



Grief & Loss Resolution among Birth Mothers in Open Adoption

Lisa Krahn et Richard Sullivan

Volume 32, numéro 1-2, 2015

URI : <https://id.erudit.org/iderudit/1034142ar>

DOI : <https://doi.org/10.7202/1034142ar>

[Aller au sommaire du numéro](#)

Éditeur(s)

Canadian Association for Social Work Education / Association canadienne pour la formation en travail social (CASWE-ACFTS)

ISSN

2369-5757 (numérique)

[Découvrir la revue](#)

Citer cet article

Krahn, L. & Sullivan, R. (2015). Grief & Loss Resolution among Birth Mothers in Open Adoption. *Canadian Social Work Review / Revue canadienne de service social*, 32(1-2), 27–48. <https://doi.org/10.7202/1034142ar>

Résumé de l'article

Même si la recherche s'est penchée sur le deuil et la peine des parents biologiques, elle n'a pas approfondi l'effet d'une adoption ouverte sur leur douleur et leurs façons de composer avec celle-ci. Des recherches ont montré les effets positifs de l'adoption ouverte, mais elles ont peu abordé l'adaptation dont doivent faire preuve les parents biologiques ayant choisi l'adoption ouverte de nos jours. La présente étude descriptive et qualitative explore l'expérience vécue par les parents biologiques et cherche à comprendre leur deuil et leur peine ainsi que leurs façons de les surmonter. Les résultats montrent que la décision de confier un enfant à l'adoption s'accompagne d'un deuil et d'une peine, et qu'une ouverture permet d'atténuer la douleur d'une telle action. En particulier, les parents biologiques ont trouvé un réconfort à être au courant du bien-être de leur enfant et à garder contact avec celui-ci et sa famille adoptive. Cette étude ouvre de nouvelles perspectives au sujet de l'adoption et du sens que les participants lui donnent.

GRIEF & LOSS RESOLUTION AMONG BIRTH MOTHERS IN OPEN ADOPTION

*Lisa Krahn
Richard Sullivan*

Abstract: While research has explored birth parent grief and loss, it has not been thorough in exploring how the experience of having an open adoption affects birth parents' grief and loss experience and resolution. Previous research has highlighted positive effects of open adoptions to date, but is quite limited in regards to the birth parents' adjustment in current day, open adoptions. This descriptive, qualitative study explores birth parents' experiences in current day, open adoptions and seeks to understand their experience of grief and loss and their movement towards grief resolution in the context of an open adoption. Findings of this study confirm that the experience of adoption placement involves grief and loss and that openness in adoption helps to mitigate this painful experience. Most notably, birth parents found meaning, comfort, and peace in knowing of their child's well-being and by having ongoing involvement in the life of the child and adoptive family. This opens new avenues in thinking about adoption and the meanings participants make of it.

Keywords: adoption, openness, birth mothers, grief resolution

Abrégé : Même si la recherche s'est penchée sur le deuil et la peine des parents biologiques, elle n'a pas approfondi l'effet d'une adoption ouverte sur leur douleur et leurs façons de composer avec celle-ci. Des recherches ont montré les effets positifs de l'adoption ouverte, mais elles ont peu abordé l'adaptation dont doivent faire preuve les parents biologiques ayant choisi l'adoption ouverte de nos jours. La présente étude descriptive et qualitative explore l'expérience vécue par les parents biologiques et cherche à comprendre leur deuil et leur peine ainsi que leurs façons de les surmonter. Les résultats montrent que la décision de confier un enfant à l'adoption s'accompagne d'un deuil et d'une peine, et qu'une ouverture permet d'atténuer la douleur d'une telle action. En particulier, les parents biologiques ont trouvé un réconfort à être au courant du bien-être

Lisa Krahn is a registered social worker in Vancouver, B.C.. Richard Sullivan is associate professor in the school of social work at the University of British Columbia.

Canadian Social Work Review, Volume 32, Number 1 (2015) / Revue canadienne de service social, volume 32, numéro 1 (2015)

Printed in Canada / Imprimé au Canada

de leur enfant et à garder contact avec celui-ci et sa famille adoptive. Cette étude ouvre de nouvelles perspectives au sujet de l'adoption et du sens que les participants lui donnent.

Mots clés: adoption, ouverture, mères biologiques, surmonter le deuil

Introduction

DOMESTIC ADOPTION HAS DECLINED significantly as women have more options for an off-time pregnancy. Birth parents, adoptees, and adoptive families have all influenced the social and legal aspects of adoption and contributed to more open and respectful practices which honour all members of the adoption triad (Henney, Onken, McRoy, & Grotevant, 1998; Henney, McRoy, Ayers-Lopez, & Grotevant, 2003; Gritter, 1997). Nonetheless, it has been well documented that a woman who places a child for adoption experiences profound grief and loss (Condon, 1986; DeSimone, 1996; Deykin, Campbell & Patti 1984; Logan, 1996; Rynearson, 1982; Smith, 2006; Wiley & Baden 2005; Winkler & Van Keppel, 1984). This descriptive, qualitative study explores current day, birth-mothers' experiences of grief and loss, and movement towards grief resolution in the context of an open adoption.

Several clinical studies have documented the effects birth mothers may experience after placing a child for adoption. These have included unresolved, prolonged, unacknowledged, and complicated grief, shame, and guilt; negative self-image; difficulty in intimate relationships; challenges in parenting subsequent children; fantasies of reunion; anxiety; and trauma (Condon, 1986; DeSimone, 1996; Deykin et al., 1984; Kelly, 2005; Logan, 1996; Rynearson, 1982; Smith, 2006; Wiley & Baden 2005; Winkler & Van Keppel, 1984). This study seeks to learn how birth mothers respond to their loss and how they cope in an open-adoption relationship.

