The Effects of Separation from Parents on Children

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Abstract

More than a million children live separately from their parents. This paper reviews and consolidates the empirical research regarding the effects on children of separation from their parents. The reasons for separation include parental maltreatment, adoption, divorce, military deployment, parental absence for work, illegal immigration, parental incarceration, and Indigenous status. The effects are not specific to type of separation and include elevated rates of neurological changes from psychological trauma, early sexual maturity, physical and sexual abuse, neglect, poor academic performance, poor peer relations, psychosomatic symptoms, psychiatric disorder, and internalizing and externalizing behavior problems such as depression, anxiety, delinquency, self-harm, substance abuse, and inappropriate sexual behavior. Further, there were indications that separation in one generation led to intergenerational cycles of family separation. The research indicated that children are most vulnerable from 9 months to 9 years of age. Particularly risky conditions included separation during the preschool years, separation without warning to the child, concurrent change of residence, and care by strangers. In all cases, professionals should understand that separating children from their parents causes severe and often irreversible psychological harm. These risks must be weighed against the advantages associated with separation on a case-by-case basis. The long term emotional and developmental costs of separation should be added explicitly to the factors to be considered before courts make placement decisions. Specific suggestions for changes in law and clinical practice are offered. The people who can implement these recommendations to reduce children’s suffering from separation are legislators, policy makers, social workers, mental health professionals, attorneys, and members of the judiciary.
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Concern for Separated Children

Every year thousands of children are separated from their parents, by both government policy and parental choices. The outcomes of these separations include interpersonal dysfunction, psychiatric disorder, and high rates of incarceration. In this review, we ask how many children are separated from their parents, the reasons for separation, and the effects of separation. Possibly the most striking finding of our review is that separation has largely been overlooked as a serious threat to children’s well-being. We conclude with recommendations to reduce the need for separation and its negative consequences when separation is unavoidable. We seek to find a way to use professionals’ skills and society’s resources to bring greater security and happiness, even joy, to children’s lives and those of their parents. Separation cannot do that, but there are alternatives that can.

The field is broad, and we do not attempt to be exhaustive. Instead, we sought sufficient depth to provide courts and policy makers with an evidence base for making decisions regarding child residence, family supports, and treatment when that is necessary. We note that, from adults’ perspectives, separation that is accompanied by placement with a safe alternate caregiver is not deemed threatening whereas, from children’s perspectives, loss of their known attachment figure is perceived as being the absence of protection and, therefore, the maximum threat. Being taken by strangers to live with strangers is, from a child’s perspective, not different from kidnapping. This difference in perspectives has led, we believe, to too little attention by adults to the effects on children of separation from their parents.

We reviewed the literature for eight reasons for separation; at the end of each, we provide a summary of that literature together with mitigating circumstances, unanswered questions, and
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steps that could be taken to reduce the negative effects on children. We identify child age and number of separations as having effects on children regardless of the reason for separation. In the concluding discussion, we focus on the emotional experience of separation and actions that can be taken by clinicians, attorneys, courts, and policymakers to better protect children from the harmful effects of separation from their parents.

Children’s Symptoms of Distress are Consistent Across all Types of Separation from Parents

The negative effects of separation on children’s development are substantial and this has been known for a long time (Freud & Burlingham, 1943; Bowlby, 1951, 1973; Rutter, 1971; Spitz, 1945). Notably, these outcomes are the same that result from child maltreatment, parental mental illness, traumatizing events, etc. That is, children display distress in several familiar ways that do not link stressors and signs of distress to specific eliciting conditions. The outcomes include poor mental and behavioral health as indicated by internalizing symptoms (e.g., depression, anxiety, withdrawal), externalizing behaviors (e.g., physical aggression, relational aggression, defiance, theft, and vandalism), and social and cognitive difficulties resulting in poor self-control, difficult peer relations, and poor school performance (Makariev & Shaver, 2010). Separation from parents is also significantly related to symptoms of posttraumatic stress disorder (PTSD) and poor psychological quality of life as well as to later bi-polar disorder and schizophrenia (Paksarian et al., 2015) – even after accounting for prior level of trauma exposure (Miller et al., 2018; Rojas-Flores et al., 2017). Separation from fathers is related to later violent offending (Mok et al., 2018).

How Many Children are Separated from their Parents?

In 2018 almost 2000 children were separated from their parents in a six-week period by immigration authorities in the United States, causing a public uproar (Kopan, 2018). That same
year, an estimated 263,000 U.S. children were separated from their parents and placed in foster care (U.S. Department of Health and Human Services, 2021), with similar placement numbers in 2019 and 2020 (AFCARS, 2021). No uproar followed, indicating that people recognize how terrible child-parent separation is, but have come to accept it as necessary for large numbers of children. Each year, about 10% of separated children were returned home within 30 days (Sankaran & Church, 2016), suggesting that these separations were unnecessary.

Canada does not report national rates of foster care but is stated to have higher rates of foster care than any western country except the United Kingdom: U.S. rate .69% versus an estimated .92% for Canada (Trocmé et al., 2005). The estimate for Manitoba, with a high Indigenous First Nations population, was 7.5% by seven years of age (Brownell & das McMurry, 2016). Among western nations, the United Kingdom has the highest percentage of children in out-of-home placement, with four concerning processes: (1) the number of families being investigated is rising, (2) the number of children in out-of-home care is rising, (3) the number of children being returned to parents is dropping, and (4) the number of adoptions is dropping (UK Department of Education, 2017). Since 2001, between 1 and 2 million children have been separated from their military deployed parents in the United States (Lester et al., 2010; Nguyen et al., 2014; Siegel & Davis, 2013). These numbers do not include children separated from one or both parents by divorce. In economically less advantaged, non-western countries, large numbers of children are separated from their parents when parents travel to distant regions or countries for employment. For example, in a nationally representative sample of 117,573 Chinese children, 30.1% had been ‘left behind’ by parents moving to the cities for work (Tong et al., 2019).

Internationally, institutional care for abandoned or orphaned children is common. Using a variety
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of methods, Desmond et al. (2020) estimated that in 2015 between 3.2 million and 9.4 million children were separated from parents and placed in institutions.

In sum, more than a million children are at risk of these detrimental outcomes of separation in western, English-speaking nations alone, with minority\(^1\) children and children from non-western countries being at higher risk of separation and detrimental effects. Crucially, medical, mental health, and child protection professionals routinely assist in separating children from their parents. Any condition that puts millions of children at developmental risk should receive attention, especially when endorsed and implemented by public authorities.

**Method**

Because our goal was to identify child outcomes across a range of causes of separation, we relied heavily upon secondary sources such as meta-analyses, reviews and policy statements released by major professional associations including the American Academy of Child and Adolescent Psychiatry (Miranda & Legha, 2019), American Academy of Pediatrics (2017; Linton et al., 2017), American Orthopsychiatric Association (Dozier et al, 2014), Doctors Without Borders/Médecins Sans Frontières (2018), American Psychiatric Association (2018), American Nurses Association (2018), National Association of Social Workers (2018); Society for Community Research and Action Division 27 of the American Psychological Association (2016), Society for Research in Child Development (2018), and the Harvard Kennedy School: Shorenstein Center on Media, Politics, and Social Policy (Ordway, 2018). These policy statements cited published research that we accessed and included in this paper. We also ran searches of databases of published research by combining keywords such as separation, child development, mental health, and education, with other key words such as foster care, adoption,

\(^1\) We use *minority* to describe children who are in an ethnic, racial, gender, religious, or cultural minority for the country in which they reside.
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parental divorce, deployed parents, left-behind children, undocumented immigrants, incarcerated parents, and Indigenous children. With the exception of a few classic papers, we constrained our review to papers published in the 2000s.

It is important to note that formal reviews and meta-analyses of these topics often eliminated most studies for methodological inadequacies, e.g., Boyle, 2015; Brown et al., 2017; this suggests the relatively poor methodological quality of the full body of studies. In addition, we consulted national statistics for English-speaking countries to assess the extent of the problem as well as resources tied to particular groups (e.g., racial and ethnic minorities). Because most of the work was in English and referred to English-speaking cultures of the US, UK, Canada, and Australia, we asked 16 knowledgeable international experts (from 11 countries \(^2\)) in each subarea and several academic disciplines (occupational therapy, nursing, psychiatry, psychology, social work) for the research of which they were aware. Our goal was not to be exhaustive in the non-English literature but rather to be sure that our conclusions were not inconsistent with other cultures'. Although this is not the same as a systematic review or meta-analysis, our narrative review does provide a broad overview of the outcomes to children; such an overview can underlie both policy and individual case decisions.

We did not include separation that occurred within a single day (such as daycare or going to school). We also excluded such normative events as sleeping over at a friend’s home, spending the weekend with grandparents, or going to camp. Neither did we include loss of a parent by death, although that has very substantial negative effects (e.g., Finkelstein, 1988; Kaplow et al., 2010).

The studies reviewed ranged from small, focused studies with fewer than 50 participants to large population studies of more than a half million. The small studies usually offered detailed

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\(^2\) Australia, Austria, China, Finland, Germany, Ireland, Italy, Mexico, Norway, Russis, and South Africa.
information but had limited evidence of generalizability whereas the large population studies offered only basic information with high generalizability. We sought congruence between these two sorts of information. Because many different ways of assessing the effects of separation on children were used in the cited studies, it is not possible to compare empirically one type of separation to another. Altogether we reference 242 citations (192 individual papers, books, or studies, 10 meta-analyses, 25 systematic or narrative reviews, and 15 policy documents).

Results

We address the research about eight types of separation, grouped in three clusters: (1) separation under adverse home conditions (foster care, adoption, parental divorce), (2) separation based on adult employment (military deployment, left behind children); and (3) involuntary separation (undocumented immigrants, parental incarceration, and Indigenous ethnic status). For each of the eight types of separation, we have a brief concluding section that (a) summarizes our findings, (b) identifies mitigating conditions, and states some unanswered questions; these sections are followed by policy implications drawn by us from the reviewed literature. Although it is beyond the scope of this paper to review the literature on policy changes and demonstration programs, we note that many of our recommendations are consistent with those made earlier by others.

Separation under Adverse Home Conditions

Child maltreatment can result in a child being placed in foster care whereas parental divorce usually means that a child will be separated from each parent some of the time. In cases of child maltreatment, the parent-child relationship was troubled, to the point of being dangerous for the child. The specialized literature on institutionalization was not reviewed because (1) institutionalized children are sometimes separated at birth (therefore not experiencing separation)
and (2) the literature has been reviewed thoroughly (Rutter, 1971; Dozier, et al., 2014) leading to the unambiguous conclusion that institutionalization is harmful to young children. In cases of divorce, especially embattled divorces, it is probable that the parents’ relationship problems affected the children prior to the divorce. Notably, both child maltreatment and separation negatively impact brain growth and structure (Child Welfare Information Gateway, 2019^3). When the ill effects of separation are only evaluated after separation, it is not clear whether separation is better or worse than leaving the children in the troubled pre-separation household.

**Foster Care**

Foster care is predicated on the belief that foster parents will be able to provide safety and improve the development of fostered children in ways that their parents cannot. Our review seeks to support or refute that belief.

