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Open Adoption: Its Impact on Grief and Loss Issues for Birthmothers

Theresa A. Skretvedt
Augsburg College

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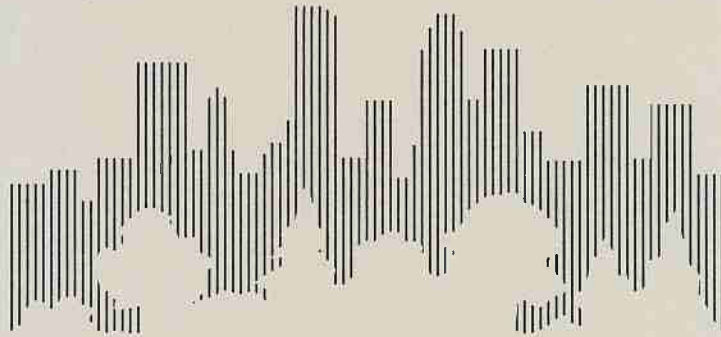
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MASTERS IN SOCIAL WORK THESIS

**MSW
Thesis**

Theresa A. Skretvedt

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**Open Adoption: Its Impact on Grief and Loss
Issues for Birthmothers**

1993

Open Adoption: Its Impact on
Grief and Loss Issues
for Birthmothers

Theresa A. Skretvedt

Augsburg College

OPEN ADOPTION: IMPACT ON GRIEF AND LOSS

MASTER OF SOCIAL WORK
AUGSBURG COLLEGE
MINNEAPOLIS, MINNESOTA

CERTIFICATE OF APPROVAL

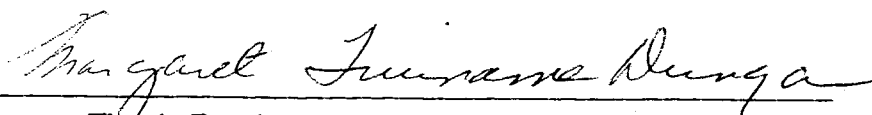
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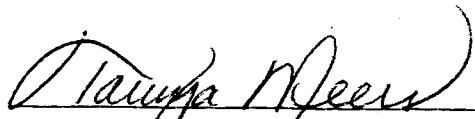
THERESA A. SKRETVEDT

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Thesis Advisor


Thesis Reader


Thesis Reader

ABSTRACT OF THESIS

OPEN ADOPTION: ITS IMPACT ON GRIEF AND LOSS ISSUES FOR BIRTHMOTHERS

THERESA A. SKRETVEDT

MAY 8, 1993

This qualitative study explores the impact openness in the adoption experience has on grief and loss issues for four birthmothers who voluntarily relinquished their infants. Stage and paradoxical phenomena of grief and loss comparable to parental loss of child through death are addressed through three stages of the adoption experience: during pregnancy, during delivery and relinquishment and post-relinquishment. Theoretical framework around attachment, the learned helplessness model of depression and self-determination as a client-centered outcome in social work practice enhance the understanding of some of the special grief issues related to loss through adoption. Discussion focuses on how openness in the adoption experience impacts on some adoption myths and the grief and loss reactions of birthmothers. Implications for social work practice exist in assessing how openness in the adoption experience affects a birthmother's sense of self and control over her life experiences.

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OPEN ADOPTION: ITS IMPACT ON GRIEF AND LOSS ISSUES FOR BIRTHMOTHERS

I. INTRODUCTION

There is a relatively new phenomenon within adoption practice which allows for varying degrees of agreed-upon involvement between the biological parent (herein referred to as birthmother) and the adoptive parents called open adoption. The open adoption movement changes the previously confidential process of adoption whereby birthmothers and adoptive parents shared no identifying information about each other and/or had no actual contact.

Adoption social workers and scholars, Reuben Pannor and Annette Baran, conceptualized open adoption as:

... a process in which birthparents and the adoptive parents meet and exchange identifying information. The birthparents relinquish legal and basic child-rearing rights to the adoptive parents. Both sets of parents retain the right to continuing contact and access to knowledge on behalf of the child (Baran and Pannor, 1990, p. 318).

Continuum of Open Adoption

Demick and Wapner's (1988) concept of open adoption was as a continuum initially identified by Sorich and Siebert in 1982 to which they added a fourth level:

1. *Restricted open adoption*: Arrangements are made for pictures and information about the child's development to be sent periodically to the birthparents for a specified time following placement. Adopters sign an agreement to furnish the material, and the adoption agency serves as the post office.
2. *Semi-open adoption*: Birthparents meet the people who will be

adopting the child, but no identifying information is shared.

3. *Full open adoption*: Both sets of parents meet and share information.

4. *Continuing open adoption*: Birthparents and adoptive parents establish a plan for continuing contact with one another and the child over the course of the child's development (pp. 229-230)..

Statistics regarding Open Adoption

Statistics vary regarding the extent to which openness in adoption occurs within the United States. In 1985 a Florence Crittenton agency in Atlanta, Ga. stated that 75% of their adoptive placements in that year included some degree of openness between biological and adoptive parents (Groth, Bonnardel, Martin, and Vouschen, 1987). Lutheran Social Service of Texas, a forerunner in open adoptions, claims that only a minority of their agency-sponsored adoption in 1986 were open adoption (Berry, 1991). Generally, Berry (1991) feels the extent to which agencies engage in openness in adoption is unknown but sensationalized through the media.

Significance for Practice

For birthmothers, relinquishing a child through adoption is a difficult emotional and psychological task -- particularly in a society where women are defined as "mothers, mother-to-be or childless" (Millen & Roll, 1985, p. 411). Theirs is not only a real loss of child, but status both in their own eyes and those of others. Social work practitioners and researchers are fairly united in their belief that grief and loss issues exist for birthmothers after relinquishing their children through adoption (Blanton & Deschner, 1990; Chapman, Dornier, Silber & Winterberg, 1986; Curtis, 1986; Groth et al., 1987; Lancette & McClure, 1992; Lamperelli & Smith, 1979; Roll, Millen & Backlund, 1986; Millen & Roll, 1985; Ryneearson, 1982; Stiffler, 1991; Watson, 1988). However, controversy exists in the literature as to whether openness in the adoption process ameliorates or exacerbates the birthmother's resolution of grief and loss issues surrounding relinquishment of her child.

The issue as to whether openness in the adoption process facilitates or delays a birthmother's grief process around relinquishment issues holds significance for adoption professionals as they design agency policy and practice regarding adoption options. Some literature (Berry, 1991; Curtis, 1986; Kraft et al., 1985) suggests openness in the adoption process interferes with the grieving process for birthmothers because they perceive relinquishment not as a loss but as a medium for further parental connection with the child through letters, photos or possibly even actual contact. If this were true, advocating openness by the adoption agency may be a disservice to birthmothers-- indeed, the entire adoption triangle. If there is a difference between open and confidential adoption processes, grief work may also require varying post-adoption counseling service for birthmothers.

Research Question

The research question I proposed to study with birthmothers is how openness in the adoption process affects their grief and loss issues surrounding the voluntary relinquishment of their infant through adoption.

II. HISTORICAL AND POLICY ANALYSIS

Objectives of Adoption

Adoption as a method of insuring the "continuity of the family" (Sorosky, Baran & Pannor, 1978, p. 25) has existed historically since human society began. Basic underlying objectives of adoption have been to provide for the well-being of children; to produce children upon whom to bestow a family name and thereby, ensure continuation of family heritage and to provide for parenting opportunities (Geissinger, 1984). It would appear that needs of two out of three of the adoption participants are considered in these objectives -- children and prospective adoptive parents. Birthparents' needs were historically not addressed until the 1970s and 1980s.

Confidentiality as Practice

It is primarily in our Western society that confidentiality is promoted in adoption practice. With confidentiality has come the Western ideal of totally severing the link between biological family and the adopted child by discouraging any knowledge of or contact with the adoptee and biological family (Byrd, 1988; Geissinger, 1984; Pelton, 1987). Geissinger (1984) states that the confidentiality and secrecy surrounding the adoption process and the severing of any knowledge of or contact with the biological family makes the adoptive family seem as though they are the natural, biological family. This perhaps stems from an underlying value in Western culture that infers biological families are the desired, normative form of family. In its infancy as a practice, adoption paid little attention to the psychological or emotional needs of any of the participants. "Adoption was seen as a brief process to meet an immediate need, without recognition of lifelong implications" (Baran & Pannor, 1990, p. 322).

The legal community supports confidentiality and closed adoption policy according to Phillips (1991) who reviewed Texas statutes and found "the effect of the decree of adoption is that the relationship between the adopted child and the adoptive parents exists as if the child were born to the adoptive parents

during marriage" (Phillips, 1991, p. 413). Phillips felt that confidentiality and secrecy as standards in adoption practice were sustained by several myths: (a) birthmothers are unconcerned about their child otherwise they would never consider relinquishment, (b) secrecy is a necessary component of adoption to protect all parties of the adoption triangle, and (c) birthmothers would eventually forget about the child they did not want to parent.

From a policy standpoint, confidentiality in the adoption process was encouraged by adoption agencies and adoptive parents in the 1930s and 1940s. Consequently, legislation reflected this bias (Geissinger, 1984). Historically, unwed mothers in the United States have been a powerless group who have had little impact on legislation. In fact, confidentiality was said to benefit the biological mother for whom out-of-wedlock pregnancy was socially stigmatizing (Geissinger, 1984; Pelton, 1987; Sorosky et al., 1978). Three major historical phenomena -- the search movement, permanency planning (Geissinger, 1984; Sachdev, 1991) and the Civil Rights Movement (Belbas, 1987) -- gave impetus to attitudinal changes regarding secrecy in the adoption process. The study of genealogy and "searching for roots" (Belbas, 1987, p. 186) has helped to legitimize adoptees' and birthmothers' searches. In addition, the decrease in availability of infants for adoption in recent decades due to increased access to abortion and increased acceptance of single-parenting has urged adoption agencies to be more cognizant of the feelings and needs of birthmothers (Belbas, 1987). Amadio and Deutsch (1983-84) urge that greater flexibility in adoption practice allowing for openness might persuade single women to consider adoption rather than "struggling to raise the children themselves" (p. 63).

Openness as Practice

Policy is still divided in its acceptance of openness in adoption (Amadio & Deutsch, 1983-84; Phillips, 1991; Sachdev, 1991). In many states open adoption is practiced but not legally sanctioned as courts are not involved in the contractual process regarding openness, i.e. visits or contacts (Phillips, 1991). In

1984, eighteen states recognized visitation in adoption but limited this primarily to related adoption -- stepparents or grandparents (Berry, 1991). Only one-third of the states with existing legislation regarding open adoption recognize contracts between biological and adoptive parents as legal and not against public policy as long as the "best interest of the child" (Phillips, 1991, p. 418) is basis for the contract.

III. LITERATURE REVIEW

Grief and Loss Issues in Adoption

"Parental loss of a child is a particularly devastating grief, no matter what the age or circumstances. It is unnatural, unexpected, and involves many complex issues" (Stiffler, 1991, p. 249). Currently, within the literature, grief and loss are generally seen as major issues birthmothers must resolve in voluntary relinquishment of their child through adoption (Blanton & Deschner, 1990; Chapman et al., 1986; Curtis, 1986; Groth et al., 1987; Lancette & McClure, 1992; Lamperelli & Smith, 1979; Millen & Roll, 1985; Roll et al., 1986; Ryneearson, 1982; Stiffler, 1991; Watson, 1988). Historically, however, parental feelings of grief as a result of loss through adoption were not always acknowledged or legitimized. As adoption support groups began to materialize in the 1970s, birthparents who had relinquished children through adoption finally had a vehicle to voice their feelings of loss and to escape the isolation and shame brought about via the secrecy inherent in the adoption process (Stiffler, 1991). Research regarding grief and loss issues of relinquishing birthparents (Blanton & Deschner, 1990; Deykin, Campbell, & Patti, 1984; Lancette & McClure, 1992; Millen & Roll, 1985; Ryneearson, 1982; Stiffler, 1991) followed the organization of such groups as CUB (Concerned United Birthparents) and APFOR (Adopted Parents for Open Records).

Grief and Loss as Stage Phenomena

Within the literature, relinquishment of a child through adoption is compared to the emotional process linked with loss through death (Blanton & Deschner, 1990; Lancette & McClure, 1992; Lamperelli & Smith, 1979; Millen & Roll, 1985; Groth et al., 1987). Post-death grief reactions within the literature are frequently conceptualized as stage phenomena which are operationalized in a linear fashion (Chapman et al., 1986; Harvey, 1977; Lancette & McClure, 1992; Millen & Roll, 1985; Roll et al., 1986; Ryneearson, 1982; Watson, 1986). A synopsis of the stage-model grief process includes the following reactions:

- 1) shock, denial and numbness;
- 2) guilt;
- 3) anger;
- 4) yearning, searching and

bargaining; 5) depression, disorganization and despair; and 6) integration and acceptance.

An initial reaction in a stage-model grief reaction is often one of shock, denial and numbness. For birthmothers contemplating adoption for their child, this initial grief reaction may need to be dealt with on three separate occasions: 1) at the time when their pregnancy is first suspected and then confirmed, 2) at the time of delivery of their child, and 3) at the time of termination of parental rights and adoption of the child (Lamperelli & Smith, 1979). Lancette and McClure (1992) found denial operationalized in birthmothers they interviewed in beliefs/ subconscious desires that the actual adoption process would never be accomplished. Several authors (Chapman et al., 1986; Millen & Roll, 1985; Roll et al., 1986) feel an additional step to the first stage of grief for relinquishing birthmothers is accepting the reality of their loss. The paradox of the birthmother's situation is that she must accept the reality of her loss knowing full well her child continues to exist.

Guilt and anger are typically second and third stage phenomena experienced through loss by the bereaved individual. Frequently, these feelings co-exist. For birthmothers, anger is often multifaceted and is directed 1) at themselves for not preventing, in fact for instigating, the loss; 2) at their child for leaving; 3) at third parties involved in her adoption experience for facilitating the same (Lancette & McClure, 1992; Millen & Roll, 1985; Roll et al., 1986).