The Changing Nature of Adoption

Since the 1960s and 1970s, significant cultural and social changes have affected adoption policy and practice. Social security enhancements, declining stigma, and improved access to family planning all contributed to a decline in adoption relinquishment rates (Ge et al., 2008). Birth parents and adopted children coming of age began to request information about their birth relations encouraged by new freedom of information legislation in many western jurisdictions. This challenged the notion that adoption could terminate all connections between adopted persons and their birth families (Appell, 2000). These changes shifted the balance of power in adoption as birth mothers gained leverage to assert their wishes for the adoption, participate in family selection, and negotiate ongoing contact (Henney et al., 2003).

These developments gave rise to almost three decades of research

into open adoption, beginning with the seminal work of Pannor and Baran (1982) who describe open adoption as the process by which birth parents and adoptive parents meet and exchange identifying information. Openness in this present study is defined as on-going contact between the adoptive family and the birth parent and/or birth family members. This can be articulated in a verbal agreement, a signed agreement, or an adoption order that incorporates the terms of the openness agreement. It may include in-person visits, emails, letters, phone calls, and sharing pictures.

Present statutory requirements for birth parent service in British Columbia, the site of this research, can be summarized as follows: in a prospective adoption, an adoption agency must provide the birth parent with information about adoption and alternatives to adoption, as well as information about approved prospective adoptive parents. Counselling must be non-directive and explore all options, thus promoting the birth parents' right to self-determination and to plan for their child. Being treated as a parent with the ability to make decisions for their child, and receiving non-directive counselling, is sound social work practice that treats the birth parent with dignity when considering the difficult choice of adoption. Reamer and Siegel (2007) assert that these practices support a better grief outcome.

Methodology

This is descriptive, qualitative research that seeks to present birth mothers' experiences in everyday terms (Sandelowski, 2000). It was approved by the Behavioural Research Ethics Board at the University of British Columbia. A qualitative method, grounded in the theory of social constructionism, is useful to a study that seeks to understand how birth parents describe, construct, and assign meaning to their experiences and the world around them (Kelly, 2005). Qualitative research also has an inherent openness and flexibility that allows modification of the design to apprehend emergent discoveries and relationships, which can generate results that are understandable and experientially credible (Maxwell, 2005). Thus qualitative research is well suited to examining the birth parent experience of child relinquishment and grief and loss in open adoption, which is an intricate and complex experience influenced by social context, including the adoption policies that structure relationships within the adoption triad.

Sampling

Sampling for this study was purposive, meaning that participants are sampled based on the purpose of the research study. Sampling was non-randomized and deliberative to achieve the goal of recruiting a specific

population. Three licensed adoption agencies in British Columbia gave approval to post an invitation to birth parents, to participate in research with associated with the agency. The agencies all facilitate local infant adoptions and provide follow up support to birth parents. The three agencies work in all areas of British Columbia and thereby could draw a sample of birth parents from across the province. In addition, the Adoptive Families Association of British Columbia (AFABC) posted an invitation to birth parents, to participate in the research, in their bimonthly magazine.

Having received an invitation and having indicated an interest in participating, potential research participants were then given a detailed explanation of the research and were provided with a consent form and a questionnaire guide to review in advance of their interview. At the time of the interview, the consent form was explained along with the right to terminate and withdraw at any time. Before the interview began, a copy of the signed consent form, the list of counselling resources, and a gift card were given to each participant. Participants were given a short questionnaire to complete and then took part in a 40-minute, recorded interview. The questionnaire captured some basic descriptive data that indicated the life stage and activities of the participants (e.g. work, school), their living circumstances (alone, with parents, with a partner), prior knowledge of open adoption, stage of pregnancy at which they met prospective adoptive parents, and presence or absence of support for their adoption plan. The survey provided a basis for describing the sample and provided a springboard for the discussion that followed. It was intended as a gentle, concise introduction to the subject material covered in the interview. Ultimately 13 birth mothers, who placed their children for adoption, between the years 2000 and 2009, participated in the study.

A summary tabular description of the participants is found in Appendix C. Names have been changed to guard the anonymity of participants.

It is acknowledged that the resulting sample was subject to response/non-response bias as it is self-selected. Birth parents who do not acknowledge grief and loss in the child relinquishment experience, or those who have had very poor experiences or may have different views about what was helpful to their grief and loss resolution, may have chosen not to participate. However, consistent with Palys and Atchison's (2008) analysis of the implications of response bias in epidemiological studies as compared with exploratory studies geared more to tentative theory building, we are satisfied that our sample provided useful data. Ultimately, participants provided insight into their own experiences and we do not presume to represent all present-era birth mothers who relinquish a child for adoption.

Data Collection

The primary source of data collection was through a short questionnaire, audiotaped interviews that utilized a 14-question guide, and field notes

that were recorded at the end of each interview. Interviews were conducted in a private space selected by the participant. Audiotaped interviews were transcribed verbatim.

The questionnaire gathered a demographic sketch of the birth parents. The interview guide used open-ended questions designed to focus the participant on the topic area. The interview guide helped to make the interview process more systematic and comprehensive, and captured the variability in participants' experiences. Additionally, the semi-structured interview provided the researcher with an opportunity to adjust the line of questioning during the course of the interview, based on the nature of the data that emerged.

Participants were first asked a series of questions that were structured to elicit information about the circumstances surrounding their decision to place their child for adoption, and their feelings both before and after birth and placement. The second component of the interview consisted of open-ended questions that focussed on how participants had learned about open adoption and their thought process in determining how they would like to structure the relationship with the adoptive parents and child. This section also queried the nature of the relationship between the birth mother, adoptive mother, adoptive father, and the child now. The final section of the interview contained open-ended questions about the birth parents' experience of grief and loss, and how the relationship with the adoptive family influenced their grief and loss. The final question asked birth parents how they "make sense" of, or find meaning in, this experience.