**The Development of Fostered Children.** Foster care is both a consequence of deleterious home conditions and a risk factor for increased poor physical, behavioral, and mental health. Further, multiple foster placements increase the negative effects on children dramatically (Rubin et al., 2007; Ryan & Testa, 2005). In a nationally representative study of nearly 100,000 non-institutionalized U.S. children aged 0-17 years, children in foster care were in poorer mental and behavioral health compared to children in every other family type and to children in low-income families, both prior to and after placement in care (Turney & Wildeman, 2016, 2017). Analyses of the 1987 Finnish Birth Cohort matched children first exposed to out of home placement at 2–6 years with controls. In young adulthood, those placed as children were compared to never-placed controls; the placed children had more mental health disorders and higher rates of violent and property offences (Côté et al., 2018). Placement in care was also

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^3 We chose this summative citation in preference to the many neurological studies that inform it to focus on the main behavioral thrust of this review regarding separation.
associated with poorer educational achievement, although maltreatment and other adversities were also contributing factors (MacLean et al., 2017; Schneider et al., 2009). A “natural experiment” in Illinois examined outcomes for children referred for a child protection investigation. The system randomly assigned cases to investigators. The researchers compared two groups of children “on the margins” for whom investigators could reasonably differ on placement decisions. Those who were placed in foster care later had more delinquency and emergency health care episodes (Doyle, 2013).

Font and Gershoff (2020a,b) reviewed several meta-analyses and large studies, finding that children entered care with developmental and behavioral problems that did not improve in foster care (Berger et al., 2009; Berger et al., 2015; Goemans et al., 2015; Horowitz et al, 2011; Maclean et al., 2018). Although the studies were quite heterogeneous, larger studies and studies with longer follow-up intervals found more negative effects. A few studies reported on sex differences or narrow age ranges. Bald et al. (2019) found that, for children removed before the age of 6 years, girls, but not boys, had better test scores and fewer grade repetitions. Lawrence et al. (2006) reported on a small ($N = 189$), prospective longitudinal study that controlled for child behavior problems and family demographics for a sample of children who entered foster care before the age of 9, and similarly maltreated children who remained at home, and compared both groups to children who received adequate care in similar low-resourced homes. The foster care group showed elevated internalizing compared to the other two groups, following release from foster care.

Meta-analyses often do not have the power to test moderators, such as age and pre-separation conditions (Goemans et al., 2015; Maclean et al., 2018). Grouping infants and preschoolers with school age children ignores important developmental vulnerabilities and leaves
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important within age group effects unaddressed. Similarly, we found no studies on the effects of separation from parents moderated by the initial adverse home context. Needless to say, the interaction of such factors with quality of foster care, subsequent placement changes, and visitation arrangements was not addressed.

The problem is one of imperfect prediction; is it better to remove many more children than necessary to prevent a small number of deaths or remove fewer children, thus reducing separation trauma, while risking some deaths? Even a single death can trigger a crisis involving professionals’ accountability and social policy. For example, the deaths of Arthur Labinjo-Hughes and Star Hobson at the hands of their parents brought a statement from the U.K. Secretary for Education calling for taking children into care when there was “any inkling of harm” (Zahawi, 2021). The issue is the tolerance for a few child deaths versus removal of many children who would have done equally well or better at home.

Despite professionals’ protective intentions, children often experience being separated from their parents as being kidnapped (Carr-Hopkins et al., 2017; Folman, 1998; Mitchell & Kuczynski, 2010; Mitchell, 2016); that too is harmful. This is especially true if the separation was carried out at school or in a nighttime visit by authorities and without preparation of the children (Mitchell & Kuczynski, 2010; Trivedi, 2019). Further, although the reason for placement is to protect children from maltreatment, some children are maltreated by their foster carers, including being sexually abused (U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau; 2021). Children have the lowest rate of sexual abuse when living with their parents, higher rates in foster care, and the highest in residential institutions (Euser et al., 2013). A third to almost half of older foster children became homeless when transitioning out of foster
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care; this was associated with previous running away, placement instability, being male, having a history of physical abuse, and poor behavioral and mental health (Dworsky et al., 2013). Even when children returned home, their awareness of the possibility of being taken away from their parents can never be reversed, leaving permanent psychological harm. In sum, finding the line between the risk of leaving children at home and uncertain risk of foster care is very complex and never definitive, even on a case-by-case basis.

In a commentary in the American Journal of Public Health, Raz and Sankaran (2019) highlighted widespread revulsion regarding family separation at the U.S. border and called for efforts “to ensure that courts and agencies make critical removal decisions with full knowledge about the impact of child removal on the development of children…” and acknowledge “…the harm of family separation of any kind…. for any reason… such as immigration status, substance use disorder, or lack of resources such as housing.” (p 1530). They urged that foster care become “a tool of last resort” (p 1530).

In contrast, only one review paper concluded that foster care had neutral effects (Font & Gershoff, 2020b). “…[I]t is not a ringing endorsement of foster care that studies largely find no impact… but on average foster care meets the minimal standard of ‘do no harm’ ” (p 47). However, Font and Gershoff also cautioned against studying foster care as a single, binary construct because it does not allow for consideration of variation in effects among children. We would add that a focus on foster care as the primary variable ignores the suffering of children separated from their parents. In the next sections we discuss important moderators affecting well-being of children in foster care.

Placement Transitions and the Well-being of Foster Children. Transitions into and out of care are often abrupt (as experienced by children) and sometimes unnecessarily
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frightening, for example, when occurring at school or at night. The effects of separation are
greater when children both lose their family and must live in a new place with strangers
(McLeigh, 2010). More placement changes in foster care are associated with more mental health
problems (Barth et al., 2007; Rubin et al., 2007; Ryan & Testa, 2005) and with a higher
likelihood of re-maltreatment following reunification (Connell et al., 2009). Both reunification
and adoption by strangers involve yet another separation, this time from the foster carer. In the
case of reunification, children may both blame the parent for the separations and also fear future
rejection, thus behaving in ways the parents perceive as rejecting them, which can jeopardize
reunification. In addition, reunified children are no longer the children who were placed in care;
instead, they have developed in another adult’s care and are now more or less unfamiliar to their
biological parent. Finally, the parent too has experienced a separation; this has not been the
subject of research, but it might lead to parental psychological trauma and anxiety about future
loss of the child. Both could interfere with the reunification process (Gogarty, 2002; Herbert et
al., 2013; Lynes, & Sitoe, 2019; Newquist et al., 2020; Williams, 2017). The traumatic effect of
separation from children on parents is evidenced by the finding that women who have had a child
taken into care have higher mortality rates compared with their unseparated biological sisters
(Wall-Wieler et al. 2018). These impediments to successful reunification, along with the
negative findings in the follow-up literature (Pecora et al., 2005), highlight the difficulty of
making decisions about foster care.

Parental Contact. Contact itself is complex, with not all foster children benefitting from
contact with their parents (Haight et al., 2003). A systematic review of 11 qualitative U.K.
studies on the effects of contact with birth families indicated that the effects on attachment and
identity were positive when non-maltreating birth families had a collaborative relationship with
foster or adoptive parents. Fostered children who had frequent contact with maltreating parents had worse behavioral and mental health outcomes than other children (Boyle, 2015). Boyle concluded that decisions about contact should be made on an individual basis. A separate review of 15 studies, with sample sizes ranging from 31 children to 41,189 children, showed that children adopted from foster care (i.e., separated from foster families) had more behavioral and mental health problems than non-adopted comparison groups (a) remaining in care, (b) from the general population, or (c) compared to age-adjusted norms; further their cognitive and academic outcomes were worse than for the general population, but better than for children remaining in care (Brown et al., 2017). A small study included assessment of foster parents’ sensitivity to their fostered children and found that frequent contact with biological parents and low foster parent sensitivity contributed separately to child behavioral and mental health problems (Poitras et al., 2021).

**Kinship Care.** A large meta-analysis ($N = 666,615$) compared children in regular foster care and kinship care, finding that children in kinship care experienced fewer behavioral and mental health problems and less placement disruption than children placed in non-kinship foster care (Winokur et al., 2009; 2014). Although the authors note selection bias and design flaws in the reviewed studies, the advantages of such kinship care warrant further study. Another small meta-analysis found that children in kinship care were less often referred for further protective services, but also less often either reunified with their parents or adopted outside the family (Bell & Romano, 2017); there were mixed findings regarding child safety. The greatest advantage of kinship care seemed to be stability of placement, with the disadvantage being lower probability of reunification with biological parents. Lastly, children in non-kinship foster care were more likely to utilize mental health services.
In conclusion, even one separation put children at risk for additional separations and multiple separations created the greatest risk of physical and psychosocial problems (Barth et al., 2007; Connell et al., 2009; Rubin et al., 2007). Because we are better at treating minor conditions than long-term, complex conditions, multiple separations should be avoided.

**Protection and Reunification.** On the positive side, lives are sometimes saved, and injuries or severe developmental delay prevented by foster placement (Proctor et al., 2010; Whittle et al., 2013). That, of course, is the reason for foster placement. In addition, some infants placed in foster care became more securely attached (to the foster parent, not to their biological parent); this was associated with the foster mother having a secure representation regarding her own childhood attachments (Dozier et al., 2001). There is some limited evidence for a similar pattern with school-aged, adopted children (Hodges et al., 2003). A meta-analysis of observational attachment assessments found that children who were adopted before 12 months of age were as securely attached as their non-adopted peers, whereas children adopted after their first birthday showed less attachment security than non-adopted children, with rates of security comparable to foster children (van den Dries et al., 2009). A synthesis of decades of research found that insecure attachment is close to universal among maltreated children (Cyr et al., 2010) with disruption of insecure attachment being profoundly distressing (Folman, 1998; Mitchell, 2016).

The primary goal of foster care, aside from immediate protection from parentally inflicted danger, is reunification with biological parents. Reunification, however, is relatively uncommon. In 2020, only 48% of U.S. children discharged from foster care were reunified with parents or other primary caretaker (AFCARS, 2021) and, among those, roughly a third were subsequently placed in care a second time (Frame et al., 2000; Wulczyn, 2004). In fact, the
change of caregiver and domicile that accompany reunification often has negative consequences for children (Lau et al., 2003). At a minimum, reunification constitutes separation from foster parents. Taussig and colleagues (2001) found negative behavioral and mental health outcomes associated with reunification for many, but not all, of the variables measured. Whether or not these outcomes resulted from the negative impact of another separation, from poor conditions in the biological home, limited support during reunification, or all of these cannot be determined from these studies.

Foster children whose own parents had been fostered were less likely to achieve permanency through reunification than foster children whose parents had never been in foster care (Marshall et al., 2011). This suggests that foster care may have intergenerational impact, and that separation in childhood might affect adults’ ability to form stable, nurturing relationships in adulthood. For Black children, the disproportionate use of foster care, following the historic family breakup of slavery, was one strand of systemic government policy that weakened Black family structure across generations (Roberts, 2022).

A particularly important observation was made by Chung and colleagues (2021) who concluded that there are many different pathways to foster care and reunification and that fostered children do not all respond similarly to the same treatment options. Similarly, it was deemed particularly important that interventions for reunification target the brain maturation of different aged foster children (Chinitz et al., 2017), but the science in this area is sparse. Fisher (2015) noted that longitudinal research on foster children is limited. He cited fewer than 20 studies of intervention for fostered children from birth to adolescence; most demonstrated the potential for improved behavioral trajectories and plasticity in the neurobiological systems affected by stress.
Conclusions, Mitigating Conditions, and Unanswered Questions regarding Foster Care. None of the reviews or studies that we found indicated that fostered children developed better than comparable maltreated children who remained with their parents. To the contrary, almost all studies indicated that fostered children suffered more undesirable outcomes. Of course, that does not eliminate the few children who are injured or killed by their parents, nor those harmed by foster parents. Rather than questioning the advisability of separation per se, the professional response has been to focus on procedures to identify the few children at very serious risk, not on preventing separation and its concomitant threats for the many. In fact, separation has not been identified by authorities as a threat to children’s well-being and is not considered in court decision-making processes in the United Kingdom, the United States, and The Netherlands, respectively (Biehal et al., 2015; Graham et al., 2015; Minkhorst et al., 2014). We, along with many attachment researchers, e.g., Kobak & Madsen (2009), think it should be.

