) that can be collected and exchanged for something the child wants. The problem with rewards is that, though they are more pleasant than punishments, they are just as coercive. The unpleasant consequences are somewhat concealed, but they are there nonetheless. If the child doesn't do the chore or continues to engage in unacceptable behavior, she doesn't get the movie or the treat that is being offered and she feels deprived and resentful. If the child behaves as required and gets the reward, at some level she still feels resentful because she has been threatened with negative consequences.

other words, like punishments, rewards involve deprivation and threats; they gratify and thereby strengthen children's needs for unhappiness and they alienate children from parents. In contrast, because loving regulation never adds any type of unpleasantness to managing children's behavior it strengthens children's inborn desires for genuine pleasure and close, loving relationships with parents.

# Making Constructive Use of Visits with Birth Parents

Visits between foster children and birth parents are among the greatest challenges faced by foster parents. If the birth parents are making progress toward getting children back, parental visits may remind foster parents that they are temporary custodians only. Even when foster parents believe that it is in the child's interest to be returned to her birth family, it is very difficult to relinquish children whom they have grown to love.

Even more stressful for foster parents are instances in which birth parents continue to respond to their children in the maladaptive ways that caused children to be removed in the first place. Children tend to be tense, irritable, and generally difficult to live with for days before and after they visit with parents who remain abusive or negligent. Children's behavior may even deteriorate until it seems as though all progress has been reversed. Moreover, foster parents suffer vicariously for children when children's hopes are dashed each time they re-experience being mistreated or neglected by their birth parents. When a child dreads the visit and doesn't want to go, it falls to the foster parent to tell the child she has to see her birth parents even though in their hearts the foster parents may agree with the child that the visit will only cause the child pain. Also, foster parents can feel hurt and upset when children insist that they love and want to live with their birth parents, when the birth parents have shown themselves to be incapable of giving children the love and care the foster parents have steadily been providing.

For all of these reasons, foster parents as well as foster children often need extra help from case-workers around parental visits. Yet in our experience consulting with child care agencies and working with DCFS caseworkers, child care professionals often find themselves torn among competing demands and lacking a reliable understanding of how to help foster parents and children with parental visits. A single caseworker may be working with birth parents, foster parents, and foster children, with the result that the caseworker may be

unclear who her client really is. For example, she may mistakenly try to persuade the child and foster parents to appreciate how hard the birth parent is trying even though the child still experiences terrible disappointments in the birth parent's presence and needs those losses acknowledged.

When birth parents are not improving and, therefore, continue to make their children unhappy in the same old ways, parental visits re-stimulate children's desires for the unhappiness they have misidentified as happiness. The key to making parental visits as growth-promoting as possible for foster children is to find ways to avoid strengthening the child's learned needs for unhappiness and to support the child's inborn desire for an inner happiness based on experiences of being genuinely cared for.

The case of nine-year-old Andy illustrates both how required visits with birth parents can strengthen the addiction to unhappiness in foster children, and also how an understanding of this process enables foster parents to help their children choose genuine pleasure over the unhappiness they have confused with genuine pleasure. Andy's birth mother had regularly left him home alone for days at a time while she worked as a prostitute and sought and used drugs. Eventually, the State removed him from her care. Not surprisingly, Andy's mother failed to show up for most of her scheduled visits with her child. Andy would announce that he didn't care whether she came or not, but both before and after the scheduled visit he would become extremely depressed and withdraw to his room. He wouldn't eat or do his homework, and he often scratched his arms with a fork. His foster parents, who had worked hard to bring Andy out of his shell, felt discouraged by this regressive behavior and wondered if they were having any real effect on him at all.

The caseworker, who had consulted us about Andy's problems, was able to explain to the foster parents that as a young child Andy had confused his mother's neglect with ideal love. When she failed to show up for a visit, he was trying to comfort himself by making himself feel the way he had felt with her. His withdrawal, paralysis, and self-inflicted pain recreated the way he had felt when he was left for days all alone. While to an outside observer Andy seemed miserable, Andy experienced his painful feelings as familiar, deserved, and as the way his mother wanted him to feel – therefore they were comforting.