Data Analysis

The interviews were recorded, transcribed, and analyzed in an ongoing manner. The data were read repeatedly to achieve immersion and get a sense of the whole (Hsieh & Shannon, 2005). Codes were inductively generated from the transcriptions of the mothers' interviews, in other words, from the birth mothers' own descriptions of their experiences; a process defined as open coding (Maxwell, 2005). Codes were lifted from the exact language of the birth parents, which provided a direct representation of the data. Constant comparative analysis was employed to search for similarities and differences across the data (Padgett, 2008). Major themes that emerged from the data were collected and grouped under headings. The subthemes that emerged from each subject were presented within the broader theme.

The data reflected commonalities in experience and also depicted individual birth mothers' processes and the variability among them. Quotes were taken directly from the interviews while ensuring they protected birth parents' identities.

To build rigor, and to counter the possibility that interpretation may veer from their own meaning, participants were asked to review, clarify, and validate tentative findings. This helped to ensure our interpretations were congruent with their experiences.

Negative case analysis was another tool utilized to build rigor. When a pattern was emerging from the data, we returned to the data to search for negative cases that would not confirm the same finding. Care was exercised to determine if the negative case disconfirmed the evidence, or if it was discrepant and thereby served to refine but not refute emerging themes.

Findings

All participants agreed that an open adoption is preferable and assists in the resolution of grief and loss. The ways in which openness had influenced birth mothers' grief and loss experiences are grouped under four major themes: (1) adoption planning and openness, (2) grief experience and adjustment within open adoption, (3) forming open-adoption relationships (4) reflections on closed and open adoptions, and meaning making. The sub themes that emerged in each category are described under the wider theme.

(1) Adoption Planning and Discovering Openness

Reasons for choosing adoption. Participants had similar reasons for deciding on adoption and these reasons preceded their consideration of openness. Many were single and wanted two parents for their child. A number said they could not provide for the child, as they could not even take care of themselves. "Struggle" was a word used by a few women to describe what life would be like for them and their children. Others acknowledged they were not prepared for the task of motherhood. Some birth parents spoke about how they chose life over termination of the pregnancy, even if it wasn't a life they would share together. Many acknowledged they chose adoption for the well-being of the child, as demonstrated in the following quote:

I wanted the best for her. I wanted her to have two parents and a stable relationship that could love her and give her everything, and I knew that I was too young in the sense that I wasn't married, didn't have a good job, and I wanted to give her everything, and I knew I couldn't give that to her. So that is the main reason why I chose adoption. It wasn't an issue of not loving her. I knew I could love her, I knew I could try my best, but I just didn't think my best would be good enough for her. (Sarah)

How birth mothers described their decision for adoption. All spoke of their "decision" for adoption and indicated it was their own choice and not a plan

made against their will. Their experiences of opposition to, or support for, adoption by family and friends varied greatly. Yet many knew that regardless of others' support, the choice was theirs to make. Expressions of confidence in their decision permeated the findings.

I just always knew it was the right decision. The majority of the time I don't question if I made the right decision. I just know. (Nora)

I have always had confidence in knowing that I was making the right choice.... I feel like I have and when I do have bad days, I know that this was the right choice for my daughter and ultimately she is the most important person in the equation. (Sophie)

One birth mother expressed regret in her decision for adoption but acknowledged that it was her decision along with that of the birth father. She expresses herself in the following quote:

We didn't have a crystal ball, so we did the best we could at the time, we made the best decision we could at the time and it's going to work out in the end. Honestly, if I could go back, would I keep her? Yes. But I didn't know things were going to work out and like my mom says to me, "you made the best decision you could at the time, you can't say these 'what ifs' because it will make you crazy." (Sarah)

A few birth mothers expressed other regrets not related to the adoption decision. The regrets included not spending more time with the baby at the hospital, not holding the baby, not being more assertive with wishes for openness, not putting an openness agreement on paper, not taking more time to get to know the adoptive parents before the baby's birth, and not choosing the right adoptive couple for their child.

Initial thoughts on openness. In this study, few birth mothers had prior knowledge of openness and ongoing contact in current day adoptions. The majority thought they would never see their child again and/or thought their child would only be permitted to seek contact when he or she had reached adulthood.

I didn't know too much about it (openness) but I definitely knew about closed adoption from the movies, and I knew that's not what I wanted. I knew I wanted to see her often, but I wasn't quite sure actually as I didn't know if what I wanted existed. I knew that if it was closed or nothing, I probably wouldn't do an adoption. (Nora)

The birth mothers learned about open adoption from various sources, including the adoption agency. A few women noted that hearing other people's stories of open adoption brought them knowledge and hope. One attended a "birth mothers' day" celebration on Mothers Day weekend, met other birth mothers, and heard about and saw open adoption relationships.

Initially, a number of women thought they would prefer a closed adoption. Their rationales were as follows: "to put it behind me and move on with my life" (Amy); "because it would be difficult to see her and I didn't want to get attached" (Marisa & Michelle); "because it would be better and less confusing for the child" (Sarah). These women expressed gratitude that pregnancy is long and gave them time to learn about openness in adoption.

(2) Grief Experience and Adjustment within Open Adoption

Feelings and experiences at time of relinquishment. The birth mothers in this study expressed a wide spectrum of feelings about their pregnancy and child relinquishment. The data shows a diversity of feelings from bliss to debilitating depression. At the time of their child's birth, all women had arranged for an open adoption, although the form of openness in each varied.

Difficult feelings included feeling "sad, down, anxious, overwhelmed, depressed, upset, confused, nervous, scared, regret, self loathing, angry, and jealous." Most described this as a very hard time in which they cried more than they had cried before in their life, some attributing this to the adoption and some to the hormones associated with labour and delivery.

Many described the first month after the baby's birth as the most difficult. Many felt bliss from delivery, and enjoyed a high feeling for a short while, going from "the ultimate high to the ultimate low." Women also expressed experiencing loneliness, emptiness, a void in their empty stomach, and missing their baby.