Contact with the biological parent is intended to support the child-parent attachment, but its effects, positive or negative, and the conditions around contact vary and need further study. The negative effects of separation were amplified with each successive placement. The quality of parent-child relationships after reunification is largely not known, including the role played by any continuing anxiety regarding future separation for both children and parents.

Children remaining in or leaving foster care have been treated as a homogeneous group. At a minimum, it would be helpful to know children’s medical and developmental status prior to entry to care, the severity of maltreatment that resulted in placement, and, separately, whether these selection factors, in addition to race, ethnicity, gender, and age, affect case disposition (Crittenden & Claussen, 1993). For example, some children reporting bruises (without medical injury) or whose social workers make removal decisions for neglect based on class, race, or
poverty (Trivedi, 2019) have been summarily removed for years without any long-term plan whereas other children, in the same country, have been left with their biological families despite multiple instances of hospital diagnosed injury until they died (Haringey Local Safeguarding Children Board, 2010; Laming, 2003; Murray, 2021). In the former cases, removal probably should not have occurred; in the latter cases, protective action should have been taken much sooner. Standardized assessment of severity of maltreatment might clarify the need for foster care. Simple scales of severity of events, based on use of medical services, might contribute to a clearer understanding of how maltreatment affects children (Claussen & Crittenden, 1991); a more extensive severity scale is offered by English et al. (2002).

Even with better predictive tools, perfect prediction of risk is not possible. Thus, the question becomes how one can compare the ‘apples’ of infrequent deaths to the ‘oranges’ of universal distress and developmental disruption from foster care. We hope that more attention will be given to the costs to children of separation from their parents.

**Recommendations for Foster Care Practice.** Child placement is a complex, systemic condition that is necessarily distorted if simplified and reduced to dichotomous choices. Many of the problems seem tied to four conditions that could be changed: (1) misunderstanding of children’s attachment and its relation to psychological trauma, (2) a dichotomous either/or approach to solutions, (3) the adversarial construction of all parts of the process, and (4) a focus on individuals rather than relationships and family systems. Our recommendations are an attempt to re-envision these complexities in ways that can help children and can be implemented under real world conditions, presuming that everyone seeks the well-being of the children. Thus, instead of trying to decide which family can best raise a child, the goal could be finding a way for all people who love a child to contribute to his or her well-being.
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**Training in Attachment and Psychological Trauma.** Child protection personnel (including attorneys, guardians ad litem, and family court judges) should have 2-3 hours training on attachment. The curriculum should include learning when attachment develops, its enduring quality, its hierarchy when there are changes of protective figure (i.e., biological, foster, kinship, and adoptive parents), its protective function in each child’s specific circumstances, and individual differences in attachment. Child protection personnel should know that some “problem” behaviors, particularly inhibition, avoidance, and defiance, are indicators of being attached (Crittenden, 2016).

Assessment of potential foster and adoptive parents should include exploration of their own experience with separation and loss and its effects on them as adults. The results should influence whether a person is accepted for fostering, with provision of specialized support services if a child is placed with a parent who has active traumas or losses. Particular attention should be given to differentiating the effects of separation from children’s presumed trauma at seeing their parents during contact/visitation.

While addressing training, we recommend that funds be shifted from training foster care providers to training a more diverse child welfare workforce, including men, so that families are more often be evaluated by professionals with whom they can connect on the basis of shared identity.

The long-term emotional and developmental costs to children of separation from any parent figure (biological, foster, kinship, or adoptive) should be added explicitly to the factors to be considered when courts make placement decisions.

**Increasing Both/And Solutions.** Many of the problems in foster care and adoption are tied to a dichotomous ‘either/or’ model in which children are placed exclusively in one home or
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the other. This puts the potential parents at odds with each other and forces the children into the
dangerous middle ground of needing to appease opposing parents. Our recommendations are
meant to encourage a fluid range of shared parenting, for the benefit of both children and parents.
To prevent foster placement and consequent separation, child needs that are neglected should be
provided by service personnel (e.g., housekeepers, money managers, child care, educational
stimulation, etc.) when the parents cannot manage to meet the need; this should be done even if
the parents do not seem deserving – because the children are deserving and prevention of
traumatic separation is a higher priority than teaching parents skills. A greater variety of
parenting services, flexibly offered by someone who the recipients of service respect and trust,
are needed to fill the gap between group instruction such as parent education (for the worried
well) and individual psychotherapy (for parents with personal traumas). Individualized home
visiting services are particularly effective (Roben & Costello, 2022). Having such services or
creating bespoke services could prevent separation of children from their parents (e.g., Oxford et
al., 2016; Spieker et al., 2014) and the ensuing separation trauma for children and their parents.

Foster parents who seek to support vulnerable families should be preferred over parents
who seek to raise other parents’ children or replace losses that occurred in their own childhoods.
The need for children to be separated more than once should be prevented whenever possible by
identifying different types of foster parents (short-term, long-term, permanent multi-problem,
multi-child placements) and selecting the best-fitting placement at the outset. This requires
careful assessment before the initial placement (not after problems crop up). If reunification is
probable, foster parents who want to foster a family should be preferred.
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Children should never be placed solely for assessment or foster parent respite; doing so adds new trauma on top of existing problems, thus harming the child, and confounding the assessment.

The conflict around contact could be reduced by considering all parties’ needs (foster and biological parents, children, and professionals). Mutual acceptance among the biological and foster parents should be promoted by their having shared contact and sharing ideas about themselves and the children. It is especially important that foster and adoptive parents hear the history of troubled parents because compassion is best founded on information. The model could be that of an extended family with troubled family members. Both kinship care and open adoption (see next section) provide tested models for potentially competing parents to work together to improve outcomes for children.

Finally, but possibly most important of our recommendations, family strengths should be identified and enumerated explicitly. This is especially true for minority children whose families are often evaluated negatively by majority professionals. Strengths will form the base upon which to build a family-specific support plan.

Prioritizing Non-Adversarial Approaches. Teamwork needs to replace adversarial approaches. One example is the UK’s use of jointly instructed assessors (Justice on GOV.UK, 2017). Such unbiased information and consensus planning could reduce reliance on biased adversarial processes.

Child protection records should indicate the source of information about children’s behavior so that video-recorded behavior, professionally observed behavior, and behavior reported by foster parents can be evaluated separately. This can reduce discrepancies between apparently conflicting observations.
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Whenever possible, foster parents should support the biological parents, thus fostering the family as opposed to implicitly competing with the biological parents to raise their children.

Children’s transitions between households should be made gradually and, whenever possible, without termination of relationships. This means that, when placement is needed, but the immediate situation is not an eminent crisis, the biological and foster families should visit each other, have overnights, then extended overnights until the children are living with the foster parents and visiting their biological parents. Children should take their toys, blankets, and clothing to the foster home. Both sets of parents should be seen by the children in both homes. The same process should be undertaken in reverse for reunification. The outcome should be that the child is loved by more people and loses access to no one.

Emphasizing Relationships and Interpersonal Systems. When family needs are first being considered, the entire family should be assessed; too often non-problematic individuals are over-looked even when they could clarify the nature of the problem and contribute to successful solutions to the problem.

Biological parents should receive counseling around their own trauma of being separated from their children. Foster parents might need this as well if reunification is planned or if they have had significant separations in their own history.

Children’s perspectives on placement and placement changes should be sought. Professionals and parents should be prepared for children to express intense, conflicting, and changing perspectives. Children should be helped to articulate their feelings, including especially mixed feelings, in readily understood ways, such as being enacted, spoken by toy figures, or illustrated with drawings. Seeking and actively valuing children’s perspectives does not imply that these are given priority over the broader perspective of adults. But children’s perspectives
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should be acknowledged and respected and children should be given reasons for decisions in terms that they can understand developmentally.

In reunification, biological parents could be assisted to prepare for the changes in their children by having the foster and biological families discuss the changes, especially those around separation and reunion. Focusing on actual time spent together with the child can promote biological parents’ ‘catching up’.

Further, biological parents should be helped to predict problems (such as children’s avoidance and rejection, see ‘attachment’ above). Engaging the foster parents in both discussion and travel between homes can help to stabilize this inherently disruptive process.

The separation implied by reunification (or adoption) can be reduced if children move back and forth between their homes and the parents do as well, with both sets of parents (and not service assistants) accompanying children from one home to the other. Children’s belongings should be left in both homes and talked about when in the other home. This process should continue for as long as the child maintains an emotional connection to the less frequently seen parents. The families, in other words, become like members of an extended family.

Whenever children have been separated from family members or culture (including racial, language, and national groups), effort should be made to include the actual lost parent, siblings, and culture/racial group; if that is not possible, their importance should be discussed, and substitutes should be sought. Especially for children from racial or cultural minorities, additional parent figures who share their culture should be sought and supported financially. Baby boomers, who have raised their own children, can become parent/grandparent figures and single younger adults without children of their own can become ‘aunties’ and ‘uncles’. The focus would be on expanding families for children, not separating them from their families.
Future Research. The review of the literature suggests several topics about which substitute parents’ stated perspectives are treated as truth when there might be underlying dispute, other perspectives, or even reasons to protect children from the caregiving adults’ unspoken biases. These should become the topics of future research and should be given priority by relevant funding sources. Specifically, foster parents’ sensitivity and nurturance to fostered children, the accuracy of their reports on children and their biological parents, and their own history of personal loss and trauma need sound research in order to inform decision-making and tailor supports to fostering families. Similar research on the experiences and biases of professionals might be warranted.

Adoption

Adoption seeks to place children in homes that will foster their development when, for whatever reason, their biological parents cannot do so. Again, the issue is whether adoption achieves that goal.

Outcomes When Children are Adopted. Many fostered children are eventually adopted; a few children are adopted directly after birth or from institutions. A study using a large state’s complete foster care entry cohort of all ages (N = 26,113) in a single fiscal year reported that 28.9% of fostered children were adopted within 8 years, and another 19.0% achieved guardianship with family members (Sattler & Font, 2021); other states and countries may have different ratios. Age of adoption affects children’s overall development and stability of placement, with adoptions of neonates having the fewest problems and adoption breakdowns (Sattler & Font, 2021). Adopted children with unstable histories prior to adoption had more behavioral and mental health problems than adopted children who had had one placement from birth or children who had never been in foster care (Lewis et al., 2007). More severe early
maltreatment, spending more than a year in care, and having two or more foster placements prior to adoption were all associated with poor outcomes (Neil et al., 2020). Adoptive parents’ reports of child distress about moving from the foster to adoptive homes was highly related to poorer outcomes, suggesting that badly managed transitions are particularly harmful (Mitchell & Kucinski, 2010; Selwyn et al., 2014a).

**Adoption Disruption.** Break-down of adoption is called adoption disruption. Sattler and Font (2021) found that over 2% of adoptive placements and 7% of guardianship placements in a Texas cohort were dissolved within 8 years. Two small U.S. studies found disruption rates of approximately 3% two to four years post adoption (Festinger, 2002; McDonald et al., 2001). The reasons were varied, but child behavior problems, mental health issues, and cognitive disability were all associated with higher rates of dissolution (Sattler & Font, 2021).

