The development of Chinese adoptees: A follow-up study

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Ethical review	Approved WMO
Status	Pending
Health condition type	Family issues
Study type	Observational invasive

Summary

ID

NL-OMON40626

Source
ToetsingOnline

Brief title
The development of Chinese adoptees: A follow-up study

Condition

- Family issues

Synonym
attachment problems, insecure attachment

Research involving
Human

Sponsors and support

Primary sponsor: Universiteit Leiden
Source(s) of monetary or material Support: Onderzoekstoelage (OT) van het Bijzonder Onderzoeksfonds (BOF) van de Katholieke Universiteit Leuven (België)

Intervention

Keyword: attachment security, emotional problems, informationprocessing biasses, parental sensitivity

Outcome measures

Primary outcome

The main study parameter is attachment security. We are interested in the development of attachment in children adopted from orphanages and foster homes in China. We aim to study which mechanisms play an explaining role in the (in)stability of (in)secure attachment. The impact of parental sensitivity on the reversibility of insecure attachment and on the development of a secure attachment representation will be assessed. Furthermore, it is examined whether attachment related information processing biases (attentional bias and interpretation bias) are important to understand stability of and change in attachment and to understand the association between insecure attachment and (a cognitive vulnerability for) emotional problems.

Secondary outcome

We focus on the children*s development during the first 10 years after their adoption (assessments 2 and 6 months after adoption and 9 years after adoption). We will examine whether children adopted from orphanages show different developmental trajectories compared to children from foster homes. We are interested in the social-emotional, mental and motor development. Furthermore, we will examine the children*s biophysiological functioning (cortisol, alpha-amylase and sIgA). Finally, brain activity (resting state frontal asymmetry and mu) will be recorded using EEG to assess the influence of

preadoption experiences and to investigate whether frontal asymmetry has an

influence on the performance on the Attentional Breadth Task (ABT; Bosmans,

Braet, Koster, & De Raedt, 2009).

Study description

Background summary

A central assumption in attachment theory is that children develop an attachment relationship during the first year of life, based on their daily interactions with parents or caregivers. Less is known, however, about the prerequisites for the development of attachment relationships after the first birthday, and about the reversibility of insecure attachment in case normal development of attachment is compromised. In this adoption study these topics are studied through a *natural experiment*. The children were between 11 and 16 months old when they were adopted by Dutch parents and it is this first year of life which is considered formative for the development of a first attachment relationship.
Furthermore, the cognitive vulnerability to develop emotional problems will be investigated in this study. Attachment theory postulates that the quality of parent-child interactions has an effect on the development of a cognitive vulnerability for emotional problems. In fact, the attachment theory states that experiences in parent-child interactions are stored in internal working models. These internal working models represent expectations with regard to the availability of the parent (Bowlby, 1969). However, limitations of this internal working model concept are that it is not clear how attachment relations are represented cognitively and that the definition of the internal working model is rather vague. Recently it was postulated that internal working models can be conceptualized as cognitive schemas. These schemas influence attachment-related information processing (Waters, & Waters, 2006).
Cross-sectional research shows that these attachment-related information processing biases are related to attachment and to psychopathology. However, the role of this attentional breadth effect in longitudinal stability of attachment and in the development of psychopathology remains unclear.

Study objective

This research proposal aims to examine three broad research questions.
The first research question concerns the longitudinal development of attachment of Chinese adoptees. This study provides the opportunity to shed light on the development of attachment relationships in case normal family life during the first year of life has been compromised.

The second research question is the following: *What are the underlying mechanisms explaining the stability in (in)secure attachment?* We aim to investigate whether attachment-related information processing biases (namely attentional bias and interpretation bias) play a role in the longitudinal stability of (in)secure attachment. Recent cross-sectional research showed that attachment-related information processing biases (attentional bias and interpretation bias) are related to attachment (Bosmans et al., 2009, De Winter et al., manuscript in preparation). Consequently, we wonder whether these information processing biases are not only cross-sectionally, but also longitudinally related to attachment.

The third research question involves the development of behavioral and emotional problems. We intend to study whether attachment-related information processing biases (namely attentional bias and interpretation bias) are important to understand the development of (a cognitive vulnerability for) emotional problems. Recent research indicates that attentional bias and psychopathology are cross-sectionally related to psychopathology (Bosmans, Koster, Vandevivere, Braet, & De Raedt, 2013).

Study design

This study is the third wave of a longitudinal follow-up study and aims to shed light on the development of Chinese adoptees who received either institutional care or foster care before they were adopted. During the third wave the families will be visited at home and they will visit the university.