I think the strongest emotion that I could link with the first month is feeling lonely. There was definitely an emptiness when she was no longer there and the way people treat you is different. Pregnancy is so exciting and so happy and everyone's all over you asking you questions and after no one really knows how to approach you. So not only is the baby no longer with you, but everyone kind of takes half a step backwards. In general the feeling was very lonely. (Sophie)

Some women spoke of anxiety in completing the adoption process. They were concerned about having the baby, seeing if the baby was okay and in good health, and then having to move on to the next stage in the adoption and in their lives. Another woman described her last month of pregnancy as "not sad" but more as a time to cherish her child in utero before birth.

I started realizing that these would be the last moments with my son, and so I just wanted to sit at home and be with him and soak that time in with him. I just remember feeling like I just wanted to wrap him in my life for a little bit longer, for that last little bit. (Amy)

Many women expressed strong, positive feelings of pride in bringing a child into the world and in placing their child with adoptive parents and thereby creating a family.

I was excited to know there was a little human being in the world because of me. That was the excitement of having a child and I still had that excitement because I still got to hear so much about her, and I felt like I was hearing her gurgles and her growing, the first time she laughed, the first time she smiled, so that was kind of exciting. The excitement I had was in knowing she was happy and that got me through. (Jenna)

A number of women identified the actual separation as the hardest moment. A number of women recalled how they lost composure and removed themselves from the situation in order to cope.

I knew what was coming when I was handing him over to the car seat. I couldn't even look at him. I can't remember if he started crying or not but I knew I started crying right away so I just had to leave. I had to remove myself from that whole situation, and get in the car and then go, so I just kind of ripped it off like a Band-Aid. (Rebekah)

Lastly, a common expression by birth parents was their concern for the future, even within the open adoption relationship. They realized that while they planned for their child before birth, with adoption they would no longer make decisions for their child and they no longer had control of the situation. There were common general worries about the unknown future, and worries whether the open adoption relationship would be satisfactory to all.

Present feelings and experiences. Several of the birth parents reported feeling "a lot better," others shared descriptors such as "great, happy, good" and many said they no longer think about their child's adoption every day.

I don't think I can remember the last time I was upset about it. I don't really miss him at all, because I'm probably going to see him tomorrow. (Jill)

Overall, I deal with it well. I can live, day to day; it's good. I don't think about them everyday anymore. (Rebekah)

The birth mothers reflected that the unfolding of their feelings has been a process. Many noted they went through stages of grief and felt an array

of emotions. Some talked about the ongoing nature of grief and the mixed feelings they experience at different milestones (child's birthday, Mother's Day).

It came in different stages and I had to just let myself really feel it, to be able to move onto the next, and I don't have that same grief anymore. (Sophie)

I don't really miss him, but I miss those parts of the day that you don't get to be a part of and that is the only thing I get sad about is that oh, I wish I was there for those little things that are so sweet and fun. (Jill)

I'm still having trouble that I wasn't there for her first everything. I am there as a part of her life and that's what matters to me. (Marisa)

Some birth mothers did not find the words "grief and loss" accurate or appropriate descriptors of their experiences. All acknowledged that it has been an emotionally challenging experience, yet they worked to define their own experiences in their own terms.

With the perspective that I've gained from the experience and relationships that I have with the couple and my son, I wouldn't actually categorize my feelings as grief. I felt it prior, but the emotions that I have felt since, I wouldn't say it's grief. That's not the term I would use. (Amy)

For the most part, I wouldn't necessarily say grieving is the word that I would use. I would just say accepting. (Carla)

Lastly, most birth mothers expressed happiness with the way the open adoption relationship has developed, delight in seeing their child grow, and pride in their child.

Now I feel proud. I feel proud of her, I feel proud of my choice both with adoption and with the adoptive parents. I feel happy. "Proud" is really the best word. I don't feel a sense of loss at all anymore. I feel like I've actually added to my family in more ways than one. (Sophie)

I'm happy—sad at times. I miss her, but I'm proud she has wonderful parents. From time to time I miss the idea of not having her in my life on a daily basis, but I'm excited for her life. (Jenna)

Factors that have helped birth parents cope. Most women identified the support of family and friends in helping them cope with the initial adjustment and ongoing feelings related to the adoption. They identified friends, mostly mothers and some fathers, a future husband, a new boyfriend, siblings, aunts, and other birth moms as being a support. Two women

identified the birth father as a source of support. A few mentioned an adoption counsellor and the adoption agency as helpful, but the women predominantly identified non-professional supports in their personal life.

Some women identified the adoptive parents as a source of comfort and support, and expressed appreciation for their care. They said that getting to know them, hearing about their child, and seeing them and their child were helpful to their adjustment and grief resolution. They also said that looking at pictures of their child was helpful. Also putting effort into the open adoption relationship was identified as helpful.

The relationship I had with the adoptive parents helped. Seeing them and seeing her with them in their house is always a source of comfort as it exceeded my expectations, so that definitely helped me cope with some of the grief. (Nora)

It's easier now that I have Facebook so we can just contact each other. They can see what's going on at their pace and I can go and see what's going on at my pace. I think it's the best idea I ever had. I'm so proud of it. (Rebekah)

(3) *Forming Open Adoption Relationships*

Relationship with the adoptive parents. Some birth mothers had not seen their child nor the adoptive parents since placement, yet they maintained an open adoption through other methods such as email, pictures, letters, Facebook, and phone calls. Many had in-person visits. Regardless of the nature of the contact, the relationship with the adoptive parents and their child was significant to the birth parents.

Birth mothers had many terms to describe the adoptive parents. They described them as “friends, extended family, very kind and very good people, awesome, distant family, very good friends, family, a big support.” However they framed it, birth mothers spoke of the intentionality they exercised in building a relationship with the adoptive parents. They spoke of its reciprocal nature as a gift from which their child would benefit.