A U.K. study of approximately 50,000 adoptions found a 3.2% rate of disruption over a 12-year period, with most disruptions occurring when the adopted child reached puberty (Selwyn et al., 2014a). Children adopted after 4 years of age had a 13 times greater failure rate, had more prior placements, and waited longer for their adoption to be finalized than children adopted in the first 3 years of life. Multiple foster placements prior to adoption, older age at adoption, and previous trauma contributed to adoption failure in the United Kingdom (Meakings & Selwyn, 2016); these authors also pointed to poor and even harmful fostering experiences. Although a lengthy court process is known to be harmful and U.K. regulations promote faster decisions, decision times have not decreased. Unlike the United States where most adoptions (54%) involved foster parents who adopted their foster child (AFCARS 2021; Mica & Vosler, 1990), 85% of U.K. adoptions were from foster carers to strangers, thus involving an additional separation (Selwyn et al., 2014a). Even the different terms used (foster ‘parents’ versus foster
‘carers’) suggest that a less parental role is intended in the United Kingdom, making U.K. and U.S. studies difficult to compare.

Children’s Problems. The extent of adopted children’s distress in a U.K. study is shown by 3% having self-harmed, 46% of parents having concerns about children’s mental health, and about a third of children in disrupted adoptions showing inappropriate sexualized behavior (Selwyn, et al, 2014a). Adopted adolescents who left care early (< 15 years) were poor, vulnerable, and often groomed for abuse on the streets; they risked rape, sexual abuse, jail, and homelessness (Selwyn et al., 2014b). Adoptive parents tended to think that their children had problems because of prior experiences in their biological or foster homes (Kotch et al., 2008; Walsh & Krienert, 2007; Kernic et al., 2003). Conversely, adopted children said that they had not been listened to. Some did not want to be adopted, others thought they should have been removed sooner, and some wanted more contact with their biological parents.

Adoptive and Foster Parents’ Problems. Many adoptive parents felt anxiety before their children left home and depression after; a quarter reported major problems with their adopted children (Selwyn, et al.2014a,b). They thought their social workers, but not the children’s, were supportive. Adoptive fathers felt particularly unsupported and wanted male social workers. Most felt that professionals did not acknowledge emerging problems (especially at transition points), offered only a rigid menu of services, including repeatedly offering “the same Webster Stratton type parenting programs or anger management workshops” (Selwyn et al., 2014b, p. 16), and found no way to offer brief respite (a few hours), instead placing adopted children in respite foster care, even if only briefly. After raising problems, 27% of adoptive parents were themselves subject to child protection investigation. Many of the adoptive children in these troubled adoptions thought their adoptive parents had mental health problems. There is some
evidence to support this conclusion in Farnfield’s (2019) finding that roughly a third of prospective adoptive parents were ‘disorientated/confused’ regarding their reasons for adopting, based on their Adult Attachment Interviews.

One-third of foster carers were deemed by adoptive parents as unhelpful or obstructive while some foster carers wanted to adopt the child themselves or had prior losses (Selwyn et al., 2014b). Selwyn and her colleagues concluded that troubled adoptions should be more flexible, so that adopted children who reenter foster care for a time could return to their adoptive home if they wanted to. Nevertheless, it should be noted that the overwhelming majority of adoptions were not disrupted.

Seeking Lost Biological Parents. Some children who are separated at birth later perceive a loss that they cannot remember. These losses include loss of the biological parents (as in adoption), loss of access to the father (as in single mothers without access to the father), loss of siblings (if sibling groups are split up to facilitate adoption, see Cossar & Neil, 2013), and loss of ethnic culture (as in foreign adoptions or transracial adoptions). Although historically most adoptions were closed (meaning information about the adoption and the biological parents was not available), since the 1980’s adoptees have challenged that. Some seek information about the adoption and their medical status whereas most want to meet their biological parents (Fischer, 2002). This is especially true for transracial adoptees where the search is treated as seeking a missing part of self (Gordon et al., 2014). The search for biological parents was not associated with problems in the adoptees (Grotevant et al., 2011).

Open Adoption. Adopted children experience different degrees of contact with their biological parents, ranging from none to ‘open adoptions’ in which the biological and adoptive families have contact as the adopted child develops. Open adoption is meant to reduce the need
to hunt for biological parents; it also expands the support network for adopted children by including their biological parents and sometimes whole extended families. In a longitudinal study of adopted young people (14-21 years old) who were placed in the mid-1990s before 4 years of age, the most advantageous child outcomes were associated with open adoptions (Neil et al., 2013). The kin in open adoptions can include both the biological parents and other kin or close friends (Costa et al., 2021). This wide range of inclusion supported children well. Neil and colleagues (2015) concluded that children’s need for contact with their biological parents varies across the children’s development. Smith et al. (2020) reviewed 26 studies of open adoption, finding that 22 studies reported benefits (in fewer behavioral and mental health problems for children in open adoption) whereas eight reported risks (primarily risk of re-abuse or reactivation of past traumas). The favorable attitude of both the adoptive and kin families was crucial to the success of open adoption arrangements. In well-functioning open adoptions, adopted children experienced having two families as a natural advantage. The exact nature of the open relationship varied greatly; the authors recommended customizing each plan to the needs and competencies of the adoptive and biological families. As an aside, they pointed out that being in adversarial positions during court proceedings did not hinder open adoptions once the court decision was made. In a review of published studies, Grotevant and Lo (2017) point out that children’s well-being is better predicted by the quality of the relationship with the adoptive parents than by the amount or type of contact with the biological family.

**Conclusions, Mitigating Conditions, and Unanswered Questions Regarding Adoption.** Adoption was most beneficial to children when children were placed in early infancy, following a short decision-making process, and not moved thereafter. The more moves children experienced (including adoptive parents’ respite), the more likely the children were to
subsequently develop behavioral and mental health problems and to face adoption break-down. The highest rates of adoption failure were for children whose adoption began in the late preschool years, and for adoption of fostered children by strangers (which added another separation). Studies tended to focus on children’s problems or parents’ problems and rarely addressed child-parent relationships, thus implicitly blaming someone rather than focusing on repairing relationships. Children’s problems were assessed more thoroughly than adoptive parents’ problems which were often not assessed at all. Standardized interventions tended not to treat “each one of the parents and young people who were interviewed [as having] a story of personal tragedy and pain” (Selwyn et al., 2014b, p. 24-25). Children in troubled placements felt overlooked by professionals and learned not to trust professionals. Continuing contact with biological parents was generally beneficial to children, but its effects varied with age and depended upon the cooperation of the adoptive and biological families. Adoptive parents’ contribution to adoption failure, especially at puberty, is not well understood. We found no studies of decision-making in adoption that included the effects of separation of children from their biological and foster parents as a factor for consideration.

**Recommendations for Adoption Practice.** As with foster care, adoption is a complex condition. In our recommendations, we try to address that complexity.

To reduce the number of separations imposed upon a child, foster parents should be given priority when a child becomes available for adoption. Subsidies should be used when the foster parents love the child but cannot afford to adopt him or her.

Parents who adopt children over 4 years of age should be comfortable with sharing the child’s attachment with prior parents, especially with encouraging the child to maintain those relationships for as long as they are important to the child.
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A range of open adoption plans should be made available, including modifying existing plans to fit unique situations. The goal should be to retain access to family and reduce separations of biological and acquired family members.

**Future Research.** Adoptive parents’ history of trauma and possible mixed motivations for adopting, especially as they might change near children’s puberty, need study. The goal is to select foster and adoptive parents with greater awareness of their own limitations so as to address these in helpful and preventive ways.

**Divorce and Separation of Children from their Parents**

The effects of divorce and separation on children generally are negative, but that must be balanced against the harm of living in a conflicted family. The factors that affect the likelihood and extent of negative effects are complex, intermingled, and difficult to study in isolation. Moreover, there is no way to make causal conclusions because families cannot be randomly assigned to divorce and non-divorce groups.

**Effects of Divorce on Children’s Well-being.** A series of longitudinal studies from birth to 15 years of child age drawn from the large National Institute of Child Health and Human Development Study of Early Child Care and Youth Development (NICHD SECCYD) in the United States reported that children in divorced families did not develop as well as children in families with married parents. In the initial sample of 1364 mothers, 24 % were non-white children, 11 % were mothers without a high school education, and 14 % were single mothers.

**Family Structure.** In the NICHD SECCYD study, differences in children’s well-being were tied to family structure at birth and to family instability thereafter (Cavanagh & Huston, 2006). Infants born to married parents experienced the most advantageous outcomes, followed
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by those born to single mothers and lastly those born to cohabiting couples. The problems of children of divorced parents were linked to the reconfigured family’s lower emotional, social, and material resources. Specifically, divorce was associated with changes in children’s care arrangements, reduced family income, changes in residence, previously not employed mothers seeking employment, and increases in mothers’ depression; together these destabilized families and amplified children’s distress (Crosnoe et al., 2013).

Specific Negative Outcomes. A systematic review of 54 studies of a half million children from 1990-2018 confirmed the NICHD SECCYD findings (Auersperg et al., 2019). The review found negative effects on almost all aspects of behavioral and mental health with pooled odds ratios between 1.12-1.64; notably the effect sizes had decreased over almost three decades. Although children’s functioning prior to divorce was not reported, it is almost certain that some of these effects were present during the troubled marriage and therefore not fully attributable to separation from the parents (Bergström et al., 2019). Children of divorced parents married at earlier ages and divorced more often than children from stable families (Wolfinger, 2003), again suggesting the intergenerational impact of separation.

Conditions Affecting Outcomes. In the NICHD SECCYD study, the effects of divorce on behavioral and mental health problems were fewer when pre-divorce family income was higher. In addition, higher pre-divorce maternal sensitivity in the first 3 years of life functioned as a protective factor (Crosnoe et al., 2013). Other researchers reported that, after the divorce, children showed more problems if their home was less supportive and stimulating, their mother less sensitive and more depressed, or their family less economically advantaged (Nielsen, 2014; Weaver & Schofield, 2015). Better outcomes were more frequent when parents engaged in cooperative, mutually supportive, and consistent coparenting, and were flexible and
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accommodating regarding the other parent (McIntosh et al., 2010). Risk factors that increased negative outcomes included poor relationships between children and one or both parents, parental conflict, parental alienation, lower socio-economic status, greater geographic distance from children, larger sibling groups, and teenaged children (McIntosh et al., 2010). Similarly, high levels of parent conflict (Pruett et al., 2014; Woodward et al., 2004) or coercive control by one parent during marriage and/or after separation (Katz, 2016) were related to increased negative effects on children, particularly young children. A significant risk factor is when one parent consistently engaged in coercive control behavior that undermined the child’s comfort and safety with the other parent (Kelly, 2000; Maccoby & Mnookin, 1992).

Child age at the time of separation appeared to temper the effects, especially for infants and teenagers. A prospective study, using adolescents’ self-report, indicated that children whose parents had separated earlier reported more negative perceptions of parental nurturance and support during childhood, and poorer parent-child trust and communication; this strong linear effect was not changed by gender, socioeconomic status, and parental remarriage (Woodward et al., 2004). Children experiencing separation in early childhood were more often distressed at 14 years of age than children separated from their divorcing fathers in middle childhood; this effect was stronger for girls even after adjusting for pre-separation confounders (Culpin et al., 2013). These findings are made less clear by the possibility that the older children might have settled into an attachment strategy of inhibiting the display of distress and behaving in ways that pleased or benefitted parents (see Crittenden, 2016 for a discussion of attachment role-reversal in children).

