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Portuguese adopted adolescents' perception of attachment relationships to parents

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Abstract

The establishment of emotional bonds is one of the most important tasks of the adoptive family. Most research about attachment in adoption focuses on young adopted children, as opposed to adoptees in other stages of development. The present study aims at assessing the adopted adolescents' self-perception of attachment relationships with their adoptive parents, by pairing them with a group of institutionalized adolescents and another one of adolescents in the community. One hundred sixty-five adolescents (55 adopted, 55 in residential care, and 55 living with their birth family), aged 12 to 19, participated in this study. Data were collected using the Inventory of Parent and Peer Attachment to assess attachment relationships with parents on three dimensions: trust, communication, and alienation. The results showed that adoptees perceived their relationship with their parents in a similar way to peers in the community and presented higher results when compared to institutionalized adolescents in trust and communication and lower scores in alienation. The results highlighted the relevance of family context experiences and suggested that adoption can offer the possibility of building a secure attachment relationship, which is not the case in the context of collective care, as happens within institutionalized care.

KEYWORDS

attachment, adopted adolescents, adoption, self-perception

1 | INTRODUCTION

Even though attachment theory has primarily focused on infancy and has emphasized the role played by early care experiences on the development of secure relationships, it is consensual that attachment accompanies humans "from the cradle to the grave" (Bowlby, 1988, p. 82). Over the years, attachment research has been extended to developmental periods besides infancy and to attachment figures other than primary caregivers. Specific research on attachment in adolescence has taken into consideration the important developmental changes that occur during this period, such as the adolescents' search for independence from their primary caregivers as well as differentiation and autonomy attainment (Escobar & Santelices, 2013), while valuing proximity to their peer groups (Scharf & Mayseless, 2007) and romantic partners (Hazan & Shaver, 1987). However, the quality of the relationship established with parents continues to be crucial to their psychosocial adjustment (Ainsworth & Bowlby, 1991; Allen & Land, 1999; Raudino, Fergusson, & Horwood, 2013).

Particularly, in adoptive families, whatever the age of the child at adoption, one of the most important family tasks is the development

of parent-child emotional bonds, which were previously nonexistent, and the attachment theory becomes crucial to understanding the way that this significant relationship develops (Román & Palacios, 2011). Research in adoption has provided information about the development of adopted children, as well as their socioemotional difficulties (Hawk & McCall, 2011; Rueter, Keyes, Iacono, & McGue, 2009). However, despite listing these difficulties, research has also shown that the psychosocial adjustment of most adopted children is identical to their nonadopted peers, showing similar attachment behaviours (Barcons-Castel, Fornieles-Deu, & Costas-Moragas, 2011; Juffer & van IJzendoorn, 2005; McSherry, Malet, & Weatherall, 2016). Hence, it is important to understand how adverse preadoption experiences have an impact on the establishment of attachment relationships.

The strong discontinuity of care and consequent breakdown of relationships (Román & Palacios, 2011) can have a negative impact on internal working models and therefore affect future attachment relationships developed with adoptive parents (Barcons et al., 2012; Feeney, Passmore, & Peterson, 2007; van den Dries, Juffer, van IJzendoorn, & Bakermans-Kranenburg, 2009). Moreover, it has been shown that early experiences of adversity (Hodges & Tizard, 1989),

specifically neglect and long periods of institutionalization, have a negative and damaging impact on socioemotional development (Barcons et al., 2012; Chisholm, 1998; Howe, 2003; Juffer et al., 2011; Román, Palacios, Moreno, & López, 2012; van den Dries et al., 2009; Vorria, Ntouma, Vairami, & Rutter, 2015). Although most residential care (RC) centres are able to ensure children's basic physical needs, most of these institutions cannot meet their psychological needs, particularly at a socioemotional level. This can be due to high ratios of children per caregiver, frequent changes in shifts of professionals, and lack of specific training in dealing with children or adolescents having a past of adversity (Barone, Dellagiulia, & Lionetti, 2015; Carlson, Hostinar, Mliner, & Gunnar, 2014; Lionetti, Pastore, & Barone, 2015; Román & Palacios, 2011). In fact, several studies have suggested a link between early adverse experiences and a more insecure attachment in adopted children comparatively to peers who were never separated from their birth families (Barcons et al., 2014: Barone & Lionetti, 2012: Lionetti, 2014; van IJzendoorn & Juffer, 2006). In a meta-analysis of studies with adopted children, van den Dries et al. (2009) found that these children showed more insecure attachment patterns than did nonadopted peers, due to their history of adversity.

