

‘Going for it’: overcoming passivity

Beverly Morris explains to Eve Menezes Cunningham how movement work with adoptees may help them reach out. Many of the personal challenges they experience, she says, can be understood in neurological developmental terms

Have you ever felt that a client is holding back? That even though you’re there to offer as much support as necessary, they seem unable to reach out and get what they want?

Beverley Morris is a BACP-accredited counsellor. She works as an independent contractor for the NHS and at the Post-Adoption Centre (PAC) in London. She has 14 years’ experience in primary care, nearly ten years in the adoption field, and a special interest in adoption. As well as working as a counsellor, Beverley co-runs a couple of outreach surgeries for the PAC.

A particular kind of passivity

Over the years, Beverley has noticed that many of the adopted adults she works

with, as well as children (through their adoptive parents), have a ‘particular kind of passivity: a real difficulty that feels like an inability to be proactive, get out there and do it. It’s more than a simple lack of confidence or ‘victim’ position – as if that’s not hard enough. Rather, it’s a passivity reflective of their early experience that may also be physiologically consolidated.’

Beverley says: ‘In my clinical work for PAC I work with a lot of adopted adults and there’s a definite thread. There’s a real struggle, a hurdle to be proactive. This passivity that underlies the personality even underlies the emotions. My supervisor mentioned about three years ago that she had noticed some adopted people had real trouble ‘going for it’. It seemed to me that it was a confidence thing. It’s about feeling right in the world or even about having a right to be in the world.’

Inspiring workshop

A recent PAC workshop run by Sally Goddard Blythe, ‘A parent’s window into the child’s mind – using movement to train the brain’, made the link between adoptees and passivity more tangible for Beverley. While obviously not all adopted adults and children will have these issues, she was fascinated by the link between this attitude and behaviour and the idea that it could actually be physiological. She explains that in the normal situation, as the baby feeds during the bonding process with her or his mother, suckling is ‘a normal aggression and assertion’ as the baby goes all out to get what’s needed. ‘Bottled milk is not quite the same.’ This gives the baby a sense of control and confidence that she or he can impact the world.

Beverley says: ‘The most obvious aspect of having that bonding interrupted is not having a full sense of self, and all that may bring for different individuals placed in their adoptive families. Separation from a

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child’s birth mother in itself may cause the underdevelopment of the reaching out process. It might be seen or understood in terms of the unmet needs of the baby yearning for their birth mother. When we link it to the neurological process of the action that’s been interrupted, we get more of a physiological understanding of how someone can feel quite locked inside themselves and not have the confidence to go for it. Sally explained that movement is the first language of a baby. An early or primitive reflex’s job is to play itself out. Then it becomes obsolete because we don’t need it any more. If the reflex doesn’t get to become redundant, it impacts on the development or the non-maturation of more sophisticated reflexes/movement.’

Primitive reflex

As we grow, Beverley says, ‘The most developed form of movement is to sit or stand still.’ Adoption procedures have changed over the years but in all cases, she points out, ‘Contact with the mother is interrupted. The mother disappears. In the past, some adopted babies were actually breastfed for six weeks before being given up. Clinically, I think it’s worse not to have had that six weeks, but the separation might then have been more traumatic. Other babies would have been fed by their mothers for the first day or two.’ For babies separated from their mothers from the moment of birth the impact’s even more dramatic. ‘This can lead to an attitude of “I’m not going to get what I want so why bother?”’ says Beverley. When a primitive reflex, such as sucking or reaching out, is not met appropriately by the ‘right’ mother,



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that movement/motion reflex would be left unsatisfied. It would be unused and therefore still 'waiting' and not inhibited (developing to 'redundancy') with higher neurological development occurring.

'In adult behaviour, the results of this can look and feel very frustrating. It can be disabling, negative and difficult for the person – and others – to understand. Understanding and honouring this fuller reality is the first step towards practising change.'

Bonding and neurological development

This has already impacted on adoption procedures. Beverley says, 'Looking at bonding and neurological development together is commonplace now. In the adoption field there is a lot of understanding around this. People are learning about the physicality of brain development and bringing this knowledge into the context of understanding the adoption experience and therapy.'