Guilt may initially be experienced by birthmothers when they first learn of their pregnancy and must share this news with other family and friends (Lancette & Smith, 1979; Lancette & McClure, 1992). Guilt is later experienced by the birthmother and, may even intensify with time, as the reality of her voluntary role in relinquishing her child is absorbed.

The fourth stage of grief -- yearning, searching and bargaining -- can again occur throughout a birthmother's pregnancy and following her relinquishment of her child through adoption. While pregnant and immediately after delivering, a birthmother

may vacillate in her decision-making regarding adoption. Lancette and McClure (1992) describe in their study women who "bargained" with adoption by taking their child home from the hospital for a trial of parenting.

Searching behavior following an adoption loss can be both imaginative and behavioral. Following a loss through death, it is normal for the bereaved to search for individuals with similar characteristics of the deceased; e.g. color of hair, stature, gait pattern, etc. (Brice, 1991; Millen & Roll, 1985; Roll et al., 1986; Rynearson, 1982). Bereaved parents may develop a visual picture of the deceased child and may experience searching behavior in their attempts to locate another who would meet this mental image. This phenomenon is also common for birthmothers who have relinquished their child through adoption. Within the literature birthmothers report being startled by children whose physical features fit this visualization of their relinquished child (Millen & Roll, 1985; Roll et al., 1986). Ultimately, searching behavior may be a fruitful behavior for birthmothers experiencing adoption loss as they have the real possibility of reunion with their children.

Lancette & McClure (1992) discuss the "what-if fantasy" (p. 93) of birthmothers who dream about how their life-experience would have been impacted had they opted to parent their child. This may correlate with the yearning experienced by birthmothers who have relinquished a child through adoption (Stiffler, 1991).

Depression (Lamperelli & Smith, 1979; Lancette & McClure, 1992) and loss of self (Millen & Roll, 1985; Roll et al., 1986) are frequently experienced by birthmothers following relinquishment via feelings of emptiness, withdrawal and somatic complaints such as crying, insomnia and lack of appetite. Millen and Roll (1985) conjecture that a sense of loss and depression are exacerbated for birthmothers in their loss because of their biological link to the child through pregnancy.

Finally, acceptance and integration of self are accomplished by birthmothers in their mourning process. Resolution in this last stage is evidenced by an eventual "sense of separateness from the lost person" (Roll et al., 1986, p. 265). Establishment of a new identity which includes her child but allows for positive

feelings about her decision to relinquish, allows the birthmother to continue on with her life goals (Lamperelli & Smith, 1979; Lancette & McClure, 1992; Millen & Roll, 1985; Roll et al., 1986).

Grief and Loss as Paradoxical Phenomena

A more contemporary conceptualization of the grief process offered by Brice (1991) is of maternal bereavement as paradoxical experiences -- not stages. Brice (1991) "found that maternal mourning is a relational phenomenon with multiple themes that coalesce to form a structural whole and that it is lived as an essentially paradoxical phenomenon" (p. 3). Brice's five paradoxes evidenced in maternal mourning include 1) world transformation, 2) relating to the child, 3) self-deception, 4) responsibility and unfairness, and 5) interpersonal relations.

With 1) world transformation, mothers are confronted with living without their child. A mother's past, present and future are drastically affected due to the loss of her child through death. The present and future hold no opportunity for involvement with their child and the past can neither be re-experienced nor rectified. Grieving mothers are also more attuned to other tragedies and losses occurring about them. This experience tends to create "a sense of abandonment by the world of the living" (Brice, 1991, p. 3). Finally, a bereaved mother faces the predicament of both wanting to live and wanting to die -- as a means of reuniting with her child. During the acute states of grief, a bereaved mother may define life more in terms of death -- choosing not to die but feeling morose in living.

The second paradox for grieving mothers is 2) in relating to the child. Conflict often exists for mothers who mourn between feeling "full" of grief and sadness and "empty" in relation to the actual loss of child. Relief is often sought through crying. Tears bring a temporary respite from the fullness of grief but the respite also may leave feelings of emptiness -- as though the memories for the child will ultimately be dissolved and forgotten.

Brice felt for mothers that 3) "self-deceptions temporarily lessen her pain, create their own pain and, paradoxically, further her mourning" (Brice, 1991, p. 4). Mothers

in mourning may try to escape their pain through addictive, self-defeating behaviors (chemical dependency, binge shopping expeditions, promiscuous behavior, etc.) which ultimately only bring their own grief and pain and exacerbate their mourning process. Searching for answers as to why the child died is common. Answers, even if found, never fully explain or justify the loss. Even good process in grief work; freedom to cry, to be angry and to acknowledge the emptiness; leave the grieving mother feeling worse, not better for the moment.

Mothers have a double bind in the paradox of 4) responsibility and unfairness. Usually, mothers are intellectually aware they did not cause their child's death but basic instincts/ drives of a mother to protect and to ensure their child's well-being leave mourning mothers conflicted in their guilt surrounding the loss. Most mothers feel their child deserved to live -- perhaps more so than even she or others. The comparison of her child's right to life as compared to others promotes further guilt for such feelings and fear of her own sanity.

Lastly, Brice felt mothers whose children had died experienced paradox in their 5) interpersonal relations when grieving. Anger exists because of the loss, but the "causes" of death are usually intangible events such as accidents, illness, God's will, etc. In seeking a concrete, tangible source on which to displace their anger, mothers may become angry with their actual support sources, i.e. friends, family, spouses, etc. Conflict also exists in the paradox of needing a "sympathetic ear" upon whom to vent feelings so as to process her guilt yet resenting the empathy and opportunity this "sympathetic ear" provides because the mother is forced to experience, feel and acknowledge her loss and pain. Perhaps the final and most difficult paradox under interpersonal relations according to Brice is that grieving the loss of a child often results in personal gain for the mother as she learns more about herself and grows in understanding and empathy towards others. That a mother should personally "gain" from the loss of her child is a life-long paradoxical dilemma.

Advantages that Brice saw in conceptualizing maternal mourning as paradoxes

included cognitively and experientially recognizing grief as an on-going, circular event rather than linear in nature and dispelling the notion of a hierarchy or sequencing of grief rather than as an experience triggering paradoxical expression based on anniversaries, life events and feelings states (Brice, 1991). Within his paradoxical conceptualization of grief and mourning, Brice preserved reactions to grief such as shock, and denial; affects of bereaved individuals such as guilt, anger, and depression; and behaviors such as hopelessness, somatic complaints and fantasizing regarding the deceased as discussed in traditional stage-oriented grief processes.

Stages of Adoption

Rynearson (1982) and Lancette and McClure (1992) postulate that loss and grief issues are dealt with on three separate occasions within the adoption process for birthmothers. Initially as birthmothers are contemplating outcome-options during their pregnancies, women are likely to experience all stages or paradoxical phenomena as they struggle in their decision-making regarding parenting versus placement. During delivery and relinquishment, birthmothers may experience anger, disbelief, numbness and denial as they navigate their road to signing adoption papers. Numbness and denial may be evidenced by a lack of outward, physical symptoms of mourning. Lastly, the post-relinquishment period can be fraught with fantasies and dreams if grief and loss are denied.

Special Issues in Adoption

Literature supports that birthmothers relinquishing children through adoption do experience loss (Blanton & Deschner, 1990; Chapman et al., 1986; Curtis, 1986; Groth et al., 1987; Lancette & McClure, 1992; Lamperelli & Smith, 1979; Roll et al., 1986; Millen & Roll, 1985; Rynearson, 1982; Stiffler, 1988). Loss requires a process of grief and opportunity to mourn to move toward resolution and acceptance of the loss. It is in the grief process and mourning that birthmothers are met with special issues which have thwarted their grief work and resolution. Deykin et al. (1984) in their research with CUB (Concerned United Birthparents) members

concluded that losses incompletely grieved resulted in feelings of decreased self-esteem, depression and feelings of unworthiness for birthparents. Burnell and Norfleet (1979) contacted 300 birthmothers who had placed a child through adoption within a three year period via mailed-questionnaire and found significant "gynecological, medical and psychiatric problems" (p. 170) within the population. Depression was the most commonly identified psychological issue in 40% of the women. Rynearson (1972) who followed 20 birthmothers through psychotherapy identified issues of increased fantasies regarding reunion and parenting problems with subsequent children evidenced by enmeshment and overprotectiveness. Lancette and McClure (1992) also recognized the issues of "loss of dreams and fantasies around two common themes: (a) the fantasy of the birthfather's return and (b) the vivid daydreams of "what if" I would have parented my child" (p. 92).

Because of the past social stigma of unplanned, out-of-wedlock pregnancies and the social image of birthmothers as uncaring, "loose" women, a birthmother's grief was not identified or acknowledged within adoption circles (Lancette & McClure, 1992; Stiffler, 1991). Whether or not loss even occurs in adoption when women "freely" chose to place their children has also been argued (Lancette & McClure, 1992). Freedom in choosing adoption could be a misnomer when Deykin et al. (1984) found that 69% of birthparents felt external pressures from family, health care providers, social workers and financial systems to place their child.

Furthermore, a birthmother's adoption "experience" was supposed to end with the relinquishment of her child through adoption. Any expression of grief following relinquishment when a birthmother was instructed to "get on with her life" was defined by society as pathology -- not healthy process as in other grief work such as loss through death (Lancette & McClure, 1992; Roll et al., 1986; Stiffler, 1991; Weinreb & Murphy, 1988).

Feminist perspectives reinforce the existence of historical labeling of a birthmother's grief following adoption as individual psychopathology. Weinreb and Murphy (1988) relate a birthmother's resultant emotional states and action

perspectives to the socialization of women in the United States as passive, dependent, self-denying and repressed individuals who find their identity through caretaking/ caregiving roles of wife and mother. Acceptance of these socialized roles and feelings states can only augment the loss and confusion a birthmother experiences with relinquishment of her child through adoption.

The bereavement process is further complicated and compromised for birthmothers because of the actual, continued existence of the child (Hartman, 1991; Roll et al., 1986; Rynearson, 1982; Stiffler, 1991; Watson, 1988). Rynearson (1982) stated "relinquishing a child for adoption presents the mother with a discordant dilemma of separation and loss" (p. 338). On one hand, the loss is considered permanent and complicated by the birthmother actually initiating the same. On the other hand, the loss is difficult to resolve because the child continues to actually exist -- reunion is a possibility. Within the literature (Hartman, 1991; Watson, 1988) studies have indicated that birthmothers' feelings of loss actually may escalate over time due to the increased opportunity for reunion initiated either by themselves or their adopted child. This escalation in feelings of loss through adoption is in contrast to loss through death where grief usually subsides with time because the finality of death facilitates the acceptance of loss.

Baran and Pannor (1990) suggest a different conceptualization of loss for the birthmother who relinquishes a child through adoption. Loss for birthmothers in adoption entails the transferring of parenting rights and responsibilities to the adoptive parents. Thus, this loss is of a legal and psychological nature for the birthmother. It does not do away with nor diminish the importance of the biological aspect of parenting unique to birthmothers. Birthmothers will always retain their biological connection to the child they relinquish through adoption. "Relinquishing a child is an act of commission, not omission" (Baran & Pannor, 1990, p. 329).

Birthmothers may also have additional losses to grieve in their bereavement besides loss of child. Because many birthmothers experience pregnancy outside of marriage, they may be ostracized socially (Roll et al., 1986; Stiffler, 1991;

Weinreb & Murphy, 1988). Loss of family/ friend support and loss of home may be additional burdens birthmothers must grapple with in their grief work.

Grief work can be impeded due to the secrecy and underlying shameful experience of the adoption process for birthmothers (Lancette & McClure, 1992; Roll et al., 1986; Stiffler, 1992; Weinreb & Murphy, 1988). The overt secrecy and covert shamefulness of some adoption experiences can have a dual effect for birthmothers and their grief work. Secrecy can result in a woman repressing her grief and anger (Lancette & McClure, 1992; Stiffler, 1991; Weinreb & Murphy, 1988). Repressed grief and anger is often acted out in depression for women who are socialized to view outward expression of anger as a negative trait (Weinreb & Murphy, 1988). Furthermore, the secrecy of some adoption experiences abrogates a birthmother's ability to even share her grief and anger (Roll et al., 1988; Stiffler, 1991). Yet, anger is recognized as a stage/ paradoxical experience which needs to be negotiated for grief resolution.

Weinreb and Murphy (1988) equate the secrecy of adoption experiences for birthmothers with gay and lesbian individuals who struggle with "coming out" in relation to their affectional preferences. Secrecy can prolong the grief process and can result in a birthmother feeling splintered in regards to her identity -- a piece (the child) is missing and that piece cannot be shared due to secrecy and shame (Roll et al., 1988; Stiffler, 1991; Weinreb & Murphy, 1988). Ryneearson (1982) and Stiffler (1991) indicate repressed anger, guilt and shame may be manifested by birthmothers in gynecological problems, unconscious fear of sex, parenting issues of enmeshment and over-protectiveness, depression, social anxiety, abuse issues such as chemical dependency or eating disorders and increased fantasies/ dreams regarding reunion.

Issues of mistrust may be expressions of unresolved grief work for birthmothers who place their children for adoption (Roll et al., 1986; Stiffler, 1991; Weinreb & Murphy, 1988). Anger toward third parties such as family, health care workers, social workers and pregnancy counseling/ adoption agencies may be justified

if the birthmother was overtly or subtly coerced into placing her child for adoption (Roll et al, 1986; Stiffler, 1991). This anger towards others, justified or not, could manifest itself in the birthmother having difficulty trusting others. Anger may be self-directed toward the birthmother herself for her active roll in relinquishing her child. Anger may be evidenced in depression and self-destructive behaviors such as chemical dependency, promiscuousness and eating disorders. In their study, Millen and Roll (1985) also found that birthmothers had difficulty committing to relationships with others.