The caseworker helped the foster parents to see that the mother's missed visits offered them an opportunity to solidify the good work they had done helping Andy appreciate the genuine pleasure of being loved and cared for. When Andy began to withdraw before or after a visit, they would take turns sitting with him in his room. When he told them he wanted to be alone, they would say that they knew he was used to isolating himself when he felt badly, but they believed he would feel better if they stayed with him. They offered to help him get started with his homework, and they gently stopped him from hurting himself.

Sometimes Andy had an aversive reaction to the pleasure of the caring his foster parents showed him and he would swear at them and throw things. His foster parents insisted that he not call them names and they stepped in and prevented him from being destructive, but they also conveyed to Andy that they understood why he was feeling as he was and that they continued to want to be of help. As time went on, the foster parents noticed that in the days before and after a planned visit with his birth mother, Andy's objections to their presence became less vehement and more perfunctory, and that he actually seemed relieved when they stayed with him. When the foster parents told Andy that there was a visit planned, they would add that he might be tempted to withdraw because he had been left alone so often as a child, but that they were there to help him find a better way to feel comfortable.

Increasingly, Andy was able to remain with his foster family when he felt upset rather than withdrawing to his room. He also stopped cutting himself. Because they understood Andy's needs for unhappiness and knew how to help him, his foster parents were able to strengthen Andy's desire for positive, relationship-based comfort and decrease his tendency to fall back on self-destructive forms of soothing.

The knowledge that every abused and neglected child unknowingly believes her birth parents are perfect and give her ideal care helps to shield foster parents from feeling angry and betrayed when a foster child continues to pine for abusive or neglectful parents in spite of all the positive care she is receiving from the foster parent. When foster parents understand that the child is having an aversive reaction, that is, is responding to the positive care she is getting from the foster parents with reactive needs for the familiar abuse or neglect she experienced with her birth parents, they will be much more able to retain their belief in their power to have a positive effect on their foster child. They will know that it is inevitable that the child will on occasion feel homesick for her birthparents, regardless of how terrible her life had been, because the child

had no choice but to believe that her parents were giving her ideal care and as a result had developed needs to feel exactly as she had felt with them.

We were asked to consult on a case in which the foster parents had become terribly hurt and upset when their foster child, six-year-old Linda, begged to be returned to her birth mother. The mother had forced Linda to watch while she strangled her little sister. Linda blamed herself for tattling on her sister, thereby "causing" her sister's death. She believed that if she were allowed to return to her mother, who had recently been released from jail, she could manage to behave so perfectly that her mother would not be forced to "punish" her as she had punished her sister. The foster parents couldn't understand why Linda would want to leave their home, in which she had received so much love and attention while her mother was in jail, and return to a woman who was so sadistic and angry.

We suggested that the caseworker explain to the foster parents that while all the adults involved with Linda were horrified by what her mother had done, given Linda's immaturity, she had no choice but to believe that her mother was perfect and had given her ideal care. It was for this reason that Linda blamed herself for her sister's murder and believed that her mother would give her the love she wanted if she could just manage to be the child her mother wanted her to be. The caseworker added that it was crucial the foster parents realize that although Linda couldn't always express these feelings, at some level she knew and appreciated how devoted and caring her foster parents had been in the years her birth mother was in jail.

When the foster parents understood why Linda needed to blame herself for her sister's death and to think of her mother as perfect and blameless, they no longer were inclined to take Linda's homesickness personally. They reconnected with their affection for Linda and with their desire to make her life better. The foster parents told Linda that they knew she missed her mother and that it was hard for her to imagine that her mother could have done anything so wrong as to result in her being sent to jail. Gently, they suggested that her mother had been ill in her mind or she would not have killed her sister and that that mental sickness rather than Linda's "tattling" was the explanation for what had happened. They added that it would not be safe for Linda to go back with her mother as long as her mother's mind was still not working properly.