I've learned that the more trust and honesty and respect that you give to others, the more inclined they are to reciprocate. I think the three of us have come to understand that we didn't want my son to be the one link between us. At the centre of the experience for me is how the three of us could be so loving. We're all able to share this experience together and focus on the relationship that the four of us share. (Amy)

Birth mothers used many descriptors to portray the qualities they have experienced in an open adoption relationship. Predominant terms

included “harmonious, respectful, open, cooperative, trust, respect, honesty, reciprocal, consistent, warm, open, and amazing.” However, two women in the study described how rigidity has restricted the relationship. They noted that the difficulty of the relationship is a factor that hinders their grief process.

I think they only tell me the good. I don't think they're telling me the bad. I think they just want him (her son) to be so perfect, so it's kind of fake sometimes. (Carla)

Most birth mothers identified their relationships with the adoptive parents as a supportive factor in their grief and loss resolution. Few women spoke about the adoptive father in detail, but most had much more to say about the adoptive mother. A general fondness and tenderness for the adoptive mothers was evident throughout the interviews. Some birth mothers were protective of the adoptive mothers and were affirming of them as mothers. Birth mothers described the adoptive mother as “a sister, a friend, really close, a very special relationship.”

Our relationship is based on our daughter. We both can see in each other how much we love her. It's like having a friend that you can talk with about so much that it makes you smile about everything. We've been able to share so many stories and love about our daughter. So I think it's a great relationship. (Jenna)

We have a really special relationship. During the pregnancy she was one of my biggest supports. She has continued to be one of my biggest supports and supporters. I think that there's something there that most birth mothers feel for the adoptive mothers. There's this special bond and a relationship there that I don't think will ever be broken. I care and love them all, but I really can honestly say that I love the adoptive mother. I really respect her as well. (Sophie)

Relationship with the child. It was important to all of the women to know that their child was doing well and was happy in life, and knowing this brought them comfort and peace.

It was very important to the birth parents that their child would understand (now or in the future) that they very much care for the child, are available to the child, and chose adoption in the best interest of the child.

She's going to know I was there to be part of her life.... I want her to grow up and know that I'd made the effort to be part of her life and the adoptive parents allowing me to be part of her life is awesome. It made me feel so good about the entire thing. (Marisa)

Some birth parents in an open adoption do not see their children.

Whether it was their choice or not, the birth parents who do not see their children report an anxiety about what it will be like when they do eventually see each other.

It would be easier for me if I was seeing him as I wouldn't have anxiety about what it's actually going to be like when we do see each other. I do have anxiety thinking about that. I worry that he's going to ask me why I didn't want to see him and I have to explain that it wasn't me. If it was more open, it would be easier on everyone. (Carla)

Birth mothers' perception of their role in the open adoption relationship. Most, but not all of the birth mothers in this study see themselves as active in the open adoption relationship and used different ways of describing their role. The responses, positive and negative, appeared to reflect the women's stages of grief resolution:

You're a mined resource. Like honestly, it's ugly. (Cynthia)

I feel very fortunate to have played that role as being a conduit to them becoming a family. (Amy)

Sometimes I feel like I was just a donor. I feel like I was just the person who was there at the right time for them. I know they care about me deeply, but my role is basically whatever they want it to be at this point. I don't have a choice in the role. (Carla)

I felt like a surrogate. I felt blessed to have the right to help another family out. (Angela)

The women in the study had a variety of ways of describing their roles in relation to their child. Many used familial descriptors including auntie, extended family, an older sister, tummy mummy, and an invested third party. One birth mother foresaw her role as an aunt, but as her open adoption relationship with the adoptive parents is rigid in structure, she has not been able to assume this role and feels a sense of rejection, which has complicated her grief process.

Inherent in building a relationship with their child and the adoptive family was the birth parents' need to have boundaries and as many described it, "some space." They described this space as necessary to be healthy, to not feel too obsessed, to find balance, to feel they are moving on with their life's plans, and to protect themselves.

(4) Reflection on Closed and Open Adoptions and Meaning Making

Birth mothers' perception of how a closed adoption would influence the experience of grief and loss. Birth mothers were unanimous in noting that the

experience of grief and loss would be greater in a closed adoption. They said they would be “sadder, upset, would dwell on it more, would always wonder how the child is, and would regret not having it open. There would be more stress and grief which could cause more stress later in life.” With respect to closed adoption, some were adamant: “There’s no way. I wouldn’t have chosen adoption.” Some could not entertain the option of a closed adoption.

Reflections of birth parents’ experiences with openness. The birth mothers were in unanimous agreement that having an open adoption was helpful in their process of grief and loss resolution. They noted that openness made the experience “much easier, provided comfort, softened the grief, provided a cushion and minimized the grief.” They shared the sentiment that seeing their child’s development and happiness brought them joy, some describing it as their greatest joy. This also inspired the birth parents to live full and happy lives and to “get on” with their own lives.

Knowing she’s really loved and happy makes it easier. The assurance, knowing she is going to have a great life helped me to move on with my life and to become stronger, and knowing that I went through that has helped me believe that I’m stronger and there’s more acceptance than there was before. The whole process of her being happy has helped me accept it. (Jenna)

How birth mothers make meaning in their experience of adoption. Much of the meaning birth parents attributed to the adoption was found in the construction of an ongoing role in the life of their child and that of the adoptive family. They demonstrated pride in their child and talked fondly of the child. Seeing their child is happy and loved was the bottom line for them and this brought them contentment. Some described the experience of having the child as the best thing they have done to date, how the experience changed their lives, and how it continues to define their lives.

Discussion

The goal of this study was to describe how the experience of grief and loss was influenced by open adoption in a small number (13) of birth mothers. Findings confirmed that having an open adoption was helpful and generally mitigated the grief and loss experienced when relinquishing and placing a child for adoption. The birth parents were unanimous in their reports that having an open adoption had a positive effect on their grief resolution.

Grief Remains a Common Experience

While open adoption provides some relief to birth parents’ experience

of grief and loss, most identified the adoption placement as difficult and emotionally laden. This is a common theme in the literature about a woman's response to child relinquishment (Condon, 1986; DeSimone, 1996; Deykin et al., 1984; Logan, 1996; Rynearson, 1982; Smith, 2006; Wiley & Baden, 2005; Winkler & Van Keppel, 1984).