Lastly, grief work for birthmothers lacks any formal mourning rituals (Lancette & McClure, 1992; Weinreb & Murphy, 1988). As opposed to loss through death where organized rituals of wakes/ visitations and funerals exist, loss through adoption is devoid of any sanctioned vehicle to express grief. Until recently, post-adoption counseling options were not even available to birthmothers -- their experience was supposed to have ended with the placement of their child. Birthmothers were admonished to "get on with your lives" and "put this experience behind you" (Lancette & McClure, 1992; Weinreb & Murphy, 1988).

In summary, birthmothers relinquishing their children for adoption frequently deal with grief and loss issues during three stages: pregnancy, delivery and relinquishment and post-relinquishment (Rynearson, 1982). During each of these stages, a birthmother can experience feelings of loss requiring grief work conceptualized either along a stage continuum (Harvey, 1977; Lamperelli & Smith, 1979; Millen & Roll, 1985; Roll et al., 1986; Rynearson, 1982 ; Stiffler, 1992) similar to Kubler-Ross's stages for loss through death (cited in Lamperelli & McClure, 1992) or as paradoxical phenomena as cited by Brice (1991).

Within the literature special issues unique to loss through adoption are outlined for birthmothers in their grief and bereavement process. These unique issues are: 1) Is loss through adoption actually a loss since the birthmother "freely" chooses the option of adoption? This question is further complicated by socialized roles of women prescribed by our society and the social stigma of out-of-wedlock

pregnancies common to many birthmothers. Because adoption was frequently not viewed as a legitimate loss, any grief evidenced by birthmothers was labeled pathology. 2) The actual continued existence of the child can interfere with the "finality" of loss. In fact, a birthmother's feelings of grief and loss may intensify over the years because reunion, coincidental or searched for, becomes a greater reality as the adopted child reaches adolescence and young adulthood. 3) Additional losses of family, community and professional support systems exacerbate the grief already experienced by birthparents. Many birthmothers are isolated in their grief and loss. 4) The secrecy and shame of the adoption process itself often compounds a birthmother's grief. Secrecy both during pregnancy and the adoption process may repress a birthmother's grief and anger which are frequently acted out in depression. The secrecy often engenders feelings of shame which further isolate birthmothers and impede their ability to share and to work through their grief. 5) Anger and bitterness towards herself and third parties involved in the adoption process interferes with trust and keeps birthmothers stuck in their grief process and isolated in their experience. 6) No formal mourning rituals exist as vehicles to garner support from others and legitimize outward expressions of grief.

As a result of these issues unique to loss through adoption, grief can often be impeded or distorted with negative consequences for birthmothers. Negative consequences noted in the literature are increased fantasies or dreams of reunion or loss; somatic complaints; searching behaviors; decreased feelings of self esteem; increased feelings of depression, anxiety or anger; subsequent parenting problems; infertility and gynecological problems; relationship difficulties (i.e., shame and trust issues); and intense emptiness (i.e., aching to hold her child or personal experience of a void in her life).

IV. THEORETICAL FRAMEWORK

Theory contributes in understanding the effects of open adoption on birth-mother's grief and loss issues. Family systems theory operates from the premise that individuals are the core of an ecological system consisting of nuclear family, extended family and friends, social and employment situations and society at large. Boundaries between systems are permeable such that the behavior of any one individual can influence the behavior of others in the ecosystem. Open adoption experiences work at blending all family systems of the adoption triangle: birthmother, adoptive parents and adoptee in an attempt to "integrate the adoptee into the new family and to facilitate reintegration of the biological family after the loss of one of its members" (Bradbury and Marsh, 1988, p. 333).

Bowlby and Ainsworth (cited in Short-DeGraff, 1984) spoke of attachment theory as the emotional bond between an individual and its primary caregiver -- for infants, this is often the mother. For individuals adopted as infants, the primary caregiver is the adoptive parent. However, birthmothers have a biological and emotional attachment to the adoptee having carried the child through nine months of pregnancy and given birth. This emotional, biological bond of attachment contributes to a birthmother's grief and loss issues in addition to the actual loss of opportunity to parent.

The body of theory surrounding grief and loss is paramount in understanding the crucial area of resolution for birthmothers. Chapman et al. (1986) believe grief work for birthmothers entails the following four stages: 1) accepting the reality of the loss, 2) experiencing the pain of the grief, 3) adjusting to life without the child, 4) withdrawing of emotional energy from the child and reinvestment in another relationship (211-212). Oftentimes, attorneys, adoption workers, family and friends encourage a birthmother, particularly in confidential adoption, to "forget the child and get on with you life". The secrecy surrounding adoption could leave a birthmother permanently in a position of denying her loss, thus forfeiting her grief process.

The learned helplessness model of depression initially developed by Seligman and later revised by Abramson, Seligman and Teasdale (cited in Brodzinsky, 1990) also is instrumental in understanding a birthmother's grief regarding relinquishment of her child. The following is an explanation of grief and depression from a learned helplessness model:

Depression is linked to the experience of helplessness, that is, the feeling one has little, if any, control over the events (especially negative events) in one's life. Furthermore, the attributions that a person makes regarding their role in the events, as well as the nature of the events themselves, are seen as critical in determining whether a sense of helplessness and ultimately depression, is likely to emerge (Brodzinsky, 1990, p. 305).

Birthmothers who feel blatantly or subtly coerced into relinquishment through adoption and who have no input into the adoption process may be more likely in a confidential than open adoption experience to risk increased feelings of helplessness and, ultimately, depression.

Lastly, Chapman et al. (1986) speak of the concept of self-determination as a client-centered goal for social work practitioners. Open adoption would allow birthmothers to participate in their adoption planning rather than to rely on agency professionals to prescribe their experience. This active participation on the birthmother's part would affirm her right to self-determination and could positively impact all members of the adoption triad based on knowledge of family systems theory.

In recent years the advocates for open adoption assert that this process facilitates and validates the grieving process for birthmothers experiencing loss through adoption (Baran & Pannor, 1990; Blanton & Deschner, 1990; Chapman et al., 1986; Pannor & Baran, 1984; Sorich & Siebert, 1982). Open adoption does not eliminate the grief and mourning surrounding loss of child but does provide the birthmother with knowledge and reassurance of the adopted child's circumstances, realistic and validated expectations of the grief accompanying relinquishment and the opportunity to be an active participant in decision-making around the adoption

of her child (Sorich & Siebert, 1982; Watson, 1988).

According to the literature, open adoption may be most effective in dealing with some of the special issues of loss through adoption. Involving the birthmother more actively in the adoption process of her child has the dual effect of affirming her "right to self-determination" (p. 212) which in turn has helped increase self-esteem and increase her feelings of a right to grieve (Chapman et al., 1988, p. 27). Birthmothers will always have an emotional tie and attachment to their child, however, with relinquishment, they must mourn the loss of physical and psychological parenting of the child (Chapman et al., 1986). "For birthmothers in an open adoption, there need not be any fantasy families because the adopting family is a known entity and becomes the rearing and psychological family" (Baran & Pannor, 1990, p. 329).

Research Question

This qualitative research study with birthmothers who relinquished their infant in an open adoption will lend credence to the existing literature regarding stage or paradoxical phenomena within the grief process and will examine the impact of openness on the special issues of loss and grieving inherent to adoption. The research question being explored in this study with birthmothers is how openness in the adoption experience affected their grief and loss issues surrounding the voluntary relinquishment of their infant through adoption.

V. OPERATIONAL DEFINITIONS

Key variables and their operational definitions for this study are as follows:

Birthmothers -- women who have biologically conceived and delivered a child and voluntarily relinquished this child through adoption. Women must be at least one year, but not more than two years, post-relinquishment.

Open adoption -- an adoption practice which involves some degree of agreed-upon involvement between the birthmother and the adoptive parents. This involvement may occur during any stage of the adoption (pregnancy, delivery and relinquishment or post-relinquishment) or over the course of more than one stage of adoption. During involvement, the parties may respect confidentiality by not revealing names or may share identifying information. Degree of involvement along the continuum of open adoption is not specified for this study.

Grief and loss issues -- the physical, emotional and psychological responses to the loss of a child and parenting opportunity by a birthmother who voluntarily relinquishes her infant through adoption.

Voluntary relinquishment -- an informed, deliberate action neither coerced nor court-ordered whereby a birthmother decides not to parent her child and to terminate her parental rights thus allowing adoptive parent/ parents the opportunity to legally raise and to physically and emotionally nurture the child.

Infant -- a child under one year of age.

Adoption -- a legal action handled by a state-licensed agency whereby a biological parent terminates her parental rights and requests that an adoptive couple/ person parent the child.

The definitions of key variables in this study vary little from other studies except for conceptualization and operationalization of the child placed for adoption and the degree of openness in the adoption.

VI. METHODOLOGY

Research Design

The research design for this study will be exploratory in nature. Although there have been some past studies which have addressed post-adoption grief and loss reactions for birthmothers (Burnell & Norfleet, 1979; Harvey, 1977; Lamperelli & Smith, 1979; Millen & Roll, 1985; Roll et al., 1986; Rynearson, 1982; Stiffler, 1991). Weinreb & Murphy, 1988), only a few have attempted to explore the impact of openness on the mourning process in birthmothers (Blanton & Deschner, 1990; Chapman et al., 1986; Lancette & McClure, 1992).

A qualitative, naturalistic inquiry approach will be utilized in evaluating participants' experiences and outcomes in an open-adoption situation. Openness in adoption as a process will be explored by "focusing on the diversity" (Patton, 1987, p. 41) of responses by birthmothers interviewed. Units of analysis in the study will be individuals -- specifically birthmothers who voluntarily relinquished an infant in an open adoption experience. In-person, in-depth interviews will be the data collection tool utilized for this exploratory, qualitative study. Although only one method of data collection will be utilized, theory triangulation -- "the use of multiple perspectives to interpret a single set of data" (Denzin, cited in Patton, 1987, p. 60) -- will be used to guard against systematic error.

Subject Selection

The nonprobability sampling procedure of purposive sampling was utilized in obtaining a sample for this study. Purposive sampling was utilized because of the principal investigator's residence in Central Minnesota and her knowledge that only one of the three adoption agencies in her community was involved in open adoption. In an effort to make the study feasible within time constraints, a sampling frame of birthmothers who had participated in an open adoption of their infant through Caritas Family Services in St. Cloud, Minnesota from 1-1-91 to 1-1-92 was obtained from the population of all birthmothers utilizing adoption services through that same agency. Use of this specific time period in obtaining a sampling frame

was also considered with knowledge of grief and loss theory. Birthmothers having at least one year post-relinquishment would have experienced all anniversaries in a one year period from time of her child's adoption. Grief and loss theory also indicates that grief resolution can take upwards of 12-36 months. Presumably birthmothers in this sample frame will be able to address issues related to grief and loss issues because they are within 12- 24 months post-relinquishment.

Because of the limited number of adoptions through Caritas Family Services on a yearly basis, random sampling of the sample frame of birthmothers was not considered. Instead, in an effort to increase representativeness and ability to generalize from the data gathered, all birthmothers relinquishing an infant under one year of age during the above-mentioned time period were to be included in the sample frame for the study. Fourteen birthmothers met the operational definitions for this study, however two of the birthmothers were eliminated from the study because of geographic location on the west coast of the United States. In-person interviews with these two birthmothers were not feasible due to time constraints and expense.

Data Collection Source

Data collection was accomplished via in-person, in-depth interviewing using a combined approach of a standardized, open-ended interview tool and informal conversational probes to add depth and clarification to birthmothers' responses. Standardized, open-ended interview questions were utilized because each birthmother was to be interviewed only once and for a limited time of 1 to 2 hours. Standardization in the data collection tool also was hoped to reduce interviewer bias and effects on the birthmothers.

Instrument Design

The standardized, open-ended interview questions were developed to progress through stages of adoption as identified in the literature: 1) pregnancy, 2) delivery and relinquishment and 3) post-relinquishment. In addition, the tool was designed to include the following types of questions: 1) experience/ behavior

questions, 2) opinion/ belief questions, 3) feeling questions, and 4) background/ demographic questions.

Sequencing of questions was also considered with background/ demographic information being asked last to minimize the principal investigator as "nosy and intrusive." Conversely, the principal investigator began the interview with an open-ended question inviting the birthmother to ask any questions of the principal investigator.

The nature of the interviews was very personal and potentially emotionally-charged. With this knowledge, the interview tool began with questions requiring more experiential information to build rapport with the birthmother before asking more feeling questions. Interview questions were relatively extensive, encouraging substantive replies.

Verbal and written permission to audiotape the session was obtained from each birthmother prior to commencing the standardized questions. Each audiotaped interview was later transcribed with the knowledge and consent of the birthmothers. Audiotapes and consent forms were kept in a locked file in the principal investigator's home and will be destroyed following oral presentation of this research proposal for her Masters of Social Work degree. No one other than the principal investigator has access to identifying information of birthmothers agreeing to participate in this study. Please refer to Appendix D for a copy of the interview questions.

Contact of Subjects

Birthmothers were initially contacted by mail with a letter from the principal investigator explaining the nature of the study and selection process of potential participants, guaranteeing confidentiality if agreeing to participate, outlining risks and benefits to the participants and inviting them to participate in this research. A follow-up letter was mailed two weeks after the initial letter with similar information but an extra directive to discard the letter if an interview was already accomplished/ scheduled or if they had already decided not to participate.

In order to ensure anonymity of the sample frame of birthmothers, Caritas Family Services did the mailing of both the initial and follow-up letters to all birthmothers. Only those willing to participate in the research returned a note in a post-paid, self-addressed envelope to the principal investigator. Consequently, the principal investigator knew the identity of only those birthmothers in the sampling frame who agreed to participate in this research study.

Ethical Protection

Included in both the initial and follow-up letter to the birthmothers was a copy of the consent form for informed participation in this research; a reply note -- if willing to have an interview scheduled -- indicating their name, address, telephone number and age; and a self-addressed, stamped envelope for return of the reply note. On both the consent form and the reply note, a comment was included informing potential participants under age 18 that parental consent would be required before an interview could occur.

Analysis

Analysis of the qualitative data obtained in the research study was a two-part process of organizing the data into patterns, themes, categories and descriptive units and then interpreting the organizations of data by explaining themes and recognized patterns.