When Linda continued to cry and insist that she wanted to be back with her mother, her foster parents said that was entirely natural and they were so sorry she couldn't have had the wonderful birth mother she deserved. This discussion was repeated in various forms over a number of months. Eventually, Linda grew to be very attached and affectionate with her foster parents and also much less guilty and self-critical. She no longer begged to be returned to her birth mother, but began to regard the foster home as her "real" home.

Foster parents often need help to understand that no matter how attached their foster children seem to be to abusive and neglectful birth parents, over time their caring, informed parenting will have a positive impact. Sooner or later their foster child will perceive that there are two kinds of happiness – the "happiness" of being treated the way her birth parents treated her and the happiness of being cared for in a genuine way by her foster parents – and that the pleasure she has with her foster parents is superior.

# The Caseworker's Role in Reducing Placement Failures

The parenting strategies described here are very demanding on foster parents, who may need significant help from caseworkers in order to apply them correctly and consistently. For example, when foster children have aversive reactions to pleasure, foster parents may take these reactions personally and want to rid themselves of the child who is making them feel so upset.

An instance in which the caseworker's expertise and active support was necessary to preserve a foster placement occurred in the foster family of twelveyear-old Wally. The foster parents had been doing their best to help Wally to become comfortable in their home. They cooked his favorite foods, helped him with homework, spent time with him doing things he enjoyed, and generally made every effort to be responsive and available. After three weeks they came down to breakfast to discover that Wally had knocked over the garbage can in the kitchen and spilled garbage all over the floor. Instead of picking the mess up, he was calmly making himself some toast. When he looked up and saw his foster parents, he immediately screamed, "You're nothing but pieces of crap. I wish I was back with my real mother." The foster parents sent him to his room, where he proceeded to open every drawer and throw all of his clothes on the floor. The foster parents called their

caseworker and said the boy had to go, that he was completely out of control and that they refused to be treated this way when they had done everything they could to welcome him into their family.

The caseworker asked the foster parents to put their decision on hold until she could speak with them in person. She came the very next day. She said that she could certainly understand why they were upset, but that given Wally's learned needs for unhappiness, it was inevitable that their good care would cause him to miss the relationship conflict he had misidentified as happiness and that he would unknowingly try to recreate it. The caseworker assured the foster parents that there was a side of Wally hoping that they would keep him and that this episode of backsliding was actually an indication that Wally was making real progress and that he was getting very attached to them. She told the foster parents that because of his learned needs for unhappiness, Wally's progress would always be interrupted by episodes of backsliding. The only way accurately to assess the impact they were having on him was to determine whether over time he took more steps forward than backward. Once the foster parents experienced the caseworker's appreciation of their efforts and also benefited from her understanding of Wally's seemingly crazy behavior, they reconnected with their original feelings of commitment to him.

Next, the caseworker sat down with Wally and explained that the more he had been enjoying life with his new family, the more some part of him had unknowingly been longing for the familiar unhappiness he had had with his birth parents. As a result he was trying to experience the comfort of those feelings by fighting with his foster parents. The caseworker told Wally that these episodes might happen from time to time, but that she had explained to his foster parents why they occurred and that his foster parents didn't want to give up on him and wanted to help him through them. She added that if Wally could begin to observe these reactions in himself, his life would go much better.

While Wally did have more outbursts, the foster parents knew to expect them and were able to avoid taking them personally. They simply told Wally he had to work with them to clean up whatever mess had been made. When Wally screamed at them, saying that he hated them and wanted to go back with his "real" parents, his foster parents said they knew sometimes he missed his birth parents and was angry that he couldn't be with them. As time

passed, Wally's angry moments grew fewer and less intense, and he became increasingly affectionate and involved with his foster parents, who were thrilled at his progress.