About 15% of girls’ distress associated with father absence was explained by earlier age at menarche, which was also associated with father absence (Culpin et al., 2015); the effect for
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boys was less clear because their onset of puberty came after the outcome data were collected at age 14. Boys’ separation from fathers before age 7 years was related to precocious sexual maturity, and separation at any age was related to earlier appearance of secondary sexual characteristics (Sheppard & Sear, 2012).

**Effects of Differing Custody Arrangements on Children’s Well-being.** In a set of Scandinavian studies, children in shared custody arrangements (35-50% visitation) fared better than children who spent less than 35% of their time with one parent (Nielsen, 2014). The negative effects increased as children spent less time with one parent (Bergström et al., 2015). Children in shared physical custody had better behavioral, mental, and physical health, as well as better relationships with both parents than children in the custody of one parent (Nielsen, 2014), but the role of parental agreement on this outcome is not clear. The greatest frequency of negative effects was found in children who saw one parent rarely or not at all, with children in intact nuclear families developing best (Bergström et al., 2015; Bergström et al., 2019). A recent study of almost 13,000 Swedish three-year-olds found differences in the children’s well-being only for single parenting as compared to both divorced and intact families after adjusting for coparenting quality (Bergström et al., 2021). For shared parenting households, low coparenting quality (and not divorce status) was related to poor mental health outcomes for children.

Early residential shared custody in high conflict divorces seemed to deny younger children, who were still forming attachments, the ‘core relational infrastructure’ to support shared caregiving (McIntosh & Chisholm, 2008). Infants up to age 2 years reacted negatively to overnights, even as few as one per week, by showing irritability and vigilance; by 2 – 3 years, these symptoms were reduced. (McIntosh et al., 2010; McIntosh et al., 2013). For children under 3, a high-frequency overnight schedule is not preferred, particularly when children were
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anxiously attached to the non-primary parent or when there was disagreement about how to share care (Pruett et al., 2014). Adolescents preferred to live in one place (Bergström et al., 2015); younger children might also but most were too young to ask.

**Conclusions, Mitigating Conditions, and Unanswered Questions Regarding Divorce.** Although divorce has many negative effects on children, so does living in a home with embattled parents. Taken together, the reported studies indicate a decrease in risk from cohabiting parents to single parents to married parents. Post-divorce, one-parent homes had the most detrimental effect on children’s well-being whereas the quality of the parents’ relationship, regardless of their marital status, predicted children’s well-being. Because the studies were carried out in different cultures with different attitudes toward family structure, different ranges of socioeconomic risk, degrees of ethnic homogeneity, and post-divorce custody arrangements, the role of culture cannot be discerned.

Child age stood out as elevating risk when family break-up occurred in toddlerhood and the preschool years. Fewer negative effects occurred in early infancy or in the late school years and adolescence.

The effects of separation in divorce are mitigated when children are always with one or the other parent and know they are loved by both parents, except, of course, in cases of parental alienation. We did not review the voluminous literature on parental alienation.

**Recommendations for Managing Divorce.** The central problems seem tied to scarcity (of money, of spousal love and support, and of residential stability) and dichotomization rather than separation *per se*. We address each of these.

To reduce the financial limitations of divorce, provisions should be made for reduced legal costs when out-of-court solutions are pursued (with penalties for those who insist on an
adversarial process). To enable both parents to parent and contribute to the support of their children, supports in the form of housing subsidies, school lunches, medical insurance, etc. should be available in ways that benefit children of low-income divorced parents, and do not penalize either parent.

In addition, programs for co-parenting by divorced parents in co-living arrangements should be piloted. Mediation should include extensive work in problem resolution (not just the problems tied to divorce). Schools should provide group work for troubled children whose parents have broken up (including non-married couples who do not formally divorce, but who break up a joint home).

Because young children react negatively to changing where they sleep and adolescents object to having to change house, efforts should be made to keep children stable in their sleeping arrangements. This, of course, creates conflicts when former partners live far apart. When possible, the adults should move between households, leaving their children stable. This would maximize the effects of children’s attachment to their residence.

Courts should have an explicitly stated bias toward parents who are flexible, willing to engage cooperatively with the partner, and who engage in less aggressive, less threatening legal tactics. That is, the legal approaches that might be successful in criminal court would be known in advance to be counter-productive in family court.

Separation Based on Adult Employment

Military Deployment and Child Separation from Parents

Parents who serve in their country’s military might incur risks from separation on behalf of their children, both immediately around the deployment and also long after the family is reunited. Unlike research on other types of separation, research on the effects of military
deployment often offers population data, based on all military children, as opposed to samples of such children. This strength, however, is complicated by the complexity of separation when it results from deployment of a parent to a war zone. Specifically, these children experience not only separation from a parent, 90% of whom were fathers (Gorman et al., 2010), but also anxiety about the safety of the parent and the remaining parent’s anxiety about their partner, and sometimes relocation as well (Alfano et al., 2016; Gorman et al., 2010). Some deployed parents return home with physical or psychological injuries (Siegel & Davis, 2013); these contribute to long-term effects without being easily differentiated from the effects of separation per se. By reflecting multiple stressors, they might exaggerate the effects of separation.

**Effects of Military Deployment on Children.** Several large studies, reviews, and meta-analyses examined the effects of deployment on children’s well-being; only negative effects were reported, including more mental health, behavioral, and academic problems, health and mental health visits, and maltreatment. Studies compared children of deployed parents with military children of non-deployed parents or non-military children, or both. Most studies examined the possible moderating role of child age and gender on these outcomes (Alfano et al., 2016; Card et al., 2011; Cunitz et al., 2019; Gorman et al., 2010; Mansfield et al., 2011; Richardson et al., 2011; Trautmann et al., 2015; Turner et al., 2017). Effect sizes were small to moderate for comparisons with children of non-deployed military parents and civilian children, with greater differences when comparisons were with civilian children (Cunitz et al., 2019; Williamson et al., 2018).

**Moderators: Age, Gender, and Length of Deployment.** Among three-eight-year-olds, rates of psychiatric disorder following deployment were higher in older children, children of married parents, and male military parents (Gorman et al., 2010). Although a recent meta-
analysis found that adverse effects were not moderated by age (Cunitz et al., 2019), a large Department of Defense (2010) review concluded that infants’ and preschoolers’ (0-5 years) internalizing and externalizing behaviors were more affected by parental deployment than older children’s behavior; this was attributed to separation interrupting their developing attachments. Adolescent children of deployed military personnel reported more binge drinking, prescription drug abuse, marijuana use, and other substance use than their non-military counterparts (Acioc et al., 2013). Studying over 300,00 children aged 5-17 years with at least one active-duty parent, Mansfield et al. (2011) found that acute stress reaction/adjustment, depressive, and pediatric behavioral disorders increased with total months of parental deployment. Boys and girls showed similar patterns, with more diagnoses observed in older children within sex groups and in boys relative to girls within age groups. Sex of the deployed parent was not examined.

Reintegration Outcomes. Although the return of a deployed family member might be expected to yield only positive outcomes, in some cases parental PTSD and depression contributed to troubled parenting and increased symptomatology in children following reintegration (Creech, et al. 2014). One study of nearly 100,00 active-duty Air Force parents found no overall differences in child maltreatment rates during reintegration compared to pre-deployment, although rates for emotional abuse and mild maltreatment were lower during reintegration, whereas rates for severe maltreatment, including incidents involving alcohol use, were higher (Rabenhorst et al., 2015). Turner et al. (2017) emphasized that post-deployment maltreatment influenced child well-being as part of a cumulative pattern of stress exposures; this suggested that pre-existing family vulnerability augmented risk for negative effects of deployment on children.
Conclusions, Mitigating Conditions, and Unanswered Questions regarding Military Deployment. Studies of the effects of military deployment on children benefitted from the extensive data available on military families. These data indicate that separation due to parents’ deployment increased children’s anxiety and, sometimes, behavioral and mental health problems. The strongest studies relied on nationally representative samples or large Department of Defense surveys, but these were limited in the types of assessments that were employed. It is not clear whether the differences were tied to the assessed behavior, the source of the assessment (parental report, teacher observation, etc.), or the comparison group (military children of non-deployed parents or non-military children). It is even unclear how cross-age comparisons are made, especially because the salient symptoms differ from one age group to another.

Unlike other causes of child-parent separation, military deployment had several mitigating circumstances, including children remaining with the non-deployed parent, family income not being reduced by the separation, support from other military families for those with a deployed parent, and, perhaps most important of all, the opportunity to feel proud of one’s parent and of one’s family contribution to the nation.

Recommendations for Helping Children to Adapt to Separation from Military Parents. Overall, the military provides financial and residential advantages to military children whose parents are deployed. We recommend a few additions or modifications to support programs for such separated children. The most important is to re-interpret children’s signs of anxiety and depression as useful information about children’s understanding of their situation and then to use that information to inform adults’ responses. This contrasts with treating these as symptoms of psychiatric conditions.
Anxiety can be redefined as the child’s mind accurately treating separation as a threat – which it is. Three responses from parents and professionals can be helpful. First, confirm for the child that their mind is working to protect them – and they are not mentally ill although they almost certainly are uncomfortable. This would be a dramatic change for mental health professionals; making it will take time and positive feedback from seeing desirable change in children.

Second, once the state of threat has been identified, children should be helped to name the conditions that threaten them – without being given upbeat platitudes that contradict their feelings. Once a list of threatening conditions has been made, each condition should be explored in terms of safety factors. How far from danger is daddy? What special training and equipment does mommy have? So, you feel anxious, but daddy/mommy is probably safe? How would you know if that changed? This approach will help children to moderate their feelings by using facts tied to safety and danger. Put another way, it will help them to use their minds to adapt (rather than taking medication to numb the feelings that are the warning sign to the mind). Third, limiting access to repeats of the same news about the danger can help. Repetition tends to be interpreted as an increase in whatever is repeated (Tversky & Kahneman, 1974).

Therefore, children should have accurate news, but not repeated news.

Similarly, depression can be redefined as anxious children feeling helpless to protect themselves or their parents. Again, assessing the balance of danger to safety can help. In addition, however, children should be given meaningful actions to take to reduce the danger to themselves, increase their safety, or even just learn how to assess and live with uncertainty. The non-deployed parent is the best resource here.
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The most important recommendation in both cases is to give meaning to children’s feelings and to discuss those feelings openly, with respect for the children and without pathologizing the children. The discussions should teach children to both value their feelings as information and to moderate their feelings with non-emotional, factual, information.

Military children generally have internet access to their deployed parent on special occasions. This should be increased to regular access and access when a specific child feels especially anxious, with funding to support such access. Having the child initiate contact with their deployed parents gives the child agency; it should be available when children want it.

Finally, the residential parent should have access to services, such as parent groups, that help them to cope with their anxiety and depression – so as not to displace their feelings onto their children. Some parents might benefit from assessment of psychological strengths and vulnerabilities and attachment representations to promote treatment for them to reduce parental states being displaced onto the children.

Child Separation from Parents who Move for Work (Left Behind Children)

Parents in many low-income countries move to cities to obtain work, leaving their children in rural villages in the care of relatives. China has documented the effects of this more extensively than other countries. Almost a third of rural children in China are living away from their parents whom they see only intermittently (Tong et al., 2019). Almost half of infants who are born in Chinese immigrant communities in the United States are sent back to China to be cared for by their grandparents. Altogether, these separated children constitute 15% of the total population of China (Zhao et al., 2018).