This reporting on patterns, themes and concepts would substantiate findings within the literature review, but would also be sensitive to new and/ or contrary organizations of the data which would either refute previous findings or add to new perspectives on the research subject.

Specifically, the principal investigator utilized a content analysis of the data. Patton (1987) described this process as "identifying coherent and important examples, themes and patterns in the data" (p. 149). In this research study using standardized, open-ended interview questions, an initial step was to review data pertinent to each question and pull together similar themes, quotations or patterns.

An inductive analysis of the data guarded against the principal investigator

fitting data to prescribed themes and patterns. Themes and patterns identified from the data which matched preexisting findings from the literature review were reported as such with use of similar labels. Categories of data which emerged and seemed unique to this study were described and labeled at the prerogative of the principal investigator for the reader to best understand.

Categories of data established were constructed to meet two criteria described by Patton (1987): 1) "internal homogeneity" -- meaning that data in a particular category "hold together or 'dovetail' in a meaningful way" and 2) "external heterogeneity" -- meaning that "differences among categories are bold and clear" (154).

VII. PRESENTATION OF FINDINGS

Description of Study Subjects

Initially, five birthmothers from the original sample frame of twelve returned reply notes to the principal investigator consenting to contact regarding an interview for this study. All five birthmothers were contacted by telephone by the principal investigator and did agree to an interview. Dates, times and location of the interviews were scheduled at the convenience of the subjects. Two of the subjects requested a neutral location for the interview which was arranged; otherwise the remainder of the interviews were scheduled at the subjects' homes.

Four of the five scheduled interviews were completed. The length of interview time ranged from 1-1/4 to 1-3/4 hours. The fifth interview, although scheduled, did not occur as the subject was not present at the prearranged time and place for the interview. The principal investigator waited 45 minutes past the appointed hour of the fifth interview and also attempted follow-up calls to the subject to ascertain if scheduling was a problem or, if indeed, she had decided against participating. After numerous unanswered calls at different times, a message was left on the subject's answering machine encouraging her to call the principal investigator collect if interested in re-scheduling an interview. When no response was received, the principal investigator ceased further attempts to contact the subject feeling anything further would be harassment.

Of the four birthmothers interviewed, all were Caucasian and ranged in age from 18 - 24 years. The birthmothers currently resided in central and south-central Minnesota. Three of the four birthmothers were currently attending college. One was currently employed full-time with an Associate of Arts degree plus one year at a four-year undergraduate college.

Only one birthmother had been of minor age (17) at the time she delivered and placed her child for adoption. Time elapsed from placement of their children for adoption and this interview ranged from 16 months - 24 months. Of the four birthmothers, only one had contact with and support from the birthfather during her

pregnancy and placement experience. This was the first pregnancy and first-born child for all four of the birthmothers.

All four adoptions were open adoptions, however the degree of openness varied for each birthmother. All four of the birthmothers chose the adoptive parents from Caritas Family Services' files and met with the adoptive parents. Two of the birthmothers met the adoptive parents within days of relinquishing their parental rights; two of the birthmothers met the adoptive parents prior to relinquishing their parental rights. One of the birthmothers met with the adoptive parents prior to delivering her child. Two of the birthmothers met the adoptive parents only once; two of the birthmothers have had additional contact with the adoptive parents and their biological child since the adoption. All of the birthmothers continue to receive pictures and written correspondence at least yearly from the adoptive parents regarding their biological child.

Reasons for Choosing Adoption

Birthmothers had a number of reasons for considering adoption for themselves and their children with several common themes. All of the birthmothers offered two reasons for deciding on adoption for their pregnancy outcomes: 1) there was no father figure for their child or they didn't know the father of their child well enough to expect support in parenting and 2) all had personal goals to achieve -- attending and completing college. For these birthmothers, the personal goal of attending college was important but so was the parenting of their children. Several birthmothers expressed the value of two-parent families for their children in considering adoption. Three birthmothers stated they were not emotionally ready to handle the responsibilities of parenting. One of the birthmothers stated that her parents had offered to care for, "parent" her child until she completed college, but she felt it would be an injustice to her child: "I wanted the child to have one mother and not four years later, after I was done or two years later, to come back and say 'Now I can be a full-time mom.'" Two of the birthmothers stressed that financially they were not prepared to parent. One birthmother specifically stated, "This (adoption) was

right, because like I couldn't... and I just don't want to bring a child up on welfare."

Reasons for Choosing Open Adoption

Reasons for choosing openness in the adoption process varied somewhat for each birthmother, but a basic theme of control prevailed throughout their statements:

You have more control instead of saying, "Well, this is what I want for my child," and then leave it up to someone else. You really are the deciding factor. Because I wanted the child to have things that I couldn't give the child but yet, some of the things that if the child was with me, I wanted the child to have. The type of parenting I would have wanted to do I wanted the child to get...

I think it all stems down to the fact that I feel that I have a say. Maybe I feel that I'm not just blindly saying, "Here, take the child -- whoever wants the child." It made me feel that I had the power to say, "This is the family that I would, if I had a choice, this is what I would like to be able to give the child."

Several of the birthmothers reported that being able to pick adoptive parents from agency files, to look for characteristics which were important to them, in addition to meeting the adoptive parents were important factors in considering openness in their adoption process:

I could pick out the couple. You can even chose to meet them and that kind of stuff.

I liked it better because I could pick the parents. Got to meet them which really... it helped a lot. Made it easier that way.

There's no way I would just Here, I don't know you (adoptive parents), but I've read things about you. I needed to meet them.

Lastly, birthmothers reported that openness in the adoption process allowed them knowledge of their child's well-being after the relinquishment of their parental rights:

I just couldn't imagine not knowing where the child was going or what the child was doing or who the child was with.

Through the whole thing, it has been really good that I know where the child is-- or not exactly where the child is, but I know the child is happy and I know the child is healthy. I just know so much!

During Pregnancy

Feelings about pregnancy and being single

Birthmothers expressed the following feelings about being pregnant and not

married:

It was hard being pregnant and single. Especially in _____ County, because I grew up in the Cities (Minneapolis/ St. Paul) and you would see single mothers all the time. But here it is frowned upon. It was really hard. I had to put up with the comments people say and just deal with it.

I thought it was wonderful experience. I loved being pregnant. I just felt like, um, I didn't have a ring on my finger and things like that. It's such a I think of them as a conservative little ring of people in central Minnesota. My parents -- I love them to death -- but they just couldn't understand. My older sister had a baby and wasn't married and why didn't I learn from that? I was just embarrassed to go to family parties and stuff.

Feelings about themselves

Birthmothers expressed feelings about themselves in relation to their unplanned pregnancies:

I made a dumb choice (an unplanned pregnancy) but I guess I was lucky that I was well-thought-of in my community. So, it was like it was shocking to a lot of people, but people were very supportive. I come from a small town and it could have gone totally either way where you could have been out.

I know I was very crabby and I didn't even notice that I was. But, I was in such turmoil ... And when I had my low times then that's when I'm blaming (other people and circumstances).... Sometimes I was just down. "Why me? Why does everything bad happen to me and stuff. It's not fair," And feeling sorry for myself, pretty much.

Two of the birthmothers spoke about a spectrum of feelings during the time they were pregnant:

How far into it (pregnancy)? It (feelings) changes from the beginning to the end. Definitely in the beginning you don't even believe it... Scared, of course. And you really don't know what you're going to do: either to parent or to place.... I thought for sure I was, you know, that they (parents) were going to kick me out of the house or disown me or something.... A little, I felt guilty -- definitely, definitely. The guilt was about being pregnant; for letting that happen.

I was kind of disappointed in myself that this (unplanned pregnancy) had happened to me; that I had let it happen. But then afterwards it was... after a couple of months, after I just kind of "This happened. This is me." I'm happy I didn't get an abortion. This (adoption) is what I'm going to do and I feel good."

Feelings about unborn child

One of the birthmothers expressed the following feelings about her unborn child and her decision-making process during her pregnancy:

I would talk to the (unborn) child at night... I really felt this intense bond to the child...And I had pretty much decided before I had the child that I was going to place the child, but it would be a month of this and then a couple weeks of, "No, I'm going to keep the child." It was back and forth.

Source of support

When birthmothers were asked what or who was particularly helpful to them during their pregnancies, the two most prevalent answers were family/ friends and their pregnancy counselor through Caritas Family Services:

My sister and my dad...She (sister) was very helpful. She was just like, "Forget what everybody thinks. Just, this is you. This is what you're doing. You should be happy with your decision." My dad was helpful. He tried to make me eat right.

There were a lot of people throughout. Some people were more important in a different stage. Like in the very beginning my best friend was very important to me. She was the first person I told about the pregnancy...And then after my family knew, they were my main support. Then, also getting involved with _____, as my counselor was a major support.

Probably my family and friends...It really, really helped once I told my family.

Oh, I would have to say _____, my counselor. When I first met her, I didn't like her at all....So, she was very realistic at first and put it all down in stone. And I was mad....And then I don't know what actually happened that I just had a total change about halfway through my pregnancy.

One of the birthmothers identified her boyfriend, her child's father, as a support throughout her pregnancy, but was able to delineate different feelings toward his involvement during her pregnancy:

The first three months were just, "I don't want anything to do with him." He was showing an interest in his old girlfriend, but only in my eyes. I was just putting a lot of things into my head that weren't true about him, and just almost, I think I was blaming him a lot. And, "Why aren't you helping me?" And I had to go through all this stuff. And after my first exam (prenatal physical), I was just, "Look at me. Look at all the things that are happening to me. And nothing is happening to you. It's not fair." And feeling sorry for myself, pretty much.... Our relationship-- I don't think anybody else who's not married can understand what kind of emotional ties we have together. Towards the end, we were meeting the parents, we were just doing so many hard things together. And both of us leaning on each other....And I don't think that any single person who's not married can understand the ties that we have. But then this fall (approximately one year after relinquishment), we kind of broke it off for a while. We're seeing each other again now. We needed a break.

Lack of support

When asked if there was anyone or anything that was unhelpful or hurtful to the birthmothers during their pregnancies, three out of four indicated that the father of their baby had abandoned them after learning of their pregnancy. This was a very devastating blow to the birthmothers involved:

Probably just the father because we had been going out for over a year, and when I was about three months pregnant, he just left... I guess that hurt, and it took a long time to work out. I can't say that I'm through it yet (one year and eight months post-relinquishment) just because I know I'm not. But, to get to where I am, I had to accept it and life goes on. I'm pretty much over it, except once in a while, it messes me up emotionally.

Oh sure, my baby's father. Definitely a sore part throughout the pregnancy. In the beginning he was there, not geographically he wasn't, but he was excited about it (the pregnancy) and thought he would come and we would tell my parents together... But I waited for him to come and he stopped calling and writing... He didn't come. So then I knew that I was on my own; so that it hurt and everything....

The father. He was kind of mean.... He told me what he wanted me to do, but that wasn't what I wanted to do. He told me I should get an abortion. I said, "Nope." Then he said, "There's the door." And I said, "OK." And then I went out the door.

One of the women spoke of her initial, perceived lack of support from her parents. In her parents' attempt to be neutral, the birthmother felt totally adrift regarding her pregnancy decision-making process:

Um, my parents. And they never wanted to say either way. They just took neutral -- "I'm (parent) not going to tell you if you're doing a good or bad thing, because I don't want you to come back to me and say, 'You told me to give this baby up for adoption. It's your fault.'" Which is fine. I can see their point now, but at the time I was like, "Give me some feedback. Tell me, tell me what I'm doing is good (adoption decision)." This is I got this (reassurance) from my boyfriend. The reassurance. Because they (parents) would not tell me either way; which was very hard...I, just this last year, have things just kind of smoothed over. I didn't want to go home at all.... And now it's very good again.

Agency/ counselor contact

All four of the birthmothers had contacted Caritas Family Services while they were pregnant regarding decision-making and adoption options. Initial contacts with the agency were made by the four birthmothers between three and six months into their pregnancies. All birthmothers were unanimous in their positive response to the

pregnancy counseling/ adoption agency (Caritas Family Services) they worked with and, particularly, the counselor they worked with:

She was wonderful... She was helpful in that she treated me like a human person with feelings. Not the old, "Once your baby is born, out and that's it. You don't see her (counselor) anymore".... She took the time and said that, "Anytime you feel you need to talk to somebody, you call me." She still is that way, too. So, I can still call her. And I still keep in touch with her. (one year and four months since her relinquishment).

She was a really nice person and, um, really easy to talk to. They bring you through all this stuff, of either parenting or adopting, even though I was there for the adopting. Just to make sure that you were making the right decision....

It really helped see the realities besides just your emotions... _____, my social worker, she is great. I call her now and just talk to her or she'll call or whatever.... (one year and eight months since relinquishment). She was very helpful just letting me talk, and work through a lot of things that I hadn't worked through yet, just because I was in denial for so long.....

Contact with adoptive parents

Only one of the birthmothers had contact with the adoptive parents prior to the birth of her child. She felt the contact prior to delivering her child was helpful:

Um, I wasn't comfortable with, um, meeting them (adoptive parents) after I had the baby because I wanted to be just sure. And I don't like foster homes. I have a really negative view (of foster homes). I don't know why. Just because I think that's where seventeen year olds go when they get kicked out, and kids who are unwanted go there. I don't want to think about my baby as unwanted... So, I wanted the child placed as soon as possible. Which I was very happy that that happened. And that's why I wanted everything set. So the child could go right there... And we (birthmother and birthfather) both were really nervous (about meeting the adoptive parents) and then he (birthfather) finally said, 'We're judging them. They're not judging us. It doesn't matter if they don't like us...' And still I had the thinking that they're just going to come over and smooze us. You know, say what we want to hear -- that kind of thing.... I guess I really had read all their things and we kind of knew what they are. And how much money they made. I mean we knew so much about them... And then to meet them was just incredible. And then we talked and so many things we had in common.