Of the 13 women in the sample, only one woman expressed regret in her decision to place her child for adoption. The other 12 women expressed guilt for not being able to provide for their child and remorse that they could not be with their child. This finding is similar yet different from past research, wherein expressions of birth parents' remorse centred on the decision for adoption (De Simone, 1996). This study has shown the birth parents felt confident in their decision, yet some still experienced different facets of guilt and remorse.

This study also confirms prior research findings that grief is a process that goes through stages, is a personal experience, and does not have a standard trajectory (De Simone, 1996; Worden, 1991). Experiences of the grief process varied greatly. Some acknowledged that the adoption may be grieved throughout their entire life while others defined their experiences of grief as "bouts of difficulty." Most acknowledged that the grief and loss has eased tremendously, which is congruent with other research on open adoptions (Ge et al., 2008). Nonetheless, one birth mother noted that the grief was worse when she was surrounded by preschool children, which reminded her of her sons. In such circumstances, grief can be re-stimulated by environment (Condon, 1986; Hooyman & Kramer, 2006; Silverstein & Demick, 1994; Townsend, 2003).

Ability to Plan for One's Child

This study had a new finding, as not all women in the study expressed difficult feelings of grief and loss. Some felt "not teary, not sad" but rather "proud, happy, comforted" through the experience of birthing and placing a child for adoption. The women attributed their more positive emotional state to knowing they had been the one to plan for their child (i.e. choosing the adoptive family and negotiating ongoing contact) and they expressed confidence in the decision they made.

As per legislation in British Columbia, birth parents may select the adoptive family by way of an approved home study. Concerns about where their child will be living can thereby be assuaged. This is congruent with research which shows that choosing the adoptive family and arranging an open adoption increases a birth mother's sense of control as she takes more responsibility for the decision to relinquish her child, which then assists with grief resolution (Berry, 1991; Berry, Cavazos-Dylla, Barth, & Needell, 1998; Brodzinsky, 2000; Cushman, Kalmuss, & Namerow, 1997; Pannor & Baran, 1982; Townsend, 2003; Baldassi, 2005). Openness provides birth parents with the assurance that their child is being well cared

for; a comfort for one of their most significant worries (Baldassi, 2005; Gross, 1993; Silverstein & Demick, 1994; Townsend, 2003). Assurance was a strong theme in our research findings.

Confidence and Positive Feelings

A finding of this study less commonly reflected in the literature was the confidence with which the women spoke of their adoption decision. The birth mothers were all very clear that the decision was theirs to make, regardless of how much support or lack of support they felt. This demonstrates a factor noted by Smith (2006), that in order for a woman to “integrate the adoption decision without undue negative long term consequences,” she needs to make peace with her decision and not have experienced coercion in that decision. A study by a post-adoption support organization (Magee & Brodzinsky, 2010) produced similar findings, with birth parents reporting confidence in their decision as a critical factor in their adjustment process.

Another novel finding was the positive feelings that the birth parents reported at the time of the child’s birth and over the years subsequent to adoption. Excitement was commonly reported in regards to seeing the child once he or she was born. The celebration of the baby’s arrival, the euphoria and bliss of bringing a child into the world, was spoken about along with their on-going pride in their child. Prior research by Lancette and McClure (1992) reported similar findings that having greater certainty of her child’s well-being may contribute to a birth mother’s sense of pride regarding her decision.

A New Role to Experience

Many research studies have found birth parents continue to think about their children (De Simone, 1996; Townsend, 2003; Rynearson, 1982; Wiley & Baden, 2005). Our research resoundingly confirms this. Open adoption provides the birth parent with knowledge and assurance of the child’s well-being and the potential for an ongoing role in the child’s life (Berry et al., 1998). Birth parents in this study described how they defined their role in the open adoption relationship, and in doing so they are providing an expansion of the discourse on the meaning of adoption and family. Being able to define and assume a new role in the open adoption relationship signals a movement towards grief resolution that is consistent with William Worden’s (1991) theory that mourning can be considered complete when a person is able to experience pleasures, take on new roles, and look forward to new events. Additionally, Neimeyer (2009) notes that grief can become complicated by role confusion, but when a grieving person can experiment with a new social role and identity, “restoration oriented coping” is demonstrated (p. 75). The birth parents in this study showed growth and steps to grief resolution inasmuch as they

could describe their role and were finding a way to be in a relationship with their child and the adoptive family.

Support of Adoptive Parents

As birth mothers defined their role in the open adoption, they also noted the degree of support they felt from the adoptive parents. Most experienced them as caring and empathetic and described them as a source of support. In a study of 323 matched birth parents and adoptive parents, Ge et al. (2008) reported a similar finding—that adoptive parents provided an informal source of social support through exchanges and contact. This is significant as it is at the heart of open adoption which doesn't seek "separation and replacement," but rather "continuity and empathic awareness" (Silverstein & Demick, 1994, p. 114). The empathic awareness that open adoption makes possible is an asset in the management of the complex open adoption relationship. It affirms a family-like way of relating, and brings relief to the birth parents experience of loss.

This study affirms Henney, Ayers-Lopez, McRoy, & Grotevant's (2007) earlier finding—that birth parents in open adoptions tended to have lower levels of grief than those in closed adoptions. Henney et al. (2007) also noted a negative correlation between a birth parent's satisfaction with the openness arrangement and his/her global grief score. Birth parents in our study articulated the best qualities of the open adoption relationship (honest, harmonious, respectful, open, cooperative, trusting, respectful, reciprocal, consistent, warm, open) and noted that the adoptive parents' disposition towards them contributed to their grief resolution. This illustrates the centrality of the relationship between the birth parent and the adoptive parents. While birth mothers clearly articulated they cared for their child, they identified their primary active relationship in the adoption triad as being with the adoptive parents. This is the foundation for a positive relationship with their child as he/she matures.