In one of the first studies on this topic with adopted adolescents, Hodges and Tizard (1989) had already revealed that adolescents who experienced early deprivation during their first years of life expressed more difficulties in intimate relationships. More recently, Beijersbergen, Juffer, Bakermans-Kranenburg, and van IJzendoorn (2012) verified that 76% adopted adolescents presented an insecure attachment. Escobar and Santelices (2013) compared the attachment of adopted and nonadopted adolescents and showed that there was a predominance of insecure-avoidant attachment in adopted adolescents, which was in agreement with other existing studies (Barcons et al., 2014; Beijersbergen et al., 2012; van den Dries et al., 2009).

Although the experiences of children with their primary attachment figures are extremely important for the development of internal working models, research has also shown that, creating new ties with an adoptive family can consolidate or change these representations (Beijersbergen et al., 2012; Feeney et al., 2007; Hodges & Tizard, 1989; Román et al., 2012). The establishment of a secure attachment to the adoptive parents can mitigate the impact of early adversity experiences on these adolescents (Barcons et al., 2012; Bernedo, Fuentes, Fernández-Molina, & Bersabé, 2007; Feeney et al., 2007; van den Dries et al., 2009; Whitten & Weaver, 2010). Thus, adoption can function as a successful intervention (van IJzendoorn & Juffer, 2006) by providing children, who could not grow up with their birth parents, with the opportunity of developing a secure attachment relationship with their adoptive parents, and also promoting their cognitive development and psychological adjustment (Juffer et al., 2011; Pace, Zavattini, & Tambelli, 2015; Palacios, Román, Moreno, León, & Peñarrubia, 2014). Despite research showing that adopted adolescents have lower quality attachment relationships when compared to peers who had never been separated from their birth families, it also seems clear that, when comparing adopted children with institutionalized ones, there is a large socioemotional recovery after adoption, as the results presented by adopted children are far superior to the results shown by institutionalized children (Soares et al., 2014; Zeanah, Smyke, Koga, Carlson, & the BEIP Core Group, 2005). In fact, recently McSherry et al. (2016) emphasized the importance of care stability in a family context, by not finding differences in self-perception of attachment to parents or carers in children aged 9 to 14, who were placed, before the age of five, in different types of family placement, that is, adoption, foster care, kinship foster care, residence order, and birth parents after family reunification.

When considering child protection policies in Portugal, it is worth noting that more than 95% of the children referred by Child Protection Services are placed in institutional care. Out of these, 10% have an adoption plan and 30% are presented with family reunification projects, but around 72% of the latter return to care within a short period (Instituto de Segurança Social, Instituto Público, 2016). Despite recent national guidelines that encourage foster care instead of RC, especially with younger children, this practice is still very scarce in Portugal. Thus, most Portuguese institutionalized youths are not and will not be in a situation of adoptability nor have the chance of growing up in a foster family context. Foster families allow for intimate care and personal attention to the child's needs in a family setting and home environment (e.g., Benbenishty, Segev, Surkis, & Baerwald, 2002; Rutter, 2007). It is common for literature on foster care to focus on the problems of young people and adults who have lived in this type of care (e.g., Gerland et al., 2005; Zima, Bussing, Yang, & Belin, 2000). However, results have shown a large variability within this group, presenting a great deal of normative development outcomes (e.g., Drapeau, Saint-Jacques, Lepine, Begin, & Bernard, 2007; McGloin & Widom, 2001; McSherry et al., 2016; Riggs, Augoustinos, & Delfabbro, 2009; Rutter, 2007) and reinforcing the relevance of growing up in a family context.