When asked if there was anything difficult or unhelpful in meeting the adoptive parents prior to delivering her child, the same birthmother replied:

I can't Not really. I think they wanted to come to the hospital and be there (when the birthmother delivered). And that was my time. And I was kind of offended by that. There were things like that. And how open we would like to be and all those things came up at that time, too. Like, "Do you (birthparents) want to come to our house (adoptive parents) and see the child?" I thought,

"No, the child needs to grow up in and grow up with these two as parents. And not me in the way as another confusing factor."

Delivery and Relinquishment

Feelings about the child after delivery

Immediately following the birth of their children, birthmothers reported the following feelings about their children:

That was like incredible. I don't know if there is a way or words to describe that feeling. I was so confused. I didn't know what I was going to do then. It's amazing you can fall in love really quickly with just that really tiny, innocent. It was just this intense, oneness feeling. This is part of me. It was really so real.

That was really exciting. It was a really neat experience. And I couldn't have loved the child any more so, um, I didn't think of losing the child at that time. That wasn't even a thought that crosses your mind. You're just so involved with, you know, this baby that's looking at you.

I think I was more like just wanting to get the child out! (deliver the baby). I did look at the child... Look the child's got.... There was just.... It's hard to describe that feeling, but that's my baby. The child's got ten fingers; ten toes; the child's crying. It's OK.

It was just incredible. This was so realistic now. Here the child is.

Feelings about themselves after delivery

Birthmothers' feelings about themselves following delivery were reported as:

I was an emotional wreck! I knew deep down that what I was doing was right (adoption)... I felt I had done everything I needed to do to get to be able to make a logical decision....

I was really proud and I thought, "Gee, you know, I had something to do with this miracle that was right there."

I was terrified because I was early (premature birth). And so I'm thinking, "Is everything going to be OK with the baby?" And I was thinking, "What's going to happen to me?" These were the feelings inside. At that point I probably didn't care what my feelings were. I think they were really good (feelings). I was really good.

Feelings about their adoption decision

In relation to their decision regarding adoption for their child, birthmothers stated the following feelings existed after the birth of their child and during their hospital stay:

I was kind of leery then. I just had second thoughts, but I knew that -- I still inside myself -- that I was, this was right (adoption). This was right because, like I couldn't; I just don't want to bring a child up on welfare. I just don't.

I wasn't really as prepared just because I was early (premature birth).

And I never, ever second (guessed) ... well, while I was in the hospital, keeping the child never crossed my mind at all. Which I thought was strange. But it did when I got home.

Contact with adoptive parents during hospitalization

None of the birthmothers opted to have contact with the adoptive parents at the time of the birth of their children or while they were hospitalized. The following are reports of why contact at this time was not sought:

None. I think it would have made it really confusing, I guess. Especially if I had talked on the phone, because phone impressions aren't that great. So, it would have, maybe, totally changed the course of things. It was good to have the time to work through it (adoption decision) myself, and not have to deal with anyone else. I mean right up to the last day, it was my prerogative to change my mind. You can do it (change your mind). I mean, you sign the paper (direct surrender), but you have the right to change your mind (for ten working days).

No. I think they (adoptive parents) wanted to come to the hospital and be there. And that was my time.... And I just, like the time we (birthparents) spent with the child was just -- like the child didn't sleep in the child's crib, in the (bassinet) at all. The child was with us the whole time. And at one point, I was rocking the child and _____ (birthfather) had left, which was a hard time, because he had to work on Monday. And I was rocking the child and crying and just like talking to the child. Which was extremely important to me that, "I love you." And that kind of thing. That I needed to do. And it was almost nice that _____ (birthfather) was gone, too. I needed that time. And I had all the hormones, thing, too. It was very hard.

Feelings about hospital discharge and foster home placement

The birthmothers identified the following feelings about leaving the hospital, about the agencies' involvement at the time of discharge from the hospital and about their children going to foster homes:

The third day (day of hospital discharge), of course, when she (counselor) came and I knew that was the day that I had to say good-bye; then I wasn't really happy to see her (counselor). But, I knew that was what she was there for... I had decided before the child was born that I would leave the hospital first. Um, I didn't ever want to look back at that time and say they took the child while I was still there.... Because I think that, looking backwards, was the hardest thing; was leaving the hospital and having nothing... Because it's even hard to see

it now (birthmother has occasion to be at a hospital). You know, even watching those ladies stand out with their little car seats. You know, "You're (other women) going home with your baby." It's two years and it is still tough.

It was really hard but I knew that I could see the child because the child would be in a foster home. So, it wasn't really that hard, but it was hard enough because the child stayed in the room (hospital) with the social worker and we (birthmother and family) left. And it was really tough. I just, I like, it was weird. I go through all this and I'm leaving with nothing. Ya, it would have been harder to see the child go out the door. It made me feel like, that, I'm choosing to give the child up. So, it was just easier for me to walk out first.

And they (hospital staff) came in and took some last pictures, and I had to do some signing, which was very difficult. I think I signed permission for them (Caritas Family Services) to take the child out ... I didn't want to take the child out of the hospital. I left first, and then, they left with the child.

Well, right away I was like -- when they took the child away from the hospital to the foster home -- I was just like I wanted the child home right away. The first day (after the child went to the foster home) I just bawled. I bawled all day long. It was really incredibly sad. Yet, once I got my head on, even going to see the child the first time (at foster home), leaving the child the first time I saw the child was not so hard, because I knew I could see the child again (at foster home). It was the realizing that someone else could make the child happy, too. Because, someone else could take care of the child, and he would be OK. And that was pretty helpful, too, in being able to decide (on adoption).

Feelings about finalizing adoption plans

Birthmothers shared the following feelings they experienced after the birth of of their children, after leaving the hospital and as they worked on finalizing the adoption plan for their children:

I went and stayed at my dad's house for a few days. I didn't go back to class (in college). I took a week off of school. Otherwise, I just kind of sat around the house. I wasn't the same person. I was just, kind of, not full of energy... I wasn't the active self I was. I would just kind of sit around and wouldn't say much. I wouldn't even fight with my sister. I would just sit there. I would study, yet most of the time, I don't know... I just wasn't me. I'm always on the go. Got to do something. Got to be busy. Talking a mile a minute.... I just kind of, hanging around; and then finally it just, I don't know, I just snapped out of it. And after a few days I was, felt good about it (adoption decision). Went and saw the child at the foster home (about a week after leaving the hospital). That made a difference, big difference... Because to myself, I didn't know if I was ready to go and see the child. And then, I really wanted to, and it was really good. I got to hold the child and feed the child and change his diapers. Do all that stuff. I did have second thoughts at that time. I was really tempted to call and say, "Forget it. The adoption's off. I want to take the child with me." That was the first couple of days, but then after that I'm thinking, "Hey, come on now, this is the real life and are you ready for this? Can you do this?" I mean, to myself I couldn't do it

(parent). There is no way. And I was in school and I didn't know how far I was going to go with that -- where I wanted to go with my life. And I was living with my (relative) at that time, and I would have had to find a place. And I thought, "I will not go on welfare." That was the big thing, and it was like, I will not go on welfare. And I want the child to have a good family to be with. A brother, or a sister, or even being an only child and possibly having them adopt again. But have two parents. He needs both figures. And then part of me thought, "Well, I can always have kids again sometime, too. These people (adoptive parents) can't...."

That next week (after leaving the hospital) I just, I could be just sitting on the couch and start crying, kind of thing. And then Friday came along; and, for some I don't know why, when we got there (foster home) the child looked totally different. Which in my mind; like, this is the beginning of change, and the child is changing and it's not what I saw in the hospital. It's time to let go. So, it was that aspect that made it so much easier for me. Just because the child had looked so much different... So, we went, let's see, we taped like our statements and did all that signing which was very emotional and signed all the papers (direct surrender for adoption) and had the public notary and all that, and then we went to the foster home and said our good-byes. And that was very hard... I think I just wanted to put it out of my mind. Then that next week is when I -- I want the child back! That was my time I needed to have the child back. And I called _____ (birthfather), and I said, "Are you sure we made the right decision?" Kind of thing. And I knew that we had those five days (prior to actual termination of parental rights)... And I just, I just needed her back... You know that this is the right decision (adoption). And that just, people just need to tell me realistically what the actions are. And _____ (birthfather) helped me through that, too.

Right at first it was just total, total confusion. I had no clue of what I wanted to do then. I was very sure going in (prior to giving birth); but, the minute I had to say good-bye to the child the first time, it was like it was an explosion of feelings. That was probably the worst moment of the whole thing (saying good-bye at the hospital). So, I don't know, that first week was pretty tough. Just kind of going to see the child the first time (at foster home) was probably one of the most helpful things because to reaffirm everything. I don't know, it was really just seeing the child being so well taken care of by someone else. I mean, I think it's that feeling that no one could possibly care for the child as much as I do. And, I guess, that made me realize that these people (foster parents) were so giving. They had six adopted kids of their own, and they treated the child like their own. And I was just like, "Wow, these are really good people." And I had to have faith that the people I chose (adoptive parents) would be as good, if not better. It was a good time then (at the foster home) to have my time to say good-bye, and yet, not have to really have to give everything up yet and being able to work through all the feelings. I got to the point where I knew it (adoption) was the right thing to do, and it was the best for all of us. And it was really hard. And, should I change my mind? And it was like, "What if, what if...." I guess it was good when I finally knew and the decision was made (parental rights were legally terminated). And then, I think after I finally met them (adoptive parents), is when the content really set in.... When my (parental) rights were finally terminated for real it was kind of a relief. Almost that I... cause I knew all along that was what I was going to do (adoption), and wanted to do, and what I thought was best.

Contact with adoptive parents after hospitalization

All of the birthmothers opted for the opportunity to meet the adoptive parents although these meetings took place at different times in the adoptive process. For some birthmothers, the meeting with adoptive parents occurred while their child was still in foster care, but shortly after parental rights had been terminated:

They (Caritas) said I had the option to met them (adoptive parents) and asked me and I got a sheet of options that I could pick (regarding that meeting). I wanted to meet them. Okay, so they said I could meet them. I'd like to know where the child's going with these people I really like. And it would make it a lot easier knowing what (family) the child's going with. So I checked that, and they (Caritas) set it up right there in their conference room. Because they (adoptive parents) don't know where I live and I don't know where they live. I do know first names. They (adoptive parents) came in to meet me, because they were still working on their paperwork. My paperwork was done. I was really nervous. I don't know why. But I was just really nervous. And I had gotten hospital pictures (of the child), and I gave them one of those ahead of time. So, they were pretty excited about that. I think they were just as nervous as me. I really don't why I was nervous. It was probably like, probably the one thought going through my head was, "Did I pick the right parents? What happens if I don't like these parents? Can I chose somebody else?" But I didn't (have to chose anybody else). When they walked through the door, I really had a good feeling. They both gave me a hug and I thought, "Well, that really helped." I just thought, "OK, these people I like."

I met them (adoptive parents) the day they got my child. We had a meeting in a neutral place and had _____ (birthmother's counselor) and their (adoptive parents) social worker there. My family came with me. And we were there, and they walked in. And it was just like the weirdest thing, because we both just looked at each and it was this total feeling that this was right. I think everybody started crying at that time. It was really neat. I talked to them for about an hour alone and got to know them a little bit. They are just really neat people. We hit it off right from the start, and so, that was very encouraging. My child was still in foster care; and they, the foster care people, brought him. I took 5-10 minutes when I had the child and I just talked to the child and just walked around and that was just the neatest thing. When I brought the child in, everyone was just ga-ga. I brought the child, and I handed the child to them. And it was really a neat thing, because the child had taken hold of my hair and the child wouldn't let go. And it was just like, this really -- we were all there, and we were really neat because they hugged me and they were just so excited. And I thought that it would be so incredibly hard, but just to see how happy they were--just I could just tell they were going to give the child this incredible life just because they are just really so wonderful. It was so exciting and so sad. And they (adoptive parents) were sad and happy, and we were sad and happy and just depended on which side you were on. But, you could totally feel for the other people, and I think that was really a neat thing and a good experience to do that. And we just stayed and my family was there and they came in and we talked. It was really sad to walk away (leave the child) and yet, I think it was like a contentment knowing that it

was going to be OK.

Post Relinquishment

All birthmothers have had some degree of contact from the adoptive parents since the adoption. This contact has ranged from receiving letters and pictures (usually exchanged through Caritas Family Services), to actual meetings with the adoptive parents and child. The following are reports of how these contacts have affected the birthmother in regards to her feelings about the adoptive parents, her child, her adoption decision and herself:

Contact via letters and pictures

I made the child a baby quilt so I wanted the child to have that; and on his birthday, I sent the child a birthday present. And I sent the whole family a Christmas present because they're just wonderful. The first year I had set up a letter and pictures every three months. And now I'll get them every year. So... And she (adoptive mother) writes really nice letters....I mean, she'll send stuff to me even when I'm not supposed to get it. So, that is really nice. When she writes them (letters), it sounds like, you know, it's both of our -- it's our child together. I'd noticed that. I didn't think they would do that -- she would do that. But that's the way she does it. She always puts like, "I'll take care of our little child." So, that's kind of neat. It (contact with the adoptive parents) was really helpful, a lot. Because I knew the child was going with a good family. It wasn't like, I wouldn't still be wondering, "What are these people like? Did I make the right decision? Are these nice people? Is the child going to be happy with these people?" It really did help.

You just can't even believe how much I look forward to these (letters and pictures)....It's just so amazing to see how much the child looks like us, and the things the child is doing, and... Like she (adoptive mother) asks like, "Well, did one of you two like bananas? Cause, the child goes crazy over bananas and pasta and things like that." Little things that we (birthparents) might have done, too. Just to know what the child looks like, and how the child's doing, you know. It's just not something that it's in the back dungeon somewhere. Something that is real. The realistic is better, I think. Than just forgetting. *[During her pregnancy, this birthmother's parents shared negative feelings regarding openness in adoption]* : My dad to this day doesn't even talk anything about that (adoption). Doesn't want to see my pictures or my updates. It's (openness) just a very hard thing for him to understand... (father would say): "Just close it. Why do you keep drudging this back up? Why are you keeping in contact?"... My mom thought, "Why would you want all this? It's just.. You're just going to make yourself worse. Why do you want pictures? Why do you want to know what the child is doing? Why don't you just end it. Forget about it. Put that in your past and go on with your future."