Being Open in General Helps

Birth parents noted that being open about the adoption in other areas of life has also been helpful in coping and adjusting, continual growth, and healing. This is, in effect, a byproduct of open adoption. By being open, the birth parents did not carry their adoption experience as a secret, that for many in closed adoptions was a confounding factor for an integrated life narrative (Sullivan & Lathrop, 2004).

In writing about grieving, Neimeyer et al. (2009) note that retelling one's narrative provides social validation of one's story and experience, yields empathic understanding, promotes mastery of difficult passages, and helps counteract avoidance coping. Brodzinsky (1990) wrote that resolution is possible if a birth parent can express their grief in a non-judgmental environment. Many women in the study reported speaking at

adoption education panels and identified this public re-telling of their stories as beneficial to grief resolution and healing.

Recommendations for Policy & Practice

Adoptive parents and birth parents can benefit from agency support and should be made aware of the benefits and risks of open adoption. As they embark on a lifelong relationship, they may well draw on support that is affordable, balanced, comfortable, and accessible. Adoption counselors can specialize in the open adoption relationship over the life span, being accessible at key transitional life moments such as a birth parent's marriage or subsequent pregnancy, an adolescent adoptee's movement toward a more independent relationship with the birth parent, adoptive parents building additional open adoption relationships in subsequent adoptions, and so forth.

Suggestions for Further Research

Although the findings presented in this research-study offer new insights into birth parent experiences, there is still much to learn. We did not explore how the open adoption relationship evolved over time, or what birth parent contributions influence the success of the relationship. This could serve to explain the concept of agency and responsibility in a birth parent's evolving role and in her grief resolution process. It would also be a significant contribution to elucidate the outcomes for adoptees who grow up within the context of an open adoption.

What history has demonstrated is that closed adoptions have deleterious effects on all adoption triad members. While open adoption cannot be claimed the panacea to birth parents' grief, the evidence is growing that openness has mitigating and healing qualities. It is not necessarily the degree or quantity of openness that mitigates grief, but it appears that empathic awareness and understanding bring the validation and comfort that this is vital in grief resolution. Continuing research may move the study of birth mothers' experiences beyond the paradigm of grief and loss.

REFERENCES

- Appell, A. R. (2000). Legal intersections. *Adoption Quarterly*, 3(3), 85-95.
- Baldassi, C. L. (2005). The quest to access closed adoption files in Canada: Understanding social context and legal resistance to change. *Canadian Journal of Family Law*, 21, 211-265.
- Berry, M. (1991). The effects of open adoption on birth and adoptive parents and the children: The arguments and the evidence. *Child Welfare*, 70(6), 637-651.

- Berry, M., Cavazos Dylla, D., Barth, R., & Needell, B. (1998). The role of open adoption in the adjustment of adopted children and their families. *Children and Youth Services Review, 20*(1/2), 151-171.
- Brodzinsky, A. B. (1990). Surrendering an infant for adoption: The birthmother experience. In D. M. Brodzinsky & M. D. Schechter (Eds.), *The psychology of adoption*. (pp. 295-315). New York: Oxford University Press.
- Brodzinsky, D. M. (2000). Openness in adoption: Research with the adoption kinship network. *Adoption Quarterly, 4*(1), 45-65.
- Condon, J. T. (1986). Psychological disability in women who relinquish a baby for adoption. *The Medical Journal of Australia, 144*, 117-119.
- Cushman, L. F., Kalmuss, D., & Namerow, P. B. (1997). Openness in adoption: Experiences and social psychological outcomes among birth mothers. *Families and Adoption, 25*(1/2), 7-19.
- DeSimone, M. (1996). Birth mother loss: Contributing factors to unresolved grief. *Clinical Social Work Journal, 24*, 65-76.
- Deykin, E. Y., Campbell, P. H., & Patti, P. (1984). The postadoption experience of surrendering parents. *American Orthopsychiatric Association, 54*(2), 271-280.
- Ge, X., Matsuki, M. N., Martin, D. M., Neiderhiser, J. M., Villareal, G., Ried, J. B., Leve, L. D., Shaw, D. S., Scaramella, L., & Reiss, D. (2008). Bridging the divide: Openness in adoption and postadoption psychological adjustment among birth and adoptive parents. *Journal of Family Psychology, 22*(3), 529-540.
- Gritter, J. L. (1997). *The spirit of open adoption*. City, Virginia: Child Welfare League of America.
- Gross, H. E. (1993). Open adoption: A research based-literature review and new data. *Child Welfare, 72*, 269-284.
- Henney, S. A., Onken, S., McRoy, R. G., & Grotevant, H. D. (1998). Changing agency practices toward openness in adoption. *Adoption Quarterly, 1*(3), 45-76.
- Henney, S. A., McRoy, R. G., Ayers-Lopez, S., & Grotevant, H. D. (2003). The impact of openness on adoption agency practices: A longitudinal perspective. *Adoption Quarterly, 6*(3), 31-52.
- Henney, S. A., Ayers-Lopez, S., McRoy, R. G., & Grotevant, H. D. (2007). Evolution and resolution: Birthmothers' experience of grief and loss at different levels of openness. *Journal of Social and Personal Relationships, 24*(6), 875-889.
- Hooyman, N. R., & Kramer, B. J. (2006). *Living through loss*. New York: Columbia University Press.
- Hsieh, H., & Shannon, S. (2005). Three approaches to qualitative content analysis. *Qualitative Health Research, 15*(9), 1277-1288.
- Kelly, R. J. (2005). *Motherhood silenced*. Ireland: The Liffey Press.
- Lancette, J. & McClure, B. A. (1992). Birth mothers: Grieving the loss of a dream. *Journal of Mental Health Counselling, 14*, 84-96.
- Logan, J. (1996). Birth mothers and their mental health: Uncharted territory. *British Journal of Social Work, 26*, 609-625.
- Magee, C., & Brodzinsky, D. (2010). *Finding support and rising above: A summary of a community assessment of birth mother's post-placement needs*. California: On Your Feet Foundation.