There are many other reasons why foster parents may need the help of trained caseworkers to implement this new approach. Foster parents may believe in discipline or rewards and need help understanding why these ways of managing children's behavior are harmful rather than helpful. Their neighbors, family, and friends may have incompatible views of how to handle difficult children and foster parents may need a lot of support to adhere to a different point of view. Also, foster parents themselves commonly have aversive reactions to the pleasure of helping their foster children become happier and more functional. These aversive reactions can include feelings of exhaustion, martyrdom, anger, and frustration, and the caseworker needs to be available to help the foster parents through these reactions. In responding to foster parents' aversive reactions, the caseworker has the opportunity to provide a model for the foster parents to follow in caring for their foster children. The caseworker needs to avoid becoming angry or discouraged when the foster parents voice their unhappiness with the foster child. Instead, the caseworker can emphasize how happy she is that they are sharing those feelings and that it is natural for them to have reactions to putting in such sustained, hard, effective work with their foster child.

The kind of effort required to give foster parents the emotional support and cognitive understanding necessary to enable them both to avoid taking the behavior of difficult children personally, and also to remain committed to keeping them and helping them requires smaller caseloads and more intensive training than most caseworkers have at the present time. But one of the biggest problems in child welfare has always been that of taking the short view. We know that children who suffer multiple placements go on in disproportionate numbers to be institutionalized in mental hospitals and prisons or to be on welfare rolls. Compared with a lifetime of institutionalization or social security disability, the expense of hiring and training additional caseworkers fades in significance.

### References

- Annie E. Casey Foundation. (2002, March). Family to family: Tools for rebuilding foster care, recruitment, training, and support. Baltimore: Author.
- Chamberlain, D. (1998). *The mind of your new born baby*. Berkeley: North Atlantic Books.
- Meltzoff, A., & Moore, K. (1983). Newborn infants imitate adult facial gestures. *Child Development*, *54*, 702-709.
- Pieper, M., & Pieper, W. (1990). Intrapsychic humanism: An introduction to a comprehensive psychology and philosophy of mind. Chicago: Falcon II Press.
- Pieper, M.H., & Pieper, W.J. (1991). It's not tough, it's tender love. *Chicago Medicine*, 94, 10-16
- Pieper, M.H., & Pieper, W.J. (1995). Treating violent 'untreatable' adolescents: Applications of Intrapsychic Humanism in a state-funded demonstration project. In K. Tyson (Ed.), New foundations for scientific social and behavioral research: The heuristic paradigm (pp. 455-472). Boston: Allyn & Bacon.

- Pieper, M., & Pieper, W. (1999). Smart love: The compassionate alternative to discipline that will make you a better parent and your child a better person. Boston: Harvard Common Press.
- Pieper, M., & Pieper, W. (2002). Addicted to unhappiness: Free yourself from moods and behaviors that undermine relationships, work, and the life you want. New York: McGraw-Hill.
- Spitz, R. (1945). Hospitalism: An inquiry into the genesis of psychiatric conditions in early childhood. *Psychoanalytic Study of the Child*, 1, 53-74.
- Tyson, K. (Ed.). (1995). New foundations for scientific social and behavioral research: The heuristic paradigm. Boston: Allyn and Bacon.

**Martha Heineman Pieper, Ph.D.** has been an adjunct professor of research at Smith College School for Social Work and has published numerous articles, particularly in the areas of philosophy of research. She was also on the editorial board of <u>Social Work</u>. She received her B.A. from Radcliffe College and her Ph.D. from the University of Chicago.

**William J. Pieper, M.D.** has a certificate in child and adult psychoanalysis. He has served on the Child Therapy faculty of the Chicago Institute for Psychoanalysis and is a clinical associate professor of pyschiatry at Rush Presbyterian-St. Lukes Medical School. He received his medical and undergraduate degrees from the University of Illinois.