Adverse outcomes were associated with parental migration beginning before the age of three and the cumulative proportion of a child’s life with an absent mother (Shi et al., 2021). For
most of these children, parental contact is brief, and separations are repeated. The effects include feelings of abandonment or rejection, behavioral and mental health problems, high rates of injury, substance use, and elevated risk for suicide (Zhao et al., 2018; Zhou et al., 2018; Zhou, R.Y. et al., 2020; Zhou, Y.M. et al., 2020). The problem of separation from caregivers is often exacerbated by change of domicile when children join their parents in the cities and by cultural disruption when Chinese children living with their parents outside of China are sent to China for some years, only to later return to their parents. When these changes occur in infancy or early childhood, they can have long-term negative effects (Shi et al., 2021; Zhao et al., 2018).

Conclusions, Mitigating Conditions, and Unanswered Questions Regarding Separation for Parental Work. The findings point to a negative effect of separation on most Chinese children who were left in the care of relatives when their parents moved to the cities for work. On the other hand, these children were in the care of relatives, their families experienced financial benefit, and they were able to feel pride in their parents. It is not yet known how such a large group of separated children, across two generations, will affect the ability of the children to establish stable families of their own in their adulthood.

Recommendations for ‘Left Behind Children’. We offer three primary recommendations. First, a public health campaign that informs communities of the problems children face when their parents migrate to cities out of economic necessity would be helpful. The purpose is to make caregivers (both migrating parents and children’s daily caregivers) aware of children’s ways of expressing their feelings and fears about separation so that caregivers can respond more sensitively. Second, separated children should have cell phones to easily call or text their parents. Predictable calls, such as a daily wake-up call or a goodnight call can help to create stability of access which, in turn, can reduce anxiety. Third, left behind children should
have access to both homes, physically when possible (so they can see where their parents go) and symbolically in all cases. Symbolically, the children would have access to photos of their parents in their rural household and would select photos and personal objects to give to their parents to take to the parents’ urban household.

Separation Not Based on Parenting Behavior

Children Separated from their Undocumented Parents

Wood (2018) reported that over 100 countries detain children for migration reasons, including refugees and families seeking asylum. This has elicited strong criticisms from pediatric, medical, and psychological professional associations (e.g., American Academy of Pediatrics, 2017; American Psychiatric Association, 2018; American Nurses Association, 2018; National Association of Social Workers, 2018; Doctors Without Borders/Médecins Sans Frontières, 2018).

The Effects of Separation on Immigrant Children. Studies in western countries show that detained immigrant children experience physical, behavioral, and mental health problems immediately upon or soon after detention (Baily, 2011; Barajas-Gonzalez et al., 2018; Dudley et al., 2012; Fazel & Stein, 2003; Kronick et al., 2015; Lorek et al, 2009; Mares & Jureidini, 2004). Even brief detention can cause psychological trauma and induce long-term mental health risks for children (e.g., Edyburn & Meek, 2021; Linton et al., 2017; Society for Community Research, 2016) and developmental delays and speech problems (Chaudry et al., 2010). Some symptoms, such as posttraumatic stress, remained long after reunification with parents (Kronick et al., 2015). These effects appeared to be tied specifically to separation during detention (Rojas-Flores et al., 2017). Indeed, whether or not an individual refugee experienced family separation
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accounted for additional variance in three mental health measures after controlling for 25 other types of trauma (Miller et al., 2018).

The separations caused during the Trump administration in the United States have now produced published research. MacLean et al. (2019) interviewed 425 mothers about their oldest children (4-17 years) who were detained with them in detention centers. Mothers reported their children had high rates of mental health problems (32%), with younger children (4-8 years) having significantly more difficulties on all scales. A subset of children (17%) had been previously separated from their mothers and transferred from other detention centers. They showed significantly more problems (49%) compared to children who had never been separated from their mothers before or during the immigration detention process (29%). MacLean et al. (2020) also reported that boys had more problems than girls, and that length of prior separations was not associated with the severity of children’s problem scores.

Exacerbating and Mitigating Conditions. The conditions associated with some separations, such as removing mothers while their child was sleeping, separating siblings, and providing no explanations (de la Pena et al., 2019), likely affected the severity of children’s trauma. The experiences of migrant children before, during, and after being separated at the border might all be traumatic, in different ways.

Arrest and Deportation of Undocumented Parents. Immigration enforcement in the United States also resulted in 1.8 million deportations between 2009 and 2013. Many deportees were fathers of U.S. citizen children, and as a result as many as 20% of Hispanic children are living without both parents in households headed by other relatives or friends; another 20% live with undocumented mothers with absent husbands (Amuedo-Durantes & Arenas-Arroyo, 2019). Children whose parents were detained or deported reported more behavioral and mental health
problems than citizen children of undocumented parents who were not deported (Zayas & Heffron, 2016).

In some communities, children observed immigration enforcement raids and the physical removal of relatives and neighbors. They were adversely affected even if their own parents were not involved (American Immigration Council, 2021; Brabeck et al., 2014; Chaudry et al., 2010). The threat of immigration enforcement in everyday life generates chronic anxiety in children in these communities (Barajas-Gonzalez et al., 2018).

Conclusions, Mitigating Conditions, and Unanswered Questions Regarding Separation of Children from their Undocumented Parents. The studies of separation of children from their undocumented parents indicate widespread harm to children from the separations, but the effect is confounded with placement in detention centers (as opposed to kin or foster homes), lack of Spanish-speaking personnel, and lack of plans for reunification. Separations result in additional financial hardship and psychological stress for the remaining parent. Placement with siblings and relatives probably reduced the impact of the separations, but that was not studied. Overall, these children have received less attention, including research, than other groups of separated children. Less is known in part because undocumented residents avoid contact with services and researchers out of fear of deportation.

Recommendations. The most important recommendation is not to separate children from their parents. Ironically, giving children born in the United States American citizenship, that is denied to their parents, to augments the frequency of separation. Laws that unintentionally produce this result should be reconsidered and modified to give all family members the same rights so as to reduce child-parent separations.

Parental Incarceration
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There is considerable overlap between incarceration and child protection such that many incarcerated adults were under child protection supervision when they were children, many of their separated children have been under child protection supervision, and adolescent children of incarcerated parents show more delinquent behavior than other children, leading in turn to their being held in youth detention or incarcerated in adult facilities (Berger et al., 2016). This progression disproportionately affects Black communities in the United States (Roberts, 2022).

The overlap between incarceration and child protection creates two problems. The first is disentangling the effects of pre-separation conditions from the effects of separation. A review of studies of parental incarceration found profound negative effects including poor physical, behavioral, and mental health, especially with maternal incarceration, but there is much less research on fathers (Wildeman et al., 2018). These effects were not, however, disentangled from pre-existing family conditions or subsequent child-parent problems associated with having an incarcerated parent.

The second problem is the systemic intergenerational process in which maltreatment and incarceration increase the probability of both in the next generation. Khan et al. (2018) studied four age groupings in a sample of adolescents and young adults (N = 11,884), comparing those whose parent was never incarcerated, incarcerated before the child was 8, incarcerated when the child was between 8 and 17, or incarcerated in the child’s young adulthood. Parental incarceration was related to children later testing positive for sexually transmitted diseases and HIV, with incarceration when children were younger than age 8 years having the greatest effect. This is consistent with Belsky et al.’s (2010) finding that stressed girls reach menarche sooner and commit more risky sexual behavior than less stressed girls, but here the finding is expanded to include precocious and risky sexual activity among boys who were separated at a young age.
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In most cases, the incarcerated parent was the father, highlighting again the contribution of father absence to children’s risk for maladaptation. (Khan et al., 2018; Wildeman et al., 2018).

**Moderators.** The higher the propensity of a parent to be incarcerated (due to anti-social dangerous behavior, etc.), the less children suffered the effects of separation from them. Some but not all studies indicated boys had more negative effects. White children had more negative consequences on some outcome variables than non-white children in the United States (Wildeman, 2018). Black and Hispanic children whose parents were incarcerated before they were 8 years old had higher risks for drug use and risky sexual behavior in adolescence and adulthood (Khan et al., 2018).

**Conclusions, Mitigating Conditions, and Unanswered Questions Regarding Parental Incarceration.** There are too few studies and too many correlated negative conditions to draw clear conclusions about causal pathways. Such pathways, however, might not even matter once the intergenerational cycle of broken relationships is in process. In addition, researchers point to social and political policies that reinforce the intergenerational process in families and make it difficult for individuals to break the cycle. This suggests, without there being empirical data, that the causal process operates beyond the individual level, beyond the family level, and within the sociopolitical ecology of American culture. We did not find evidence of mitigating conditions.

**Recommendations Regarding Parental Incarceration.** The United States has the highest incarceration rate in the world, and disproportionately imprisons young Black, American Indian, and Hispanic men, many of whom lacked the education, training, and community support needed to overcome systemic barriers even before a felony conviction made the task even harder. Like the problem of family separation for undocumented parents, the recommendations must be developed and executed at the national policy level. That is, the most effective ameliorative
strategies are the province of state and national legislators, not individual mental health practitioners or their practices.

*Separation of Children from Parents in Indigenous Populations*

Groups of Indigenous children have been systematically separated from their parents in many cultures. These include American Indian/First Nations tribes, Australian Aboriginals, Nordic Sami and Kven populations, and Uyghurs in China. The United States had a policy extending for 150 years, until 1969, to remove Indian children from their families and place them in nearly 500 boarding schools across the country (Newland, 2022). In the United States today, the rate of separation of American Indian children from their parents by child protection authorities is 12 times more than the non-Indian population (Knight, 2017). Institutional placements implemented by the Mormon Church have resulted in lawsuits alleging widespread sexual abuse of the children (Fowler, 2016). In retrospective accounts of American Indian and white adults who had been adopted or fostered as children, American Indian adoptees reported higher rates of behavioral and mental health problems than white adoptees (Landers et al., 2017). There was also evidence of poorer health in institutionalized Indian children (Running Bear et al., 2018) and more disruption of child-parent bonds (Torres De Leon, 2020) than in home-reared American Indian children. Both American Indian and white fostered and adoptive children experienced high levels of emotional maltreatment in care, but American Indian children also experienced more physical, sexual, and spiritual abuse, as well as poly-victimization in their foster and adoptive homes (Landers et al., 2021). It was not stated whether the foster and adoptive homes were culture-consistent or transcultural so the role of non-matching culture could not be estimated.
First Nations children in Canada suffered extensive separation from parents based on Canadian national policy as implemented by the Catholic church (Trocmé et al., 2004). A small survey study indicated that adult participants with a family history (parents and/or grandparents) of forcible placement in Canadian residential schools reported 31% more mental health problems than adults without such a history (Gray & Cote, 2019). The results suggest a multi-generational effect into at least the third generation. A review of 61 studies indicated poorer self-rated physical, behavioral, and mental health in children sent to residential schools (Wilk et al., 2017). Further, although residential schools for indigenous children have been closed, Canada maintains high levels of foster care and residential schools for maltreated children and the children sent to these schools are disproportionately First Nations children (Coletta, 2022). Like other formerly separated children, Indigenous adults often seek both their parents and their tribes; unlike other biological parents who voluntarily placed their children for adoption, tribal groups actively seek reunification with the separated children (Landers et al., 2015) indicating that the loss is felt intensely in both directions.