The present study aims at influencing child protection policies and professional practices in Portugal by checking the impact that adoption can have on life paths by placing these children into stimulating, loving, and protective families. Hence, the present study proposes to analyse the adopted adolescents' self-perception of the attachment relationship, with both mother and father separately, in terms of trust, communication, and alienation. This study resorted to the methodological paradigm in which the focus group (adopted adolescents) was compared to a paired group sharing early adversity (institutionalized adolescents) and another paired group sharing present experiences (nonadopted peers in the community), who had never had any contact with child protection services.

2 | METHOD

2.1 | Participants

One hundred sixty-five adolescents participated in this study, namely, 55 living with their birth family in the community, 55 in residential care (RC), and 55 adopted ones, that is, 33 male (60%) and 22 female (40%), ranging between 12 and 19 years old (M=14.95, SD=2.03). These adolescents were adopted, on average, at 4.59 (SD=3.35) years old, and the adoption time varied between 3 and 18 years (M=10.34, SD=3.56). Eighteen of the adopted adolescents had no experience with their birth families, 20 had been victims of neglect, 12 had been victims of abandonment, and 5 suffered abuse. The 55 adolescents in RC were as similar as possible to the adopted adolescents: 33 male

(60%) and 22 female (40%), ranging between 12 and 19 years old (M = 15.00, SD = 1.95). These adolescents were placed in care, on average, at 5.84 (SD = 3.44) years old and were institutionalized, on average, for 9.55 (SD = 3.63) years. Regarding experiences within the birth family, 37 of the adolescents in RC had been victims of neglect, 10 of abandonment, and 8 of abuse. The distribution of adolescents in RC according to the adversity experiences lived within the birth family is similar to that of adopted adolescents, $\chi^2(2) = 2.52$, ns. Finally, the 55 adolescents who had never been separated from their birth family and who had had no contact with child protection services were also paired in terms of sociodemographic characteristics to the adopted adolescents: 33 male (60%) and 22 female (40%), ranging between 12 and 19 years old (M = 15.02, SD = 2.09). No differences were found between the three groups considering gender and age, but there were differences in time spent in care between the group of adopted adolescents (M = 3.20, SD = 2.41) and the group of institutionalized ones $(M = 9.55, SD = 3.63), t_{(94,50)} = -10.71, p < .001, d = 2.06, 95\% CI$ [-7.52, -5.17]. Table 1 presents the characteristics of the three groups of participants.

2.2 | Instruments

Attachment was assessed through the Portuguese version of the Inventory of Parent and Peer Attachment (IPPA, Neves, Soares, & Silva, 1999; adapted from Armsden & Greenberg, 1987). This self-report questionnaire allows adolescents to assess the quality of the attachment relationship to their mother and father (separately) and to peers. This study only used the parent version, which included 25 items divided into three dimensions: trust, composed of 10 items ($\alpha_{mother} = .85$; $\alpha_{father} = .87$); communication, made up of nine items ($\alpha_{mother} = .87$; $\alpha_{father} = .86$); and alienation, consisting of six items ($\alpha_{mother} = .79$; $\alpha_{father} = .81$). Each item was measured in a 5-point Likert scale from 1 (almost never or never true) to 5 (almost always or always true).

2.3 | Procedures

This study benefited from a specific collaboration with the National Agency for Adoption in the recruitment of participants. The adoption