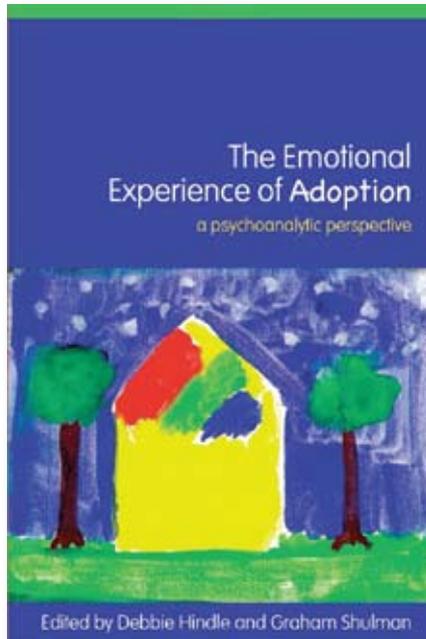
Beverley is excited by the idea that 'many personal challenges and hurdles that adoptees experience can start to be understood in neurological developmental terms'. If you're a therapist wondering what kind of signs you could be looking out for, she suggests that you 'relate (which most therapists do anyway) challenges adoptees might bring to the context of their early days. In this way, some of the real flavour or nature of that person's 'story' or experience is likely to emerge. With adoption, you're looking at the reality of separation and attachment issues rather than neurosis.'

Going back to the beginning

Beverley says: 'As therapists, we need to understand and honour this real hurdle that might be neurological as well. As it's due to an underdeveloped and immature reflex, going back to the beginning is a helpful start. It can be developed in a practical way with small steps.'

'The workshop showed how to work with children with learning difficulties. They take them through the earliest reflexes using exercises supported with a story. They do not move on to the next movement until they've really got it. I think this 'therapy' could be adapted to work with adults, even using or combining yoga or Pilates.' 

Book reviews



The Emotional Experience of Adoption: A Psychoanalytic Perspective

Edited by Debbie Hindle and Graham Shulman (London: Routledge, 2008)
280 pages
ISBN 978-0-415-37276-3

John Simmonds writes (chapter 10, page 28):

Adoption changes everything. Whatever the child brings into their adoptive home – their genetic inheritance, their personality, their pre-birth and pre-placement experiences, their class, ethnicity, language, culture and family history – it will be changed by the people, circumstances and opportunities that make up their new world. And the adoptive home – the people, circumstances and opportunities – will also be changed by the child and what they bring to the placement. It is a therapeutic intervention of the most monumental kind and like all interventions, it is intended to change things for the better.

Sadly, the outcome for both child and

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new family may be far removed from the benign intentions of well-meaning and often naively optimistic adoption brokers. So a book like this one is invaluable, in that it realistically considers the incremental and sometimes mutually damaging impact of adoption on the child and new family, as well as the kinds of therapeutic support needed by both to prepare for and alleviate such unintended effects.

A way of thinking

The authors aim to 'promote not a particular way of working but a way of thinking' (page 4). They draw skilfully on psychoanalytic concepts, attachment theory and neuroscience research, as well as fiction, to reflect on the added complexities of adoption and loss issues when working with traumatised children and their new families.

Adoption in fiction

The value to struggling adoptive families of being 'held' emotionally through such thinking is richly and sensitively illustrated in clinical material throughout the book. This is in stark contrast to two well-known stories of adoption where no such reflective support was available to the adoptee or new family. John Simmonds provides a harrowing critique (pages 34–39) of Hans Christian Andersen's tale of Thumbelina, who suffers successive traumas and terror after being abducted from her naïve adoptive mother. In 'A cautionary tale of adoption: fictional lives and living fictions', chapter 17, Graham Shulman examines through a psychoanalytic lens the 'narrative of an informal adoption' in Emily Bronte's *Wuthering Heights* (pages 253–263). In this classic 'romance', the father, Mr Earnshaw, adopts a 'foreign' child whom he has found abandoned in far-off Liverpool and literally carries