The parallel in Australia is ‘the stolen generation,’ largely implemented by Catholic residential homes, often with recent accusations of sexual abuse of children (Human Rights and Equal Opportunity Commission, 1997). Approximately one third of Australian Aboriginals were taken from their families and communities and forced to live in residential schools, foster homes, or adoptive homes between 1910 and 1970. The effect on descendants of the Stolen Generation was surveyed by comparing 7,900 children living in homes with a separated adult to 40,000 Aboriginal children living in homes without such adults on health, cultural, and socioeconomic measures (Nogrady, 2019). Indigenous children living in Stolen Generation households were more likely to report missing school without permission, being treated unfairly at school, and
having poorer physical and mental in the previous year. They were 60% less likely to be living in a home owned by a family member. These results indicated an intergenerational transfer of poverty and trauma, with the suffering endured by the Stolen Generation children still being experienced by their descendants. These adults were also, however, twice as likely as other Aboriginals to identify with a tribal language and homeland.

Friborg et al. (2020) reviewed the results of two large cross-sectional epidemiological population-based studies on native Sami and Kven adults between 18 and 79 years of age in Nordic countries who experienced enforced placement in boarding schools in the 20th century. Although this policy has ended and active efforts have been made to restore and support Sami communities, the results indicate that some negative effects have endured in health, education, and family stability. Retrospectively parents reported feeling guilty for allowing their children to be taken away and the now-grown children recalled feeling abandoned by their parents. A particularly troubling aspect of such residential schools was the lack of emotional support, especially the absence of comforting touch. There was a difference between boarding school participants and home-reared participants in discrimination, violence, unhealthier lifestyle behavior (e.g., smoking), less education and household income, but the effects were very weak. Both the limitations of self-report and the impact of almost a half century of other experiences probably explain the weak associations. Importantly those participants who had a strong core identity with being Sami reported better physical and mental health than those who did not.

**Systemic and Reciprocal Effects.** Although rates of maltreatment in biological homes are twice as high for American Indian and Alaska Native children as compared to American white children (Statista Research Department, 2021), these rates are not covaried by socioeconomic status which would reduce the difference. Rates of partner abuse and substance
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abuse are also higher in American Indian homes (Ertl et al., 2019). Because these factors are known to be among the negative consequences of adults having been separated from their caregivers as children, the high rates only emphasize the long-term harm done to children in Indigenous populations and their descendants by separating children from their biological parents (Eriksen et al., 2016).

Enforced separation of Indigenous children from their parents stands out as combining all the harmful aspects associated with separation, including enforced separation from loved parents, separation from both parents, lower socioeconomic status, relatively high levels of institutional child maltreatment, frequent incarceration of fathers (Prison Policy Initiative, 2020), absence of any alternative attachment figure in residential schools, separation from non-parental kin, denigration of children’s ethnicity, refusal to permit children to speak their language, maltreatment in the care setting, and sometimes even loss of personal identity and family origins. Consequently, separation of Indigenous children from their families has resulted in poly-victimization and effects that continue through multiple generations of descendants.

The most recent forcible transfer of ethnic and religious minority children to state-run boarding schools by a government is the Chinese government’s separation of Uyghur children from their parents. About half a million Uyghur children whose parents are imprisoned or in re-education camps are in state-run schools where their language and religion are forbidden. They are taught Mandarin and to love the Chinese Communist party (Abbas, 2021). An investigative reporter for Radio Free Asia noted online: “Family separation appears to be creating conditions of trauma, the long-term effects of which are difficult to predict” (Hoja, 2021). The plight of Uyghur children has been called an act of genocide by several western countries (BBC News, 2021).
Compared to the other forms of separation reviewed in this paper, the outcomes of separation of Indigenous children from their families seem to be the most powerfully negative. This can be accounted for by the poly-victimizing quality of the policy to ‘reeducate’ Indigenous children through residential institutions, foster care, and adoption into families in the dominant culture. American Indian and First Nations adults have looked back and written about the harm done to them; their published works are more often policy statements, with personal recall used to convey to others the emotional impact of their own experience with early separation from both parents and culture.

**Conclusions, Mitigating Conditions, and Unanswered Questions Regarding Indigenous Populations.** The effect of several generations of forced placement of Indigenous children in residential institutions was harmful to those children and to their home-reared descendants. Unfortunately, parceling out the variance due to separation *per se* from concomitant negative conditions is not possible. The most powerful mitigating factor is the active welcoming and cultural inclusion of separated children by their Indigenous tribes and bands (Gray & Cote, 2019). Given the limited resources of Indigenous groups and the lack of comprehensive lists of separated children, it is not clear how successful the reunifications will be and what conditions are necessary to reverse the damage of systemic separation.

**Recommendations regarding the separation of Indigenous children from their biological parents.** Although forced separation of children to institutional facilities has been discontinued for several decades, two problems remain. First, child protection authorities place Indigenous children in foster care at much higher rates than children of the dominant cultural group. Policies need to change, and training needs to be provided to professionals to help them to recognize their biases. But the situation is not pure bias; alcohol, familial violence, incarceration,
and, more broadly, child neglect are major problems in Indigenous populations. In order to stop and reverse generations of separation trauma, physical, cultural, and emotional resources need to be greatly increased in Indigenous communities. This includes enabling Indigenous adults to carry out legal and social services roles in accord with their cultural values and considering the recommendations for preserving families that we offered in the foster and adoption section above. In the United States, the Indian Child Welfare Act (1978) gives Indian children the right to be raised in an Indian home, but it fails to offer services to help disadvantaged Indian parents to keep their children. Without such support, the emotional costs of separation will continue within Indigenous communities. A second package of legislation aimed at providing resources to Indigenous families is needed to correct the intergenerational trauma of separation of Indigenous children from their parents. Further, when fostered Indian children have formed attachments in non-Indian homes, the Act forces children to suffer separation from these attachment figures to receive the benefit of reunion with tribal members, albeit not necessarily the biological parents. Exceptions need to be added to the law that enable children to gain tribal identity without losing the family with whom they live. The point is for Indigenous children to have both advantages (family and tribe) and not have adult values imposed in ways that use separation to exchange one advantage for the another. The goal should be to provide Indigenous children the advantages of both their Indigenous culture and those of the modern dominant culture.

**Conditions Affecting Outcomes from Separation**

This review leads to four generalizations across all types of separations.

*The Pain of Separation*

First and foremost is that separation of children from their parents harms children. This is universally true. The precise effects vary by age, culture, and socioeconomic status, but there are
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no conditions under which separation does not cause distress, even when that distress might be
less than the distress of remaining together.

**Special Status**

The different forms of separation affect different groups of children, but in most cases
minorities and boys are affected more than children in the dominant culture and girls, in terms of
both the proportion of children removed from families and the severity of negative effects. Black
and Indigenous children are more often taken into foster care – and are less frequently adopted
into permanent homes. Asian children are more often ‘left behind’ when their parents leave to
work in cities. Asian, Russian and Eastern European children are often adopted by middle class
white families in western countries (United Nations, 2009). Black, American Indian, and
Hispanic children in the United States are more often separated from incarcerated fathers than
other children. Immigrant children who are separated from their parents differ from the dominant
population everywhere and, in the United States, are more often Hispanic. Indigenous children
are more often placed, even now, in residential schools for maltreated children. Within these
groups, there is evidence that boys are more greatly harmed such that they are more often
incarcerated as young men and less often form enduring families in their adulthood.

This ‘minority and male gender’ effect contrasts with the white, middle class, and female
status of most child welfare professionals in western, high-income countries. This dichotomy
almost certainly reduces the probability that minority families will feel understood by members
of the professional service system that often decides how and even whether their families will
survive intact, and that fathers’ and boys’ needs will be met adequately. We recommend that
social services staff, at both entry and policy-making levels, reflect the ethnic, cultural, and
gender status of their clients.
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Age at Separation

Child age at the time of separation is a major factor in children’s response to separation from their parents.

Early Infancy. When the first placement occurs before 6-9 months of age, the effects tend to be transient (Schaffer & Emerson, 1964). If the infant is reunified or permanently placed with the new caregiver by 8-9 months of age, the effects tend to be minimal. This is because the infant does not have the neurological maturation to have formed an attachment relationship with any caregiver, nor to recall the separation. This, in turn, precludes infant psychological trauma from early events. Nevertheless, that does not prevent children having concerns at later ages when they are told about the separation.

Late Infancy to the Early School Years (~9 months to ~ 9 years). In general, children under 2 years of age experience less distress than older children (Orthner & Rose, 2005). Separations occurring between approximately 3-5 years of age usually result in persistent and enduring loss of security in new relationships (Alfano et al., 2016). The behavioral signs of this distress include increased need for attention, clinginess, temper tantrums, defiance, appetite changes, and nightmares/sleep problems, with 40% of young children also showing sadness (Alfano et al., 2016). Possibly most concerning, brain development is affected by stress; for example, early childhood stress was associated with faster maturation of the prefrontal cortex and amygdala during adolescence, i.e., roughly a decade later (Tyborowska et al., 2018; VanTieghem et al., 2021). This is important because brain pathways activated early in life lay the foundation for later development (Fair, et al., 2018; Fujisawa et al., 2018).

Later School Years (~9-12 years). The range of development within the school years is very great, from very early concrete thinking to early abstract thought and from early self-care to
competence in daily self-care and even toward the pubertal beginnings of presenting oneself in sexually attractive ways. Older school-aged children have both a wider scope of development, including out-of-home activities and non-family relationships, and are largely able to manage self-care. Linguistically, school-aged children move from explicit presentation of their own perspective to sophisticated ways of revealing and concealing information that is concurrently understood from more than one perspective. In relationships, the range expands from parents to include early best friends (usually of the same gender) to early romantic relationships (especially among girls and children who have experienced several separations). Further, children who have taken a caregiving role with a needy biological parent or their neglected siblings or both might find themselves in conflict with their new caregivers regarding their role (Alfano et al., 2016).

Although separation from parents in mid-childhood (when language can be used to explain the situation to children) has fewer negative effects than earlier separation (Mok et al., 2018; Zhou, et al., 2018), it is not without effects, including various forms of acting out, somatic distress, and internalizing behavior.

**Adolescence (puberty to 18 years).** Puberty introduces a period of major biological change, both neurologically and physically, as the cortex of the brain matures, and sexual hormones lead to secondary signs of sexual maturity. A particular issue is the greater maturation of the amygdala in support of rewarding risk-taking behavior than the prefrontal cortex that serves as a brake on impetuous action (Casey et al., 2008; Gluckman & Hanson, 2006; Grisso et al., 2003; Tyborowska et al., 2018).

The timing of sexual maturation is tied to stress. In addition, individual differences in prior development manifest in a wider range of coping styles and overall adaptation (from creatively adaptive to very high risk and dangerous). Finally, maladaptation among adolescents
has greater implications for the adolescents’ well-being, even survival, and for the well-being and safety of others. Put another way, risk in adolescence can have serious negative outcomes, including physical harm and death, for both the adolescent and for others.

On the other hand, as regards separation from parents, older adolescents begin to look to their future beyond childhood. Moreover, adolescents are often asked their preference and given agency that younger children do not have in their placement. The exception is military deployment, with adolescents having almost no agency in their parents’ deployment and adolescent boys suffering the greatest distress.

Thus, both the risks and the opportunities for self-protection are greater in adolescence than in childhood.

Conclusions, Mitigating Conditions, and Unanswered Questions Regarding Separation of Children at Different Ages. The central developmental conclusion is that separating young children between ~9 months of age and ~9 years of age from their attachment figure(s) has greater negative impact than separation at earlier or later ages. The long-term outcomes can include persistent wariness regarding important future relationships, such as parents, best friends, lovers, and spouses, thus feeding inter-generational effects.

A central problem caused by children’s immaturity is that they are unable to communicate precisely about their experiences and, thus, unable to correct their own or adults’ misunderstandings. Because each child’s experience is unique and cannot be known accurately by adults, adults who try to explain the separation when children are older risk overlaying children’s misunderstanding with their own perspectives (e.g., the separation was good for the child) and inaccurate information about the child’s experience, thus inadvertently augmenting
children’s confusion. This is particularly true when children use inhibitory strategies with little or no obvious display of their distress.