During the home visit, the Secure Base Script Prompt Word Assessment Task (SBST; Waters & Waters, 2006) will be conducted to assess attachment representations. The quality of family interactions will be investigated using the Family Interaction Task (FIT, Allen et al., 2003). Furthermore, parent-child interaction during some tasks will be video-taped and coded with the Emotional Availability Scales (EAS; Biringen, Robinson, & Emde, 2000) in order to rate maternal sensitivity. The child and the parent will be asked to make an abbreviated intelligence test. Finally, the children will have to complete several questionnaires: Trust subscale of the People In My Life Questionnaire (expectations about the availability of the attachment figure) (PIML; Cook, Greenberg, & Kusche, 1995), the Children*s Response Style Questionnaire - extended (cognitive vulnerability for emotional problems) (CRSQ-extended; Verstraeten, Vasey, Raes, & Bijttebier, 2010), the Center for Epidemiological Studies - Depression Scale (emotional problems) (CES-D; Radloff, 1977), the Psychological Control Scale of the Youth Self-Report (psychological control) (PCSYSR; Barber, 1996) and the Autonomy Support Scale of the Perceptions of Parents Scale (autonomy support) (POPS; Grolnick, Ryan, & Deci, 1991).

During the visit at the university, motor development will be assessed using a balancing task and a finger tapping task (FTT; Reitan, 1969). Furthermore,

height, weight, head circumference and ear temperature will be measured. Next, the child will have to make an unsolvable puzzle task in order to examine support seeking behavior. Different saliva samples will be collected before and after this unsolvable puzzle task to measure stress reactivity through cortisol analyses. Attachment-related attentional bias and interpretation bias will be investigated with the Attentional Breadth Task (ABT; Bosmans et al., 2009) and an Interpretation Bias Task. Furthermore, the Stop Signal Task (Lappin & Eriksen, 1966; Logan & Cowan, 1984; Vince, 1948) will be used to assess cognitive control. Finally, brain activity at rest and during a task will be registered with EEG to observe resting state frontal brain asymmetry and mu-activity.

Between the home visit and the visit at the university the child will fill out a state attachment diary during one week to measure daily attachment-related appraisals regarding mother and father. Besides, the parents will be asked to collect their child*s saliva: two saliva samples a day (passive drooling) during two weekends (Saturday and Sunday). Furthermore, the parents will complete some questionnaires, namely a questionnaire about the actual situation of the parent and with questions about adoption, a stressful life events questionnaire, a questionnaire to measure indiscriminate friendliness (IF, Chisholm et al., 1995) and four items of the Relationship Problems Questionnaire (disinhibited behavior) (RPQ, Minnis, Rabe-Hesketh, & Wolkind, 2002), the Parental Efficacy Questionnaire (parental efficacy) (Van IJzendoorn, Bakermans-Kranenburg, & Juffer, 1999), the Early Adolescent Temperament Questionnaire Revised (temperament of the child) (EATQ-R; Capaldi & Rothbart, 1992; Hartman, 2000), the Child Behavior Checklist (emotional and behavioral problems) (CBCL; Achenbach, 1991), the parent version of the Psychological Control Scale of the Youth Self-Report (psychological control) (PCSYSR; Barber, 1996) and the parent version of the Autonomy Support Scale of the Perceptions of Parents Scale (autonomy support) (POPS; Grolnick, Ryan, & Deci, 1991). Finally, the child*s teacher will be asked to provide standardized test scores with respect to mathematics and language/reading (CITO-scores) of the child.

Study burden and risks

Parents are asked to complete several questionnaires, to do an intelligence test and to accomplish some tasks together with their child. The burden for the children consists of some (online) questionnaires, performing some tests, collecting saliva and an EEG registration. Research from our departments (in Leiden and Leuven) shows that these measurements are not too burdensome for the participants and that they pose no risk.

Contacts

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age
Children (2-11 years)

Inclusion criteria

The current study is a follow-up study. The participants were recruited during the first wave of the study (Van den Dries et al., 2010, 2012). The following inclusion criteria were used to recruit the participants:
- Chinese girls
- who arrived in the Netherlands when they were betwee 11 and16 months old
- and who were adopted by a two parent family.
Our aim is to include each of the 92 families, who participated in the first and second wave of the study in the third wave of the study.

Exclusion criteria

The exclusion criterium of the first wave of the longitudinal study (Van den Dries et al., 2010, 2012) concerned hospitalization.
-Children who were hospitalized in the first six months after their arrival in the Netherlands were excluded from the study.

Study design

Design

Study type: Observational invasive

Masking:	Open (masking not used)
Control:	Uncontrolled
Primary purpose:	Prevention

Recruitment

NL

Recruitment status:	Pending
Start date (anticipated):	01-09-2014
Enrollment:	92
Type:	Anticipated

Ethics review

Approved WMO

Date:	03-11-2014
Application type:	First submission
Review commission:	METC Leids Universitair Medisch Centrum (Leiden)

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
CCMO	NL49250.058.14