However, this same birthmother set limits on the degree of openness she felt was

best for her following relinquishment:

No, they (adoptive parents) wanted to meet us again. And _____ (birthfather) didn't want to. And I was kind of; kind of mixed feelings about that, too. Just, we were having a hard enough time just accepting it all, and we didn't want to... I think it would have been really hard to see them again and see how happy they were and... I know they are happy, but it just would have been-- it would have been just a set-back, I think, if we would have met with them again. And they very much wanted to.

Feelings of living without their child

Birthmothers also shared some of their feelings of living without their child since the adoption:

It's not an everyday thing (missing the child), you know. I had -- since it was just the child's second birthday, that was really tough. But, for a long time it was OK. Of course, there are days you've missed the child, and.... There are times, as much as I really enjoy our relationship together (on-going in-person contact), that--I've talked with my sister about this quite recently, a couple of times -- if people would have just talked me out of it. You know, what it would be like if the child were here. I can say that I've never regretted my decision, and I never have and I never will. But, there are times that you wish you were still pregnant. Definitely, it's hard. Even seeing the child is hard, too, just as much as I enjoy it, and I wouldn't give the child up unless they (adoptive parents) asked me to. But, you think what the child would be, of how the child would be different if the child was with you, or.... And they have the child everyday, and I don't, and that's tough. That's something that's hard to deal with, too. It's not so much this year (second year since relinquishment) as it was last year. I would often go to _____ (counselor) and say, "I hate these people (adoptive parents). They have the child and I don't." My big thing was in my heart I hated them because of that; but in my head, I really enjoy these people. They're really nice. I couldn't have picked better parents for the child. But your heart and your head ever clash. Especially that first year.

It's like so many moments. Overall I feel good about what I did so it doesn't bother me. But, I'll be sitting in church or be in a grocery store, and I'll see a little girl or boy about that age or just kids in general, and I see them more than I ever would have before. It's that whole "what if" thing and sometimes, I guess, there are moments/ days when it gets me down. But, overall it's really not. I feel like I have gone on with my life and given myself what I have always wanted. And, at the same time, the child has gotten a really good thing, too. It's good. I have to make myself think about the good things when I'm having those days.

Actually, it hasn't been really bad. It's just.... I think about the child, you know. I think about the child, but I've gotten on with my life, because I know the child has a new life there and a new family. And I've pretty much got on my way. I think

about the child--it's not that I don't think about the child. But, I've just sort of gotten on with my life and doing other things. But, "What would it have been like if I would have kept the child?" But, that kind of goes away and then I think of all the things I want to do yet. And then it's like, "I would never have gotten to do all those, so....."

Um, for months after, I felt in my stomach the child still there. Which was very strange. Like I was still pregnant. Like this never happened, kind of thing. Which was, for me, very bizarre. But now, next door there is a couple who -- she is a single parent, and it's just in my face, kind of thing. Like she comes over here, "I can't stand this (parenting)." He's (the single parent's child) at day care all day. She's not really Sounds like she's not really taking care of him. And that's so.... Wow, this is me. And just everything I hear reassures me, because she's had a baby; she's just in a terrible situation now, too.

Physical/ behavior changes

When asked if they had experienced any physical or behavior changes since the adoption and living without their child, several of the birthmothers made the following comments:

The only thing I noticed is I can hear any little noise... My grandma would get up in the night, and my room is far away from her room. I would wake up, and get up and go down. And I'm always a hard sleeper. I've gotten out of that.

I was still going to the birthparents' support group that we had to (go to). I remember some of those days where I did feel like a totally different person... very bitter and angry. I just wouldn't take anybody's bullshit. You know? And I was always-- normally I'm a very quiet person who'll take a lot of things. But, I just didn't want to deal with anybody else's stuff. Don't lay anymore on me, because I have enough. And I was pushing a lot of people away. A lot of my friends I just really lost contact with. I didn't want to deal with a lot of people. Much more bitter, I think, at life in general. In the beginning those days are a lot closer together and more of those days that are real rough. But, as you get farther and farther away from it (relinquishment), the time that you hurt like that gets farther and farther apart. A little bit easier to deal with emotionally and rationally. It takes a lot of energy.

Fantasies/ dreams

Birthmothers were asked if they experienced any fantasies, daydreams or night-time dreams about their child or their adoption experience in general since the adoption:

I have both. I have had night time dreams and day time dreams. I remember that first year, too. I have had the dreams where -- this dream is so vivid that I remember this one -- that we are all together (adoptive parents, child and birth-mother), all of us in one room, and they say, "Here, we can't take care of the child anymore. The child's just a brat!" And I'm just like, "Oh, OK. Of course, I can

take care of that." That dream, I just really remember that. Because, I guess, that was maybe a fear of mine, too -- that the child wouldn't be as perfect as I think the child was so perfect. Of course you think that, you know that, the child wouldn't be perfect, because nobody's perfect. That they (adoptive parents) wouldn't be able to understand it as well as I would be able to understand it. My daydreams, well even today, just as a family you just think, what the child will be like. What it is like when the child's here in the future, you know, when the child's older and coming and knowing me as a person. It's not that scary (idea of the child seeking out birthmother). It's something I want. But by having our relationship (on-going contact between adoptive parents and birthmother) the way it is, you know too, it's not as much of a fear as it was back then. See, the fear was that the child will decide not to come and see me--you know-- when the child's old enough. But, now that has gone away a lot, because the child will know me anyway. That helps a lot.

Probably no nighttime dreams that I can think of right now, but there is my little daydream that we will always be close. They are the child's parents, but I am the child's parent, too. I feel like they're my friends, and I want it to always remain that way. I guess that more than anything, I hope that the child will always be happy, and I'll always be able to share my life with the child, and the child will always be willing to share the child's life with me. My ideal is this.

Not really, not really. Not that I can think of. Just sometimes I'll daydream of what the child's doing. Stuff like that. But that's about it. Just kind of sit there and kind of go, 'I wonder what the child's doing right now.'

No, I've never had a dream about the child at all. Never. I just -- I really, really hope that the child wants to meet me, also, and I think that that is a very important thing about... We are always in touch, so, it's not like all of a sudden I'm sending the child a letter like, "Do you want to meet me?", kind of thing. And that's probably my biggest fantasy about the child.

Difficult social situations

Birthmothers were also asked if there were certain social situations or times that were more difficult for them since the adoption of their child. Several mentioned specific events; some mentioned difficulty trusting/ committing in relationships with others:

Child's birthday. That really brings it back. Last Christmas was, just this past Christmas, was hard. That would have actually been our second Christmas. The first Christmas, I was just kind of dealing with everything, so it was all kind of more -- I was-- it was hard. Just this past Christmas was really interesting. I thought, "Oh, child's that old"..... I thought I would never date again. I swore I would never date again. I did! Oh, I didn't want anything to do with men at first.

Probably around child's birthday is really hard, and it just made me think really hard. Socially, I think the most difficulty has been, like when I date other guys. I feel this need to tell them about the child right away. It's because I feel

the child is such a big part of my life that, if they don't know about that, I can't be close with them, because they don't really know anything about me. That is basically the last two years of my life. A lot of it has been encompassed by that. It's like--it's really strange, because it's like a really awkward thing to just be sitting there talking and to tell them. It's been a really good thing for me, because I think, maybe I have been more paranoid about it than I should be because everyone has been really cool and let me talk about it. It's been positive but scary at the same time.

All the baby things. That is tough. I don't know if that will ever go away, but... People having babies-- that, you know. A lot of people being pregnant, even people being pregnant. It's almost everything having to do with babies. It's neat, and you're happy and excited if you know these people. It's still tough. I still, kind of in a way, don't go to some of these things. I still read the paper and count how many girl and boys are born. I always count to see how many single names are in there, because these people are keeping their babies. My name wasn't in the paper because I placed. So you know these people are keeping, and they are single. I've tried to stop doing that just because I just didn't think it was very healthy for me to do something so silly like that. But, it is silly so I just keep doing it.

Well, at the year -- child's year anniversary, child's birthday.

I think maybe more with my relationship problems (with men). It is probably because of him (birthfather who was not involved), too, but it's really hard for me to commit to anyone now. I'm scared of... it probably does have something to do with it.

Sometimes, I think that... like when _____ (birthfather) and I did break up, I went through two different boyfriends... And it was very hard for me to tell them that I'm -- that this is my baby. I've pictures up in the room and things. And it was embarrassing, kind of I was just nervous. Like, "What are they going to think of me?" Like, look at the atypical things on TV... And it's almost like, well, "She must be a whore or something..." I was nervous about it (sharing having had a child) every time. And I thought, I need to tell them... And now, if you still like me, then if you can accept that, then you just passed the test... I didn't want to hide it from them, because when the child turns 18 or whatever, the child's going to be a part of my life again, hopefully.

Was openness helpful?

When asked if openness in their adoption experience had been helpful, and if so, how; birthmothers unanimously responded in the affirmative with these additional remarks:

I guess that I needed to see, needed to just see the child after I had the child. I needed to see what the child looked like. I needed to know who... who these people (adoptive parents) are. That was very important to me. For me to meet them. This... I know getting pictures and updates will help me know the child... and know what the child is doing and... It's almost like a healing process, because

there the child is with the child's parents, and this is what they are doing.

Definitely believe it is. I think without the openness there would always be a wondering if the child, you know, what kind of people child's really with. You would always wonder that. Just to even have that picture in your head, you can see, you can place a family picture in your mind. Whereas, if you just didn't have any knowledge of who these people were, how they were maybe going to raise your child, and even what they look like, it would be such a fog and you can't see anything and you can't pretend it (that's child's OK). It's easier to pretend when you've got a concrete picture in your head. I think it is so beneficial.

It's definitely been helpful. I think it all stems down to the fact I feel that I have a say, maybe I feel that I'm not just blindly saying, "Here, take the child. Whoever wants the child." It made me feel that I had the power to say, "This is the family that I would, if I had a choice -- this is what I would like to be able to give the child." This is what I'd like to be; you know, at that point it would have been nice to be married and have this stable relationship. To be able to give the child that life, and this is how I would raise the child and what I would like for the child. So, that was really good. It was like, that way, you had a say in how the child was going to be raised. Whether you would be right there or not. Afterwards, it has been so good to be able to know that the child's OK. Over Christmas break, I mailed a letter to the father (biological), and I sent his class ring back to him through his mom because I don't even know where he is. I got a letter from her (biological father's mother). It was so supportive. She felt so terrible, because she didn't know until he (child) was three months old. She didn't even know about it (child's birth). She felt just awful. I think I am only one of a few people who know this -- that she had a son when she was in high school (while single & placed for adoption in confidential manner). And, at the end of her letter, it had just inspired her to look for her son. I thought that was really neat. She's like thinking that, just by reading, that it made her realize how much... For 28 years she's always wondered. She thinks it's so great that I'll always know. I think it's so sad -- I think she's probably repressed it so much, and now it's like, now it's neat and I hope she finds him. I think it can be a really neat, good experience if it works out good anyway. Just to know would be good for her and everyone involved... I think people are afraid of things they don't know. Before they (society) felt like the less you know the better, but I almost think the more you know the better.

It was really helpful. I liked it a lot. I just don't like the idea of... I've thought about the closed adoption. I don't know how those people could do it. You have a baby; they take it out of the room; you never see it again. I don't know what I would have I could not deal with that. I think I would have had a heart attack trying to deal with it if it was done that way. The openness -- because I know child's with a good family and I know everything (about the child, but no identifying information about adoptive parents)... I'm getting letters and pictures, so I know what child looks like. Those are really helpful, because I can look at them and say, "Well, I guess they are feeding the child, and the child's really healthy. (Child) Looks good." I've had people ask me, "How can you keep in contact with them? Doesn't that really mess with your brain?" Well, maybe, maybe it does a little, but yet, doesn't everything? It's a really powerful thing not to have this life, yet still have a part of it, too.

Was openness hurtful?

One of the birthmothers expressed a negative aspect of openness when she was forced to deal with the knowledge that the adoptive parents and her child were moving because of a job promotion for the adoptive father:

That was a big, big issue for me, because when we talked, we wanted somebody from the Midwest.. And now they are moving to _____ and I was irritated.... If we would have wanted somebody in that environment, we would have picked the adoptive parents from somebody on the _____... And just a lot of things have changed from the beginning. Understandable. I can't do anything about it, but I would have never known it (if there wasn't openness in the adoption). Because I didn't know where they (adoptive parents) lived here. So, I get this letter they are moving to _____. And that's the only bad thing that's ever happened.

Consensus among the birthmothers was that openness in adoption was something they would recommend to other women considering adoption. None of the birthmothers, on hindsight, felt they would handle their adoption experience differently.

Ritual

It was interesting that two of the birthmothers mentioned a "blessing ceremony" that had been of significance to them in their adoption experience. Counselors from Caritas Family Services had suggested this ceremony to the birthmothers:

It's this blessing ceremony. You know, it's kind of an official... you... I could almost call it an official handing over (to the adoptive parents).

You could totally feel for the other people... We had a little blessing ceremony and it was a neat thing. Kind of sad, too. Everyone was bawling. It was a very emotional day.

VIII. DISCUSSION AND IMPLICATIONS

Comparison of Findings to Literature Review

Findings in this study seem to dispel the myths regarding birthmothers which Phillips (1991) and McRoy & Grotevant (1988) feel historically help to sustain confidentiality and secrecy as standard adoption practice. Myth # 1: *Birthmothers are unconcerned about their child otherwise they would never consider relinquishment.* Birthmothers within this study were very concerned about their children whom they placed for adoption. This concern was evidenced in the reasons birthmothers chose openness in their adoption process. The ability to choose adoptive parents for their children; to screen for personal characteristics, geographic location and lifestyle and parenting values; were important considerations for birthmothers in this study.

You have more control instead of saying, "Well, this is what I want for my child," and then leave it up to someone else. You really are the deciding factor. Because I wanted her (child) to have things that I couldn't give her... The type of parenting I would have wanted to do, I wanted her to get...