**Number of Changes**

The negative effects of separation increase as the number of separations increases (Barth et al., 2007; Londino et al., 2017; Mok, et al, 2018; Rubin et al., 2007); this is true even when the next placement is ‘better’, for example, in adoption. Although most children can manage to believe that the current placement is permanent through one or two changes, with additional changes, it becomes increasingly difficult for children to ever form committed relationships with any caregivers. This means that each successive placement is more likely to fail than were previous placements. Further, the changes are likely to be accompanied by an initial ‘false honeymoon’, followed by outbursts of uncontrolled anger, fear, or desire for comfort (Qualls, 2016). Desire for comfort by emotionally deprived children is sometimes displayed as inappropriate sexualized behavior, i.e., ‘indiscriminate’ attachment (Tarren-Sweeney, 2008).

**Conclusions, Mitigating Conditions, and Unanswered Questions Regarding the Number of Changes of Caregiver.** More changes of caregiver are consistently harmful to children. When the change is intended to stop maltreatment, it is not clear whether the cost of separation offsets the cost of maltreatment; this, of course, varies in each case, but the cost to children of experiencing another separation is often overlooked in the effort to prevent further maltreatment. Once impermanence becomes an individual’s primary model, an intergenerational cycle of broken relationships might be initiated.

**Discussion: Central Findings & Limitations**

The studies reviewed indicate that children who have been separated from their parents or primary attachment figures experience a wide range of deleterious effects. The effects vary from
one child to another and vary somewhat by age, gender, frequency of separation and reason for separation, but they consistently outweigh the effects of other influences on child well-being (Humphreys, 2019).

Although young children can attach to a new caregiver (Stovall-McClough & Dozier, 2004), this ability diminishes with each separation and subsequent new caregiver (Schofield & Beek, 2005). Placements occurring between infancy and the mid-school years can lead to enduring feelings of being abandoned, unlovable and responsible for the separation because children are old enough to remember and too young to understand; moreover, they cannot convey their distress in words to adults – even at older ages. Boys are especially vulnerable to the absence of a father. Change of domicile augments the effects of separation from parents.

The effects of contact with parents during the separation are complex; open adoptions and kinship care have fewer negative effects than closed adoption and foster care, but contact with severely maltreating parents can lead to greater distress. Loss of biological parents in early adoptions and loss of culture in cross-cultural adoptions tend not to have effects until the school years at the earliest, but do have effects by adulthood in most cases. On the positive side, children who have input on the decision of where to live generally fare better than children who do not, but this is confounded with age because younger children cannot evaluate or communicate verbally about their circumstances.

Limitations

This review surveyed studies from a broad expanse of family separation types. We have drawn generalizable conclusions about the effects of separating children from their parents, while acknowledging that every separation is unique. The limitations of this review reflect, in part, the limitations of the research. As with most research investigating harmful experiences,
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ethical constraints preclude the randomized designs necessary to isolate causal factors or compare equivalent groups. Therefore, effects are estimated based on imperfect comparisons. Pre-post separation designs would be helpful, but we found few studies of this type.

As noted earlier, most separations occur in the context of other adversities which put children at risk prior to separation (Humphreys, 2019). For example, it is probable that most children removed to foster care were at developmental and psychological risk prior to separation. Two studies suggest the added effect of separation. Carr-Hopkins and her colleagues (2017) found that the removal itself was experienced by 6-12-year-old school-aged children as more traumatizing than the maltreatment that had preceded it. Crittenden observed that maltreated children denied placement in protective daycare remained with their parents longer than children given the ‘advantage’ of daytime separation (Crittenden, 1983); in this study, daytime separation was presumed to function as a catalyst, speeding a process of relationship rupture that ultimately occurred in both groups.

On the other hand, the studies of parents who work away from children and military deployment involve children who may be presumed to have no greater pre-separation problems than the normative rural Chinese and non-deployed American military populations, respectively. For these groups, comparative post-separation findings do suggest the causal influence of separation.

A common limitation is a lack of exploration of within-group differences. This approach could help identify factors associated with risk and resilience. Further, most research on separation relies on professionals’ evaluations or self-report by caregivers. However, self-reports may be distorted (Davidson & MacGregor, 1998). Finally, the role of culture, both broadly and within family units, is difficult to study and is barely addressed in these studies. Nevertheless,
and despite the limitations of this review and the studies themselves, our conclusions on the harmful effects of separation on children’s development are unambiguous.

Possibly the greatest limitation to our review is the near absence of children’s perceptions, understandings, and feelings.

**Conclusions: Finding the Voices of Children**

The conclusions are obvious. Separation from people you love, whenever and however it happens, is painful and leaves an indelible scar on one’s mind and development. It has accompanying risks that can measured. But none is as basic and universal as the remembered separation itself.

We have tried to stay focused on empirical findings, but these almost entirely reflect adult perspectives. Our central point is that separation is suffused with children’s suffering. For example, 34 years after being separated from her parents, Sandy White Hawk said she “remembers the day in 1954 when she was taken away by missionaries from the Rosebud Sioux Reservation in South Dakota. Standing in a red truck beside the stern woman who would become her adopted mother, the toddler gazed up at a pale white arm so different from any arm that had hugged her before. The 18-month-old wouldn't see her American Indian family for the next 34 years.” (Graham, 2001). The pain White Hawk suffered remains palpable three decades later and is made vivid to all of us in her description of the moment of separation. That it was carried out by presumably well-intended missionaries does not reduce the pain, nor render the policy it reflected justifiable.

Maltreated children are separated from their parents to protect the children. Although many are surely protected, all suffer greatly from separation. Children are not usually asked if they want to enter foster care, but occasionally their voices can be heard and, like White Hawk’s,
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they scream of pain and the harm done by separation. For example, one boy described his anger at being separated from his foster parents and placed with adoptive parents as “like a volcano when it erupts” (Selwyn et al., 2014a, p 234).

For our court reports of fostered children, we have regularly asked fostered children to “draw your family”; universally they draw their biological family. Heptinstall and her co-authors (2001) noted the importance to fostered children of their biological families, even when they did not know their family members. This was true in the drawing by a 13-year-old girl who had not seen her biological family since she was 3 years old and had lived in her adoptive family for only 4 years. In her colorful drawing everyone is smiling, and the effect is happy.

‘Me’ is placed in order within the intact biological family – that includes stepsiblings whom she had not met, and a child born after she was placed in foster care. The parents are identified by their first names, not ‘mom’ and ‘dad’. No one is touching anyone else, suggesting lack of connection. Their arms and legs are shortened and lack hands and feet, suggesting lack of agency. There is no sign of any foster or adoptive family. In sum, at 13 years of age, the girl delusionally idealized her biological family, no longer acknowledging the abuse and neglect that
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led to her being removed from her parents’ care. Although no pain is visible, the false portrayal of happiness hints at ‘unspeakable’ pain.

Below is an evocative exception to the drawing of biological families, drawn by a 9-year-old boy who had been in multiple kin and stranger placements over the previous 2 years:

![Drawing of a boy with the words 'Don't know']

The absence of any family, the smallness of the boy on the empty expanse of paper, the absence of arms (that could indicate agency or connection to others), the motionless pose, and the use of black (when bright colors were available), plus the words ‘Don’t know’ as his answer to ‘What are you doing?’ suggest the depth of his feeling of being abandoned by adults. Indeed, what is he doing in this home with strangers?

A Broad Call to Action

The Truth and Reconciliation Commission of Canada (2015) issued nearly 100 ‘Calls to Action’ to redress the legacy of residential schools, noting that separation of Indigenous children from their families had harmed those children, exposed them to harm from their non-parental carers, and harmed their descendants, even to the present. Further, the Commission noted that
ceasing to remove children and apologizing for having removed them were insufficient to reverse the harm done. Instead, specific actions were needed to restore the dignity and competence of the victims of unwise policies and policies that were implemented in harmful ways. We believe this effort should be extended globally to include broad calls to action on behalf of large numbers of separated children, including fostered, adopted, immigrant, and minority children.

Despite reviewing hundreds of documents about children being separated from their parents by governmental authorities and by parents themselves, we did not find even one study that identified ‘separation’ as a contributor to children’s distress. Instead, the focus was on parents’ behavior, children’s needs, national policy, and evidence of children’s pathology. Further, following each new child death, attention was given to procedures, assessments, protocols, and statutes to document professionals’ efforts to reduce the number of child deaths. These efforts were not usually balanced against the needs of the thousands of children who would be more readily removed from their parents as a result of stricter protocols.

The signs of children’s distress that can be seen, heard, and felt when one touches separated children are so many and often so extreme that it is hard to understand how they have not become a major focus of research and clinical practice. Nevertheless, children’s perspectives are rarely mentioned. We offer two primary recommendations to reduce children’s suffering from separation from their attachment figures while also creating the possibility of security, happiness, and possibly even joy for distressed children and their families: (1) Avoid separating children from their parents by offering resources to keep them at home safely and (2) when additional adults are needed, add them to the family rather than taking children out of the family (Crittenden & Farnfield, 2007; Brooks, 2020).
In both cases, the ‘either/or’ solutions used now would become ‘both/and’ solutions in which children would be protected by having more: more loving adults, more resources, more. We think clinical, administrative, and legislative solutions using these two ideas should be piloted under real world circumstances. Given the number of adults living alone and baby boomer parents whose children have left home, we think there are adults who could become protective kin to troubled families – if we learn to look for them in new ways and to support them with funds reallocated from foster care, litigious court proceedings, and even from ever-enlarging social services administrations. Put simply, shifting our human and monetary resources from disputed separations managed by professionals to enriching troubled families can lighten their burden, engage adults who seek meaningful family connections that can make a difference, and bring satisfaction to the professionals who sought to use their working lives to help families.

Our recommendations are very low tech. They eschew programs in favor of helping relationships. They shift money from fostering children to fostering families. They minimize conflict by focusing everyone on collaborative effort to strengthen families. We have argued that separation hurts children, but it also hurts biological parents (Schen, 2005; Nixon et al., 2013) and child welfare professionals (Pryce et al., 2007). As Bowlby said long ago, we believe that “the better approach is ….to seek to rehabilitate the home and family, no matter how costly in time and effort such an attempt may be.” (Bowlby, 1981, p. 5).

Our recommendations require reversing a half century of protecting children from their parents to a unified and shared effort to protect families. We suggest that design and implementation of these changes should include the contributions of parents and advocacy groups of parents with child protection experience (Roberts, 2022) and, alternatively, those professionals who are most hesitant about changing the current system. After half a century of
increasing numbers of separations, enlarging bureaucratic systems, and escalating costs, maybe a
new approach is worth trying? We hope that home-grown programs, tied to the needs and people
in specific places and containing systemic feedback to inform program improvement, can reverse
not only professional practice, but also outcomes to children and families. Participating in
something new generates commitment and hope. Hope can be contagious. We hope that a more
compassionate approach to preserving families, particularly the most fragile families, will
change the futures of children, their families, and their descendants in future generations.

Social workers, mental health professionals, guardians ad litem, attorneys, members of
the judiciary, and legislators can each help to reduce children’s suffering from separation from
their caregivers while concurrently increasing the possibility of safety in this generation and
sufficiency in the next. It is our hope that the evidence in this paper will motivate all of these
professionals to seek new, less damaging, and more beneficial ways to help children to develop
into happy, contributing adults.
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