TABLE 1 Characterization of the participants

Characteristics	Adopted adolescents (n = 55)	Adolescents in residential care (n = 55)	Peers in the community $(n = 55)$
Gender			
Female	22	22	22
Male	33	33	33
Age			
Mean	14.95	15.00	15.02
Standard deviation	2.03	1.95	2.09
Minimum-maximum	12-19	12-19	12-19
Age at adoption			
Mean	4.59		
Standard deviation	3.35		
Minimum-maximum	0-14		
Time in adoption			
Mean	10.34		
Standard deviation	3.56		
Minimum-maximum	3-18		
Time within birth family (mor	nths)		
Mean	17.25		
Standard deviation	21.90		
Minimum-maximum	0-96		
Experiences in birth family			
Lack of experiences	18 (32.72%)		
Neglect	20 (36.36%)	37 (67.28%)	
Abandonment	12 (21.82%)	10 (18.18%)	
Abuse	5 (9.10%)	8 (14.54%)	
Time in care (years)			
Mean	3.35	9.56	
Standard deviation	2.50	3.74	
Minimum-maximum	0-11	3-17	
Age at placement (years)			
Mean	1.47	5.84	
Standard deviation	1.89	3.44	
Minimum-maximum	0-8	0-13	

professionals selected and contacted the participants, ensuring their anonymity. When adoptive families met the sample selection criteria —having an adolescent child adopted for over a year—and gave a positive response regarding the participation in the study, the research team scheduled the interview.

At the time of the sampling selection, in the geographical area of the study, there were 306 adoptive families fulfilling the selection criteria. Out of these 306 families, 90 were randomly contacted. These were distributed evenly in three different groups according to the age at adoption (0-2, 3-5, and 6 or older). From these 90, only 55 (61%) accepted to participate in the study (18 were adopted at 0-2, 19 were adopted at 3-5, and 18 were adopted at 6 or older). In Portugal, less than 1.5% of the adoptions are international and all the participant families adopted domestically. The study was carried out with a sample of 55 adoptees, which is a frequently used number in studies with adoptive families. In relation to the group of adolescents in RC: In the year of the sampling selection, there were 703 children in RC in the same geographical area of the study in 26 RC centres, out of which four were randomly selected to fulfil the required number of 55 adolescents to match the number of adopted ones, according to age and gender. The four above-mentioned centres accounted for a total of 79 children and adolescents in care. From these, 55 (69%) participated in the study. At the time of data collection, all participant adolescents who were in RC had a family reunification life project. Thus, residential centres had encouraged frequent visits from birth relatives in order to maintain family bonds.

Regarding the adolescents in the community who had never been separated from their birth families, the recruitment was pursued, randomly selecting families in the same geographical area according to the following criteria: two-parent families without history of past adversity, namely, no divorce and no referral to child protection

TABLE 2 Descriptive statistics of the dimensions of trust, communication, and alienation

Dimension	In relation to mother (N = 165), M (SD)	In relation to father (N = 148), M (SD)
Trust	37.21 (8.30)	38.06 (7.70)
Communication	31.72 (8.00)	31.18 (7.62)
Alienation	14.44 (5.75)	14.27 (5.43)
Allenation	14.44 (5.75)	14.27 (5.43)

services. The selected adolescents were matched according to age and gender with the adopted ones.

In adoptive families, data were collected in households and the adopted adolescents completed the questionnaires individually, whereas data from the remaining two groups were collected in schools and collectively. All participants signed a consent form where their participation was confirmed as being voluntary.

The normality of the distribution of all the variables was explored, and the requisites for parametric procedures were analysed. Whenever needed, nonparametric procedures were applied, and when the results of nonparametric tests matched the results of parametric ones, the latter were reported (Fife-Schaw, 2006).

3 | RESULTS

3.1 | Self-perception of adolescents on attachment relationships to mother and father

Table 2 presents the descriptive statistics of IPPA dimensions, separately to mother and father. Adolescents got high scores in trust and communication and low scores in alienation in their relationship with father and mother, as the mean values were close to the far-end scores of the scale.

For all participants, there were no statistically significant differences in all the dimensions of IPPA for the mother and father. There were also no differences between girls and boys and no significant correlation with the adolescents' age.

3.2 | Comparison between the three groups

In order to explore the existence of the differences between the self-perception of the three groups of adolescents (adopted, in RC, and peers in the community) in the dimensions of IPPA to the mother and father, a one-way analysis of variance was performed. Table 3 presents the descriptive means of each group and the existing differences.