The ability to participate in planning for the adoption of her child provides for an active, self-determining role for the birthmother in open adoption rather than the more passive, victimized role birthmothers may experience in confidential, closed adoptions (Baran & Pannor, 1991). Encouraging self-determination as a client-centered goal should be a goal of social work practice.

Myth # 2: *Secrecy is a necessary component of adoption to protect all parties of the adoption triangle.* Within the literature, Weinreb and Murphy (1988) feel that "in order to grieve, the client needs to remove the shroud of denial and secrecy concerning birth and surrender" (p. 34). Particularly, secrecy interferes with honest expression on the birthmother's part of the existence of her child and her feelings of life without her child. Weinreb and Murphy felt that secrecy could add to a birthmother's isolation, splintered identity and social withdrawal: "Since an integral piece of information about herself is missing, she (birthmother) may report feeling isolated and alienated" (p. 30).

This need to acknowledge her parenthood, although relinquished, was evident for birthmothers participating in this study:

Socially, I think, the most difficulty has been like when I date other guys I feel this need to tell them about him (child) right away. It's because I feel he is such a big part of my life that, if they don't know about that, I can't be close with them because they don't really know anything about me.

Denial as a grief process was acknowledged by these birthmothers during the pregnancy stage and the delivery/ relinquishment stage; however, seemed less evident in the post-relinquishment stage. Birthmothers in this study commented frequently that openness in their adoption process provided them with a "contentment" almost like "a healing process."

Myth # 3: Birthmothers would eventually forget about the child they did not want to parent. Evident throughout this study is a strong desire on the part of the birthmothers for on-going knowledge regarding their biological child:

...But there is my little daydream that we will always be close. They (adoptive parents) are his parents but I am his parent, too... I guess that more than anything I hope that he'll (child) always be happy and I'll always be able to share my life with him and that he will always be able to share his life with me.

My mom thought, "Why would you want all this (pictures and letters)? You're just going to make yourself worse... Why don't you just end it. Forget about it. Put that in your past and go on with you future." And I'm going to meet her (child) just... as soon as they time is right. Which doesn't have to be 18 when you have an open adoption. It can be 15 if her parents think this is fine.

Openness for these birthmothers appeared to provide a concrete reality of their child's well-being which contributed to the acceptance of their parenting loss.

As noted by Rynearson (1982) and Lancette & McClure (1992), birthmothers appear to deal with loss and grief issues on three separate occasions during the adoption process: during pregnancy, during delivery and relinquishment and post-relinquishment based on responses to the interview questions. Many of the birthmothers' reactions/ feelings did parallel post-death grief responses frequently conceptualized as stage phenomena.

Shock, denial and numbness. These were feelings which birthmothers dealt with on all three occasions during their adoption process. This would also lend itself to Brice's (1991) conceptualization of grief responses as paradoxical

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not linear in fashion but circular and on-going depending
Anniversaries, life events and feelings states trigger
e of mourning, however time does diminish the intensity

study report shock, denial and numbness during 1) preg-
beginning you don't even believe it"; during 2) delivery
didn't think of losing her at that time (right after delivery). That
that crosses your mind;" and after 3) relinquishment: "... and
ster home and said our good-byes. And that was very hard...
put it out of my mind."

mothers in this study directed anger at themselves, the
the birthfathers who had abandoned them and the adoptive
vident during pregnancy, relinquishment and post-

crabby and I didn't even notice that I was. But I was
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r. Definitely a sore part throughout the pregnancy.

l worker came and I knew that was the day, that I had to say
wasn't really happy to see her... (relinquishment)

le (adoptive parents). They have her and I don't... (post-re-

was experienced by birthmothers particularly in the pregnancy

perelli & Smith, 1979; Lancette & McClure, 1992; Weinreb

ke of guilt or embarrassment as common feelings for

ety which stigmatizes single parents and romanticizes women

les:

pregnant and single... it is frowned upon... I had to put
ents people say and just deal with it.

assed to go to family parties and stuff.

y... The guilt was about being pregnant; for letting that happen.

I was kind of disappointed in myself that this (unplanned pregnancy) had
happened to me...

I thought for sure I was -- you know, that they (birthmother's parents) were going to kick me out of the house or disown me or something.

Yearning, Searching and Bargaining. Bargaining was particularly evident in the ambivalence birthmothers experienced regarding their adoption decision. This ambivalence was most evident throughout their pregnancy and during the time their child was in foster care.

And I had pretty much decided before I had him that I was going to place him, but it would be a month of this and then a couple weeks of, "No, I'm going to keep him." It was back and forth.

Went and saw him at the foster home (about one week after leaving the hospital)... I did have second thoughts at that time. I was really tempted to call and say, "Forget it. The adoptions off. I want to take him with me."

Yearning seemed to manifest itself in the daydreams/ fantasies of "what if..." expressed by the birthmothers. Contrary to findings by Roll et al. (1986) that birthmothers denied the permanence of their loss through continued fantasy of the child, the birthmothers in this study who opted for openness appeared to experience the "what if" as normal grief process without excessive preoccupation as a component. Birthmothers in this study allowed themselves the feelings of conviction that their adoption decision had been best for both her and her child. This yearning seems more in tune with findings from Lancette & McClure's (1992) study of open adoption although yearning did not extend to fantasies of reuniting with the birthfather as in their study. One birthmother in this study said it eloquently:

It's that whole "what if" thing and sometimes, I guess, there are moments/ days when it gets me down. But, overall it's really not. I feel I have gone on with my life and given myself what I have always wanted (college)... And, at the same time, he (child) has gotten a really good thing, too.

One mother did experience a very vivid dream within the first year post-relinquishment which speaks to the yearning of parenting opportunities lost with placement of her child for adoption:

... this dream is so vivid that I remember this one -- that we are all together (birthmother, child and adoptive parents), all of us in one room and they say, "Here, we can't take care of her anymore. She's (child) just a brat!" And I'm just like, "Oh, OK. Of course, I can take care of that." That dream, I just really remember that. Because, I guess, that was maybe a fear of mine, too; that they (adoptive parents) wouldn't be able to understand it as well as I would be able to understand it.

Searching behavior did not seem prevalent for birthmothers in this study. All birthmothers in this study had on-going, concrete knowledge of their child either via pictures and letters and/ or in-person contact. This reality seemed to diminish the need to search and may be a reflection of how openness impacts this aspect of grief.

I know getting pictures and updates will help me know her (child)... It's almost like a healing process because there she is with her parents and this is what they are doing.

Depression. Birthmothers in this study identified depressed feelings particularly at the time of their first separation from their child during foster home placement and then again at the time of relinquishment and adoption. Birthmothers spoke of lack of energy; crying; lack of appetite and confusing, ambivalent feelings regarding their adoption decision.

Two of the birthmothers in this study expressed depressed feelings during their pregnancies:

Sometimes I was just down. "Why me? Why does everything bad happen to me?... It's not fair." And feeling sorry for myself, pretty much.

I was kind of disappointed in myself that this (unplanned pregnancy) had happened to me. That I had let it happen.

Weinreb & Murphy (1988) conjecture that the helping professions frequently "support development of depression in birthmothers" (p. 25) when adoption loss is not acknowledged, when birthmothers are not actively involved in the adoption process and when birthmothers are denied post-relinquishment information regarding their children. This is supported by the learned helplessness model of depression theory which suggests that the feeling of "little, if any control over the events (especially negative events) in ones life" (Brodzinsky, 1990, p. 305) contributes to a feeling of helplessness which is manifested in depression. A comment offered by one birthmother in this study regarding openness may help explain why, although depressed feelings were experienced, clinical depression was not evident:

... I've thought about the closed adoption. I don't know how those people could do it. You have a baby; they take it out of the room; you never see

it again... I could not deal with that. I think I would have had a heart attack trying to deal with it if it was done that way. The openness... I'm getting letter and pictures, so I know what he looks like. Those are really helpful because I can look at them and say, "Well, I guess they are feeding him and he's really healthy." I've had people ask me, "how can you keep in contact with him? Doesn't that really mess with you brain?" Well, maybe, maybe it does a little, but yet, doesn't everything? It's a really powerful thing not to have this life, yet still have a part of it, too.

Furthermore, several birthmothers in this study acknowledge on-going access with their pregnancy counseling/ adoption agency social worker one and two years post-relinquishment. This accessibility to agency personnel appears to help in a two-fold manner: 1) on-going acknowledgement that loss has occurred which validates grief process and 2) on-going respect for the birthmother as an individual worth relating to, listening to; thus enhancing self-esteem for the birthmother:

She (social worker) was helpful in that she treated me like a human person with feelings -- not the old, "Once your baby is born, out and that it. You don't see her (social worker) anymore... She still is that way, too... And I still keep in touch with her (one year and four months post-relinquishment).

And they (adoptive parents) have her (child) everyday and I don't. That's tough. That's something that's hard to deal with, too. It's not so much this year as it was last year (one year post-relinquishment). I would often go to _____ (social worker)...

One birthmother in this study did experience "loss of self" as described within the literature (Millen & Roll, 1985; Roll et al., 1986; Weinreb & Murphy, 1988):

... for months after (delivery), I felt in my stomach her still there. Which was very strange. Like I was still pregnant.

Literature (Millen & Roll, 1985; Roll et al., 1986) suggests that the bereavement response is intensified for birthmothers due to their biological bond and pregnancy. However, this feeling of loss of self did not seem as protracted nor traumatic for this birthmother as in cases within the literature where grief and loss are denied.

Acceptance and Integration of Self. This final task is a process of the birthmother's allowance of and acceptance of positive feelings about her adoption experience while integrating the child into her own personal identity (Chapman et al., 1986; Lancette & McClure, 1992). Lancette and McClure (1992) found that birthmothers

in their study experienced increased self-esteem and a sense of having matured as a result of their open adoption experience. These experiences with open adoption were also evident for this study's sample of birthmothers based on the following comments:

I think about him, you know. I think about him, but I've gotten on with my life because I know he has his new life and his new family.

I've grown up probably sixty years. I've really gotten more mature... I've just got my life together after this (adoption)... I just feel like I have a point; I'm more together. I'm more emotional as a person; which is, I'm sure, a good point also.

Data from this study also address the impact of open adoption on some of the special issues of adoption loss (Roll et al., 1986; Stiffler, 1991) identified within the literature. 1) *Birthmothers who relinquish "freely" choose this alternative and, therefore, are not experiencing loss.* Weinreb & Murphy (1988) suggest that "women are socialized to take a docile, passive and dependent stance; to make more decisions about their lives based on concern for others; and to look to others for self-definition" (p. 26). If she is too active and aggressive in expressing and in taking care of her own needs, a birthmother may lose "connectedness" with others. If she is too passive and acquiesces to others, a birthmother may lose a personal sense of self-esteem in directing her own adoption plan.

All of the birthmothers in this study of open adoption were actively involved in orchestrating their adoption experience. As such, they were able to conscientiously transfer parenting responsibilities to adoptive parents they had chosen and met while still acknowledging their own needs and dreams.

Openness in adoption also allows for experience of and expression of feelings of grief which validate relinquishment as a loss for birthmothers. Weinreb & Murphy (1988) maintain that "although some birthmothers report they did not go through a conscious grieving process... grief may be manifested in many of the difficulties they report..." (p. 33). Birthmothers in this study did report feelings states (denial, guilt, anger, depression, yearning, bargaining, etc.) and relationship difficulties (committing and trusting) which are indicators of grief both along a stage continuum and para-

doxical experience. Openness in the adoption experience appears to provide an opportunity for birthmothers to affirm themselves and their decision, however does not alleviate the grief process. One birthmother in this study said it well:

Its (openness) really reaffirmed my decision (adoption)... It's made me feel really good about my decision... and it's (living without child) still hard...

Within the literature, 2) *adoption loss is said to be complicated and compromised because of the actual continued existence of the child* (Roll et al., 1986; Stiffler, 1991). Within this study of open adoption, all the birthmothers appeared to be able to differentiate between the psychological, legal parenting which they had relinquished to the adoptive parents and their own on-going role as biological parent. Birthmothers in an open adoption can legitimately claim and acknowledge their biological role via receipt of pictures/ letters and, if mutually agreed upon, actual contact with their children. However, birthmothers in an open adoption can also grieve the loss of parenting opportunities with their children.

I believe this is what the yearning, "what if" daydreams, of birthmothers symbolizes as described in this study. Baran and Pannor (1990) say of open adoption: "For the birthmother in an open adoption, there need not be any fantasy families because the adopting family is a known entity and becomes the rearing and psychological family (p. 329).

Lastly, 3) *lack of ritual complicates a sense of loss with adoption* (Roll et al, 1986; Stiffler, 1991). Interestingly, two of the birthmothers in this study participated in "blessing ceremonies" with their child and adoptive parents. In both cases, birthmothers described this experience as a symbolic and literal transfer of parenting from her to the adoptive parents: "You know, -- it's this kind of an official... you... I could almost call it an official handing over (to the adoptive parents)." Literature (Brodzinsky, 1990; Millen & Roll, 1985; Roll et al., 1986) suggests that funerals and memorial services in death-situations have helped to mark times of passage and to signify the importance of loss as a life-event. Open adoption, where birthmothers and adoptive parents have met, provides opportunities for birthmothers to witness their loss with others.

Relevance to Research Question

The findings elaborated above provide relevance to the research question in the following ways: 1) Grief and loss issues were documented for birthmothers who relinquish their children through adoption. Feeling states/ stages comparable to those experienced in loss through death were identified as were behavior (trust issues and difficulty committing in relationships) manifested in other loss situations.

Openness in the adoption experience promotes self-determination as a client outcome as birthmothers actively plan for and participate in the adoption plan. This self-determining behavior appears to have mitigated development of "learned helplessness" (cited in Brodzinsky, 1990) which can be manifested in depression.

Searching behavior evident in other grief and loss situations appeared diminished for birthmothers in this study of open adoption. Birthmothers did experience yearning behavior ("what-if"), but reported fewer fantasies regarding searching because of their concrete, "realistic" knowledge of their child's existence and well-being.