- Maxwell, J. (2005). *Qualitative research design: an interactive approach* (2nd ed.). California: Sage Publications.
- Neimeyer, R., Burke, L., Mackay, M., & van Dyke Strong, J. (2009). Grief therapy and the reconstruction of meaning: From principles to practice. *Journal of Contemporary Psychotherapy*, 40(2), 73-83.
- Padgett, D. (2008). *Qualitative methods in social work research* (2nd ed.). New York: Sage Publications.
- Palys, T., & Atchison, C. (2008). *Research decisions: Quantitative and qualitative perspectives* (4th ed.). Toronto, ON: Nelson.
- Pannor, R., & Baran, A. (1982). Open adoption as standard practice. *Child Welfare League of America*, 58(3), 245-250.
- Reamer, F. G., & Siegel, D. H. (2007). Ethical issues in open adoption: Implications for practice. *Families in Society: The Journal of Contemporary Human Services*, 88(1), 11-18.
- Rynearson, E. K. (1982). Relinquishment and its maternal complications: A preliminary study. *American Journal of Psychiatry*, 139, 338-340.
- Sandelowski, M. (2000). Whatever happened to qualitative description? *Research in Nursing & Health*, 23, 344-340.
- Silverstein, D., & Demick, J. (1994). Towards an organizational-relational model of open adoption. *Family Process*, 33, 111-124.
- Smith, S. (2006). *Safeguarding the rights and well-being of birthparents in the adoption process*. New York, NY: Evan B. Donaldson Adoption Institute.
- Sullivan, R. & Lathrop, E. (2004). Openness in adoption: Retrospective lessons and prospective choices. *Children and Youth Services Review*, 26(4), 393-411.
- Townsend, L. (2003). Open adoption: A review of the literature with recommendations to adoption practitioners. *Journal of Child and Adolescent Mental Health*, 15(1), 1-11.
- Wiley, M. O., & Baden, A. L. (2005). Birth parents in adoption: Research, practice and counselling psychology. *The Counselling Psychologist*, 33, 13-50.
- Winkler, R., & Van Keppel, M. (1984). *Relinquishing mothers in adoption: Their longterm adjustment*. Melbourne, Australia: Institute of Family Studies. Monograph no. 3.
- Worden, J. W. (1991). *Grief counselling and grief therapy: A handbook for the mental health practitioner* (2nd ed.). London: Springer.

APPENDIX A

Questionnaire

1. When was your child born? _____
2. When did you place your child for adoption? _____
3. How old were you when you placed your child for adoption? _____
4. What were you doing during your pregnancy? Check all that apply:
Went to school _____ Mostly stayed home _____
Worked _____ Took care of my other children _____
6. Were you parenting other children, when you placed your baby for adoption? _____
• If yes, how many children and their ages. _____
7. Who was in support of your adoption plan? Check all that apply:
Mom _____ dad _____ siblings _____ friends _____ birth father _____
birth father's family _____ other relatives _____
8. Who was NOT in support of your adoption plan? Check all that apply:
Mom _____ dad _____ siblings _____ friends _____ birth father _____
birth father's family _____ other relatives _____
9. How many months pregnant were you when you first contacted the adoption agency to plan adoption? _____
10. How many months pregnant were you when you first met the adoptive parents? _____ or how long after the birth? _____
11. When you first talked to the adoption agency, did you want an open adoption? Y / N / undecided
12. Did you change your mind about openness during the pregnancy and during the baby's first year? Y / N

APPENDIX B

Interview Guide

1. How did you come to choose adoption for your child?
2. How did you feel the month before your baby's birth?
3. How did you feel the month after you placed your baby for adoption?
4. What were the emotions you experienced then?
5. How do you feel now?
6. What helped you cope with the grief?
7. Has it changed over time, and if so, how?
8. Before you contacted the adoption agency, what did you think about openness?
9. How was open adoption explained to you? / How did you learn about openness in adoption?
10. Describe the relationship you have with the adoptive mother, the adoptive father, your child?
11. How do you describe your role in the adoption relationship?
12. How has having an open adoption influenced the experience of grief and loss?
13. How do you think the experience of grief and loss would be different if you had a closed adoption? Or a more open adoption?
14. How do you make sense of this experience / find meaning in this experience?

APPENDIX C

Birth Parent Participants (n = 13)

Participant	Participant's age at placement	Child's current age	Frequency of Contact in Open Adoption Relationship
Angela	21	4 ½	Has seen daughter and adoptive parents two times and can request visits. Unrestricted phone calls and emails.
Jill	20	8	Sees son and adoptive parents weekly. Unrestricted phone calls and emails.
Carmen	24	2 ½	Sees daughter and adoptive parents three times per year. Unrestricted emails, usually three times per month.
Rebekah	18, 20	5, 3	Has seen both sons and adoptive parents once since placement, which has been her preference. Has open email contact and a webpage for picture and updates.
Amy	25	1 year	Unrestricted phone and email contact. Sees son and adoptive parents two to three times per month.
Nora	21	2	Sees daughter and adoptive parents 10 to 12 times per year. Unrestricted email and phone contact.
Marisa	18	2 ½	Unrestricted phone and email contact. Sees daughter and adoptive parents every one to two months.
Sarah	22	2	Has not seen child since birth due to geographic distance. Receives pictures and updates by email every three months.
Michelle	18	3 ½	Unrestricted phone and email contact. Sees daughter and adoptive parents four times per year.
Cynthia	34	2	Has three scheduled visits with child and adoptive parents per year.
Jenna	24	3	Unrestricted phone and email contact. Stays with the adoptive family for one week, approximately three to four times per year.
Carla	21	8 ½	Updates and pictures by email three to four times per year. No in-person contact with child since he was four years of age. Sees adoptive parents once a year.
Sophie	20	2 ½	Unrestricted phone and email contact. Has 10–11 visits with daughter and adoptive parents per year.