For both mother and father, the adolescents in the community who had never been separated from their birth family were the ones who presented the highest mean values in the dimensions of trust and communication and the lowest ones in the dimension of alienation.

TABLE 3 Mean, standard deviation, and differences between groups on the subscales of trust, communication, and alienation for the three groups

Dimension	Peers in the community		Adopted adoles	Adopted adolescents		Adolescents in residential care		F	
	M (SD)	n	M (SD)	n	M (SD)	n	df	Value	
In relation to mother									
Trust	41.44 (5.97)a	55	39.53 (9.36)a	55	30.65 (4.33)b	55	(2, 162)	38.49*	.32
Communication	35.49 (6.01)a		33.75 (9.72)a		25.95 (3.36)b			30.02*	.27
Alienation	11.47 (4.13)a		13.04 (6.11)a		18.82 (3.95)b			35.33*	.30
In relation to father									
Trust	41.82 (5.80)a	54	40.70 (7.78)a	47	31.11 (4.11)b	47	(2, 145)	45.62*	.39
Communication	33.15 (7.68)a		33.02 (9.04)a		27.06 (3.23)b			11.46*	.14
Alienation	11.87 (4.11)a		12.34 (5.28)a		18.96 (3.70)b			39.17*	.35

Note: Different lowercase letters represent differences between groups (p < .001). According to Cohen (1988), η^2].05–.25] is a moderate effect size and η^2].25–.50] is a high effect size.

On the contrary, the adolescents in RC presented the lowest values in the dimensions of trust and communication and the highest scores in alienation, and the Bonferroni post hoc test revealed that institutionalized adolescents reported relationships of lower trust and communication and higher alienation for both mother and father, when compared to the other two groups. On the other hand, adopted adolescents and adolescents who had never been separated from their birth families presented very similar results, and no statistically significant differences were found between these two groups. In the adopted adolescent group, the age at adoption and the adoption time were not significantly correlated to any of the IPPA dimensions, regarding both the mother and father.

4 | DISCUSSION

The main aim of this study was to analyse the attachment relationship to both mother and father separately, in a group of adopted adolescents, paired with a group of institutionalized adolescents, and a group of peers in the community who had never been separated from their birth families and had no contact with child protection services. The results revealed that the adopted adolescents perceived their relationship with both their mother and their father—in terms of trust, communication, and alienation—very similarly to their peers in the community. Furthermore, these adopted adolescents presented higher results when compared to institutionalized adolescents in the dimensions of trust and communication, for both mother and father, and lower scores in the alienation dimension. The results of institutionalized adolescents were statistically different from the results of adopted adolescents and those who had never been separated from their birth families in all the analysed dimensions, showing lower levels of trust and communication and higher levels of alienation for both parental figures. This outcome may have been due to the possible negative consequences of institutionalization in the psychological well-being of children and adolescents that went through this process, reinforcing previous research that reported the negative effects of institutionalization in the socioemotional development of children or adolescents or at least highlighting the inability of the RC experience in promoting the recovery of early adverse experiences (Chisholm, 1998; Howe, 2003; Román & Palacios, 2011; Vorria et al., 2015). Nevertheless, it is worth noting that because institutionalized participants had regular contacts with birth parents, the attachment relationship to caregivers in the institution was not considered in this study.

Moreover, the results obtained by adoptees proved to be somewhat surprising and reinforced the importance of reflecting on the absence of differences between adopted adolescents and their peers in the community. This lack of differences between two groups with such distinct past experiences may be due to the different methods of data collection. Adopted adolescents filled in the questionnaire in an individual context, whereas peers in the community did so in a school context and collectively, which may have caused some bias. It is possible that adopted adolescents may have restrained themselves in pointing out the vulnerabilities in their relationship with their parents. Although they did not have to verbalize their answers, the closeness and presence of the researcher in their home may have worked as

a restraint to truly portray their relationship with their parents. Another reason to explain these results can be related to the collaboration bias, frequently present in studies with adopted adolescents. Because the participation in the study requires parental permission and adolescents' willingness, it is possible that only the most adjusted families, with fewer problems and more positive parent or child relationships, accepted to participate. However, although adopted adolescents as a group showed higher rates of insecure attachment when compared to community peers (van den Dries et al., 2009), research has also shown that the relationships developed with adoptive parents can behave as a healing intervention (Barcons et al., 2012; Bernedo et al., 2007; Feeney et al., 2007; van den Dries et al., 2009; Whitten & Weaver, 2010), as they are capable of changing less positive attachment representations.