Finally, birthmothers in this study of open adoption appeared to evidence acceptance and integration of self via their reports of increased self-esteem, sense of maturation and ability to share with others their child's existence as an integral part of their identity.

2) Openness in the adoption experience did not do away with grief and loss issues for birthmothers. However, openness may have diminished the effects of some of the more socially stigmatizing aspects of adoption loss for birthmothers, e.g. the concept of the uncaring and unaffected birthmother; the secrecy and implicit, shameful nature of confidential adoption; the idea that birthmothers will forget their children.

Limitations of the Study

Certainly, sample size for this study is very small and ability to generalize findings to a larger population of birthmothers involved in open adoption is limited. However, experiences shared in this study of how openness impacted the birth-

mother's pregnancy, delivery and relinquishment and post-relinquishment experience are similar to other studies (Baran & Pannor, 1990; Lancette & McClure, 1992).

Although qualitative studies provide a richness and personal detail to their data, it would be important to attempt to quantify the effect of openness on adoption practice and, particularly, on grief and loss resolution. Quantitative studies would require a much larger sample size, but could, perhaps, address comparisons between open adoption and closed adoption populations. One quantitative study (Blanton & Deschner, 1990) did explore grief experiences and post adoption adjustment in both open and closed adoptions. The findings of this study inferred that openness in the adoption process, defined as an on-going awareness of the relinquished child; interfered with birthmother post-relinquishment adjustment. This study, however, also tempered its findings by outlining several methodological flaws.

Future studies utilizing longitudinal data will also be of importance as openness in adoption is yet a relatively new phenomenon.

The population for this study was very homogeneous and may be more indicative of attitudes and experiences of white, well-educated, middle to upper-middle class women in their late teens, early twenties. Future studies could benefit from greater diversity around areas of class, socioeconomic status, race and age.

Lastly, this study focused only on birthmother's grief and loss issues within adoption; neglecting the birthfather and his experience. Within the literature there is a deficit in documenting experiences of birthfathers in any type of adoption experience: open or closed.

Implications for Social Work Practice

From comments of birthmothers involved in this study, it is apparent that options within the adoption experience increase a birthparent's sense of control and self-determination. Self-determination is a definite goal of social work practice. Within a feminist perspective, myths of a woman's role, e.g. self-abrogating, passive, care-taking, should be discussed within social work circles so a reframing

of grief and loss issues for birthparents can be addressed as professionals.

Appreciating openness in adoption experience may mean re-defining family within social work practice. The normative concept of family as nuclear and biological may need to be re-examined to incorporate new, extended family forms of biological plus adoptive parents and children.

One birthmother in this study whose open adoption includes on-going, in-person contact with her child and adoptive parents laments the lack of information on how to deal with adoption-specific identity issues and other life-cycle transition issues within open adoption. Social work professionals must educate themselves regarding adoption-specific family issues where openness is a factor in order to effectively and ethically counsel such families.

APPENDIX A

February 8, 1993

Dear Birthmother:

I am a graduate student working toward a Masters in Social Work degree at Augsburg College in Minneapolis, Mn. For my thesis, I am researching how the method of adoption -- specifically open adoption -- affects a birthmother's feelings concerning her adoption experience. This research has been approved by and is being done in cooperation with Caritas Family Services in St. Cloud, Mn.

I am hoping to interview five to ten birthmothers who placed children under one year of age for adoption through Caritas Family Services at least one year ago but not longer than two years ago. Information from this interview will be used for my graduate thesis and will be shared with Caritas Family Services in summarized form only to assist in program planning regarding adoption options.

Your identity is being protected as Caritas Family Services is mailing out this letter -- I will not know your name unless you agree to participate in this research project. If you agree to an interview, I will also request that you not identify the adoptive parents by name -- if you know them by name -- to protect their identity. Your responses to the interview will be confidential. To ensure you confidentiality, results of the interviews will be shared with the administrators and counseling staff at Caritas Family Services in summarized form only. Your name will not be used at any time in my thesis.

Your experiences and opinions are important! Having participated in an open adoption, your responses to this interview will assist in providing current and sensitive information upon which to base future programming for birthmothers exploring adoption.

Would you please help in this research by granting me an interview at your

convenience either at your home or at a mutually agreed-upon setting. This interview would be a one-time commitment on your behalf and would last approximately 1 to 2 hours. With your permission, I would audiotape the interview. Audiotapes and interview information will be kept by me in a locked file. No one at Caritas Family Services will have access to these tapes. Audiotapes will be destroyed by December 31, 1993.

Thank you in advance for considering this research endeavor. If you are agreeable to participating in an interview, please complete the enclosed contact form and return it to me in the postage-paid envelope no later than February 28, 1993. Everyone contacted by this initial letter will receive a follow-up letter in 2-3 weeks time to request reconsideration in participating in this research project. If you have already agreed to an interview or are choosing not to participate in this research, please disregard the follow-up request for reconsideration. If you have questions regarding this research project, please feel free to call me at the telephone numbers provided below.

Sincerely,

Terri Skretvedt
Graduate Student and Principal Investigator
(612)-253-1972 (HM) (612)-255-5670 (WK)

APPENDIX B

March 1, 1993

Dear Birthmother:

I am a graduate student working toward a Masters in Social Work degree at Augsburg College in Minneapolis, Mn. A few weeks ago, I mailed you a letter regarding my thesis related to research on how the method of adoption -- specifically open adoption -- affects a birthmother's feelings concerning her adoption experience. If you have already agreed to an interview or are choosing not to participate in this project, please disregard this follow-up request to reconsider participation in my research study. This research is approved by and is being done in cooperation with Caritas Family Services in St. Cloud, Mn.

I am hoping to interview ten birthmothers who placed children under one year of age for adoption through Caritas Family Services at least one year ago but not longer than two years ago. Information from this interview will be used for my graduate thesis and will be shared with Caritas Family Services in summarized form only to assist in program planning regarding adoption options.

Your identity is being protected as Caritas Family Services is mailing out this letter -- I will not know your name unless you agree to participate in this research project. If you agree to an interview, I will also request that you not identify the adoptive parents by name -- if you know them by name -- to protect their identity. Your responses to the interview will be confidential. To ensure your confidentiality, results of the interviews will be shared with the administrators and counseling staff at Caritas Family Services in summarized form only. Your name will not be used at any time in my thesis.

Your experiences and opinions are important! If you have not already agreed to an interview, would you please reconsider and grant me an interview at your convenience either at your home or at a mutually, agreed-upon setting. The interview would be a one-time commitment on your behalf and would last approxi-

mately 1 to 2 hours. With your permission, I would audiotape the interview. A copy of the consent form is included for your information. Audiotapes and interview information will be kept by me in a locked file. No one at Caritas Family Services will have access to these tapes. Audiotapes will be destroyed by December 31, 1993.

Thank you for reconsidering this request. If you are agreeable to participating in an interview, please complete the enclosed contact form and return it to me in the post-paid envelope no later than March 12, 1993. If you have already agreed to an interview, thank you -- you do not need to resent the enclosed contact form. Please feel free to call me with any questions regarding this research project at the telephone numbers provided below.

Sincerely,

Terri Skretvedt
Graduate Student and Principal Investigator
(612)-253-1972 (HM) (612)-255-5670 (WK)

APPENDIX C

OPEN ADOPTION: ITS IMPACT ON GRIEF AND LOSS ISSUES FOR BIRTHMOTHERS

CONSENT FORM

You are invited to be in a research study regarding the impact of open adoption on grief and loss issues for birthmothers after relinquishing a child through adoption. This study is being conducted by Terri Skretvedt for her Masters in Social Work thesis at Augsburg College, Minneapolis, Mn. You were selected as a possible participant because I am contacting all birthmothers who placed a child under one year of age for adoption through Caritas Family Services at least one year ago but not longer than two years ago. I ask that you read this form and ask any questions you may have before agreeing to be in this study.

Background Information:

The purpose of this study is to help in understanding what, if any, impact open adoption has on grief and loss issues for birthmothers after they voluntarily relinquish their children through adoption. This information may help adoption agencies in providing the most sensitive services possible to birthmothers considering adoption.

Procedures:

If you agree to be in this study, I would ask you to participate in one interview which I would conduct in your home or at a mutually agreed-upon setting. I would ask you questions related to your open adoption experience and your feelings prior to and subsequent to the relinquishment of your child. I will request that you not identify the adoptive parents by name -- if you know their name -- during the interview to protect their anonymity/ identity. The interview would be audiotaped and would last approximately 1 to 2 hours.

Risks and Benefits of Being in the Study:

By participating in this study, it is possible you may re-experience or experience anew feelings surrounding the relinquishment of your child such as sadness, grief, anger or frustration. If at any time during the interview these feelings become

too intense for you, the interview can be re-scheduled or terminated

The benefit to participation may include the opportunity to explore in depth your feelings around your adoption experience.

Compensation:

In the event that this research study results in emotional distress for you, Caritas Family Services does provide individual counseling services. Payment for any such services must be provided by you or your third party payer, if any (such as health insurance, Medical Assistance, etc.).

Confidentiality:

The records of this study will be kept private. In any report I might publish or share with Caritas Family Services, there will be no information which could identify you as a participant. Research records and audiotapes will be kept in a locked file and, as the principal investigator, I will be the only person who has access to this file. Audiotapes and these consent forms will be destroyed after December 31, 1993.

Voluntary Nature of the Study:

Your decision whether or not to participate will not affect your current or future relations with Caritas Family Services. If you decide to participate, you are free to withdraw at any time without affecting those relationships.

Contacts and Questions:

The principal investigator for this research project is Terri Skretvedt. You may ask any questions you have now. If you have questions later, you may contact me at (612)-253-1972 after 5 pm daily or Dr. Sharon Patten, my research advisor, at (612)-330-1723.

You will be given a copy of this form to keep for your records.

Statement of Consent:

I have read the above information. I have asked questions and have received answers. I understand that the interview will take approximately 1 to 2 hours and will be audiotaped. I understand that I will not identify adoptive parents by name during the interview. I consent to participate in this study.

Signature _____ Date _____

Signature of Parent _____ Date _____

Signature of Investigator _____ Date _____

If you are under 18 years of age, I will require parental consent prior to the interview.

APPENDIX D

Yes, I am willing to be contacted for an interview regarding effects, for me, as a birthmother in an open adoption experience.

NAME: _____ AGE: _____
(please print your name)

ADDRESS: _____

TELEPHONE: Area Code _____

Please note: If you are under eighteen years of age, I will require written consent of your parents/ parent for this interview. This will be discussed at the time the interview is scheduled.

APPENDIX E

Open Adoption: Its Impact on Grief and Loss

Issues for Birthmothers

Terri Skretvedt
1-10-93
3rd Draft

INTERVIEW QUESTIONS

Are there any questions you have of me before we begin?

1. How long has it been since you placed your child for adoption?
2. How old were you when you placed your child for adoption?
3. Could you share with me the main reason/ reasons you chose adoption for you and your child?
4. Could you share with me why you chose open adoption for you and your child?
5. When you were pregnant, could you share with me feelings you remember having about your pregnancy and the expected child? ... about yourself?
6. When you were pregnant, was there anything/ anyone that was particularly helpful to you? Please explain why and how they/ this was helpful.
7. When you were pregnant, was there anyone/ anything that was unhelpful or hurtful to you? Please explain why and how they/ this was unhelpful/ hurtful.
8. When you were pregnant, were you planning for adoption through a pregnancy counseling/ adoption agency or individual? (If yes, the following questions will be asked):
 - a. Could you share with me feelings you remember having about the agency or individual you were working with?
 - b. Did you have any kind of contact, e.g. telephone calls, letters, face-to-face meetings, with the prospective adoptive parents? (If yes, the following questions will be asked):
 - (1.) Was the contact helpful? Please explain.
 - (2.) What, if anything, was difficult or not helpful to you about the contact?
9. Immediately following the birth of your child, could you share with me feelings you had about your child? ... about yourself? (the following will be asked if subject had answered yes to planning for adoption in question # 8) ... about your decision to place your child for adoption?

10. Did you have any contact with the prospective adoptive parents at the time your child was born? (If yes, the following questions will be asked):
 - a. Could you share with me how the adoptive parents were involved with you at the time your child was born?
 - b. Could you share with me feelings you had about the prospective adoptive parents at the time your child was born? ... about the adoption agency you were working with at the time your child was born?
 - c. Thinking back, how did you feel about the contact with the adoptive parents when your child was born?
11. After your child was born, could you explain to me the steps you went through to place your child for adoption?
12. Could you share with me some of the feelings you experienced after your child was born and you were working toward the adoption?
13. Have you had any contact/ involvement with the adoptive parents or child since the adoption? (If yes, the following questions will be asked):
 - a. What kind of contact/ involvement have you had with the adoptive parents? ... with the child?
 - b. How has this involvement/ contact affected how you feel about your adoption decision in general? ... about the adoptive parents? ... about the child? ... about yourself?
14. Since the adoption, could you share with me some of the feelings you have had in living without your child?
15. Since the adoption, have you experienced any physical or behavior changes to living without your child, e.g. sleeplessness, loss of appetite? If yes, could you share these changes with me?
16. Since the adoption, do you have dreams or fantasies about your adoption experience in general and/ or the child you placed? If so, would you share these with me.
17. Since the adoption, are there certain social situations or times that are more difficult for you? If yes, could you please explain.
18. Do you feel the openness you experienced in your adoption process -- that is, before or since placing your child -- has been helpful to you? If yes, would you share why?
19. Do you feel the openness you experienced at anytime in your adoption process -- that is, before or since placing your child -- has been unhelpful or hurtful to you? If yes, would you share this with me?
20. Looking back on your adoption process -- that is, before and since you've placed your child -- is there anything you would do differently? If yes, would you share this with me?

21. Would you recommend open adoption (any kind of contact with the adoptive parents) to other women considering adoption? Would you please share with me why you answered yes or no.
 22. Is there anything I haven't asked that would help me understand how open adoption has affected you?
 23. What is your current age?
 24. What is your race?
 25. What is your highest grade of education achieved thus far?
 26. What was the birth order of the child you placed?
- Is there anything else you'd like to share with me at this time?

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