The lack of significant correlation between the age at adoption, the adoption time, and the dimensions of IPPA was also surprising. Contrary to the results obtained by other authors (e.g., Howe, 2003), there were no associations between adoptees' attachment dimensions and the age at adoption. Some studies (e.g., Chisholm, 1998; Pace & Zavattini, 2011; Vorria et al., 2015) suggest that attachment relationships may improve with the adoption time: however, this was not found in this study, as there was no correlation between the time of adoption and any of the IPPA dimensions. These results can be explained in two ways. First, it is possible that IPPA, as a self-report questionnaire answered in a Likert-type scale, is less able to assess the underlying differences that are specific to adoption, when used on its own without other attachment reporting measures. Nevertheless, the IPPA was used with adopted children (9 to 14 years old) to compare the attachment relationships to parents or carers with other types of family care placements, and similarly, no differences were found, as these placements had a common lengthy duration that enabled the creation of new and lasting attachments to their new parents or carers (McSherry et al., 2016). Studies with adolescents over the age of 14 could require a more in-depth assessment to understand if differences do exist or if the use of a self-report questionnaire that was not specifically developed to assess attachment within adoption can be a limitation, by not allowing for the identification of differences in attachment according to previous life experiences and the preadoption history. Second, it is also possible that the participants' adoption time was enough to heal some of the preadoption adversities, even for adolescents adopted at a later age. Because most of these adoptees had been adopted for a long time (minimum of 3 years and maximum of 18), specific preadoption adversities no longer play a central role in their attachment relationships.

Previous to adoption, most adopted adolescents had been institutionalized, and the literature suggests that the experiences of institutionalization and neglect tended to exert influence on the development of the attachment relationship to be established with adoptive parents (Barcons et al., 2012; van den Dries et al., 2009). Adoptees were also more likely to develop lower quality attachment relationships when compared to their peers who had never been separated from birth families (Barcons et al., 2014; Barone & Lionetti, 2012; Lionetti, 2014; van den Dries et al., 2009). This study may suggest an overrating of the results and should be followed up by further

Wilfy

research with a more detailed analysis to confirm this possible bias. In fact, these results can be explained in three ways. First, the instrument used to assess attachment might not have been sensitive enough to measure the attachment and was used as a single measure. Although IPPA is one of the most commonly used questionnaires to assess attachment in adolescents and demonstrate predictive associations with various aspects of mental health (Raudino et al., 2013), there is no consensus as to the best assessment of attachment in adolescence, and many studies in the area of adoption resort to interviews (e.g., Barcons et al., 2014; Escobar & Santelices, 2013). Furthermore, adoptees as a group are often characterized by an experience of early adversity, and it is possible that vulnerabilities in the relationship with their adoptive parents can only be acknowledged when studied in depth, by exploring the relationship, identifying characteristics, giving meaning to attitudes and behaviours and accessing the internal working models of attachment. The relationship established between interviewer and interviewee during a semistructured interview can allow the adoptees to verbalize their feelings and show the weaknesses of the relationships. Second, overrating can be the result of a defence mechanism of adoptees, in the sense of idealizing their relationship with their adoptive parents for fear of exposing to others the frailty of this relationship and avoid conveying an unsuccessful adoption. Or even, due to their past experience of neglect in their birth families, adoptees could overrate adoptive parents' signs of affection, whereas these, in turn, could more openly show affection owing to preadoption preparation. The third way to explain the inflation of results is social desirability. It is worth reflecting on the data collection method, which was distinct in the case of adopted adolescents who filled in guestionnaires individually at home. For the other two groups, data collection took place at school and in groups.

In addition to the considerations made regarding adolescent adoptees, the results of this research can suggest some harmful effects of institutionalization. In fact, the group of institutionalized participants seems to be at risk in terms of socioemotional development, and as such, this group represents what adoptees could have been if they had not been adopted. It is to be expected that the attachment relationships between adolescents in RC and their parents are less positive, due to negative experiences with birth parents before being institutionalized and the institutionalization experience itself. However, the life project of these adolescents is family reunification; thus, they should live in a context that allows for the establishment of a positive relationship with parents and recovery from previous negative relationships. The results of the present study show that RC is not permitting this recovery, which can be due to factors discussed by other authors (e.g., Barone et al., 2015; Carlson et al., 2014; Lionetti et al., 2015; Román & Palacios, 2011) regarding the potentially harmful characteristics of RC. For children who have family reunification as a life project and for whom adoption is not a viable option, foster care can be an alternative, as it can provide more intimate care and personal attention to their needs (Benbenishty et al., 2002; Rutter, 2007). The RC adolescents in this sample have had a family reunification life project for an average of 10 years, which represents a long period in the life of a child, when taking into account that these adolescents are 15 years old on average. Politics in Portugal privilege the return to the birth family, successively trying the recovery of the relationship

between these children or adolescents and their birth parents, disregarding other family options, such as foster care or adoption. The protective and healing role of adoption was considered in this study through the comparison between adopted adolescents and RC adolescents, taking into account their common previous adversity experiences. The main difference between these two groups is adoptees' integration into a family context as opposed to institutionalized adolescents' lingering in institutions.

The evidence of recovery of adoptees is quite impressive when compared to peers who remained in institutions (Soares et al., 2014; Zeanah et al., 2005), highlighting the impact of postadoption experiences (Juffer et al., 2011). In fact, being adopted provides the possibility of experiencing family relationships and building secure attachments to adoptive parents who promote the opportunity to change internal working models and break intergenerational transmission. Nevertheless, it is also possible that participant adolescents in the RC group had established positive attachment relationships to other caregivers in the care centres, even though they were not specifically assessed.

The present study shows some limitations, which call for caution in the interpretation of results. The first limitation is the sample size. which is not large enough to allow for the generalization of the results. The second relates to the specificities of the research in the field of adoption. A random sample was not selected because the study only counted the participation of adolescents authorized by their families, possibly leading to a cooperation bias. Lastly, the third limitation is that the adolescents were the only informants and were only assessed through a self-report inventory. Data would be enriched by both an interview to better understand the attachment relationship that adolescent adoptees establish with their adoptive parents and parental participation, as the adopted adolescents' perception of attachment may be biased by idealization. Moreover, for a better understanding of the attachment relationship in these three groups of adolescents, it would be worth including other significant attachment figures.

Despite its limitations, the results of this study aim to fill a gap in terms of research with adopted adolescents because it confronts the results of adopted adolescents with those of the groups with whom they share present experiences (adolescents who had never been separated from their birth family) and past experiences (institutionalized adolescents). Nevertheless, future research is necessary as there is a great intersubject variability in the results obtained by adopted adolescents, which highlights the need to identify the variables within the adoptive family that are involved in recovery. Studies with a qualitative approach and multiple informants are needed in order to further explore the attachment relationship and take into consideration the different perspectives of the quality of attachment. Nevertheless, the findings of this study point to the need for protection practices allowing for victimized children and adolescents to grow in protective adoptive families who are engaged in promoting healthy and happy environments and capable of providing these children with secure attachments. Hence, future policies are needed in Portugal to reduce time in RC, encourage adoption as early as possible when returning home is no longer an option, and promote stable foster care when adoption is not viable.

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CONFLICT OF INTEREST

The authors declare that they have no conflict of interest.

ETHICAL APPROVAL

This paper does not contain any studies with human participants or animals performed by any of the authors.

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