

# NACAC speakers describe seven core issues of adoption

Lois Melina

*Adopted children, adoptive parents, and birthparents have seven common emotional experiences that make them more alike than different and forever intertwined, said speakers at the 12th annual conference of the North American Council on Adoptable Children, held in August in California.*

*Sharon Roszia and Deborah Silverstein, said recognizing and working through these seven core issues in adoption can be an enriching experience for members of the adoption triad.*

*The issues span not only the entire lives of those directly involved in adoption, but other generations, as well, they said.*

## 1. Loss

“Adoption is created through loss,” said Silverstein. “Without loss there is no adoption.”

All birthparents, adoptees, and adoptive parents have experienced at least one major loss before becoming involved in adoption. Birthparents lose the child born to them; adoptees lose their birthparents; and adoptive parents lose the child that would have been born to them or the child they imagined they would adopt.

These losses and the way they are resolved figure prominently in the lives of those involved in adoption.

Silverstein noted that loss is part of the human experience and is sometimes necessary to gain new relationships, new jobs, and new experiences. Kaplan added that while losses are painful, they contribute to who we are as individuals, and therefore enrich our lives.

However, before losses can enrich our lives we must mourn them, and society encourages those involved with adoption to ignore their losses rather than confront them. Adoptive parents are expected to be happy; adoptees are expected to be grateful that they were adopted; and birthparents are expected to forget their loss or are made to feel that they don’t deserve to feel their loss.

Grieving is further complicated by the fact that there is no end to these losses. Yet adoptive parents, adoptees, and birthparents frequently engage in behaviors designed to retrieve and replace the losses.

Adoptees frequently imagine people they

meet are members of their lost birth family. Birthparents wonder if children they encounter casually are their biologic children (although typically the children they notice are the same age as their children were when they were placed for adoption, regardless of how old the children would actually be.) Adoptive parents may compare the child they adopt to the child they expected to have.

This theme of loss can affect individuals and families forever, both in their relationships and in how they deal with subsequent losses.

For example, adoptees may be uncertain about the permanency of relationships and not know how to “hold on” or “let go” in interactions with others.

Birthparents may dwell on the loss of their child and feel socially isolated by it. Adoptive parents may equate their loss of the ability to procreate as a loss of immortality and therefore a loss of themselves. They may fear losing their adopted child, either because they have already experienced the loss of a “dream child,” or because they question whether they are entitled to be the adoptee’s parents, and may develop an overprotective style of parenting.

## 2. Rejection

One way people deal with loss, said Sharon Kaplan, is to try to figure out what they did wrong to cause the loss so that they can keep from having other losses. In doing this, people may conclude they suffered losses because they were unworthy of having whatever was lost. As a result, they feel they were rejected.



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“Most triad members [birthparents, adoptive parents and adoptees] fear rejection and do everything they can to prevent it,” Kaplan said. They become “absolute people pleasers” to counter their feeling of worthlessness, or reject others before they are again rejected.

Adoptees often feel they were placed for adoption because they were worthless or defective. “They personalize their placement for adoption as rejection,” Kaplan said. “To be chosen, they must first be rejected.” Some may take responsibility for being rejected, believing they did something to cause it. Children adopted from other countries may feel rejected not only by their birthparents, but by their race, religion, or culture.

Not only can feelings of rejection lead to impaired self-esteem, adoptees may anticipate rejection and either set themselves up for it in their relationships or try to please others so they are not rejected.

Birthparents may reject themselves as irresponsible or unworthy to be a parent. They often keep the fact that they placed a child for adoption a secret because they fear people would reject them if they knew the truth.

Adoptive parents may feel that their bodies have rejected them or that a higher power has rejected them. The infertile partner may fear being rejected by his or her spouse. They may worry that the birthparents wouldn’t approve of the way they are raising their child or that their social worker is standing by to criticize them. They may fear that their child will someday reject them.

### 3. Guilt and Shame

When people personalize a loss to the extent that they feel there is something intrinsically wrong with themselves that caused the loss, they often feel guilt that they did something wrong, or shame that others may know, Silverstein said.

Shame is a much deeper emotion than guilt, she said, because shame has to do with a defect in one’s self. Unresolved shame can lead to a sense of being inadequate, unworthy, or “bad.” Guilt is related to misconduct, and while people

may regret their behavior, their actions don’t diminish their sense of worth.

Adoptees, birthparents, and adoptive parents may be “filled with shame for what they cannot ever become,” Silverstein said. Adoptees will never be the perfect child they imagine they needed to be to avoid rejection by their birthparents, nor will they ever be the perfect child they imagine their adoptive parents wanted. Adoptive parents will never be their child’s biologic parent. Birthparents will never function as their biologic child’s parent.

Adoptees may also feel shame at being different, or feel that they deserve misfortune.

Adoptive parents may feel ashamed of their infertility, believing it to be a curse or punishment. As a result, some may experience a spiritual crisis. Parents who adopt special needs children may never feel “good enough,” Silverstein said, because their children still have problems. Some parents may feel guilty that they have not adopted more children or that they have not adopted children with greater problems.

Birthparents feel guilt and shame for placing their child for adoption, or for not trying harder to raise the child themselves. This is especially true of birthparents who abused their children.

### 4. Grief

Because adoption is seen as a problem-solving event in which everyone gains, rather than an event to which loss is integral, it is difficult for adoptees, adoptive parents, and birthparents to grieve, said Kaplan.

“There are no rituals to bury unborn children, roles, dead dreams, and disconnected families.”

While everyone deals with grief in individual ways, there are five predictable stages of grief:

- ❖ **Denial**, in which the individual feels shock or detachment;
- ❖ **Anger**, in which the individual confronts the loss as unfair;



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- ❖ **Bargaining**, in which the person thinks the loss can be recovered if he or she acts in a certain way;
- ❖ **Depression**, in which the person feels helpless and hopeless;
- ❖ **Acceptance**, in which the loss is temporarily resolved so that the person can function.

Kaplan stressed that these stages may overlap and may be experienced over and over again, though generally with less intensity as loss becomes more distant.

She noted that adoptive parents who adopt when they are still in the denial phase of grief are often “fear-laden,” and have difficulty facing adoption issues or the thinking of the adoptee’s birth family as real people. Parents who adopt in anger may have difficulty forming an attachment to the child.

Birthparents who feel they must keep their child’s placement a secret may stay in the denial phase of grief for a long time, Kaplan said, and forget pertinent information about the adoption.

Adoptees may have difficulty dealing with grief because they are not encouraged to mourn their loss. Indeed, adoptive parents may block the adoptee’s grief process because it feels like rejection to them. However, failure to grieve can lead to depression or acting out in the child or adolescent.

Adoptees also have difficulty grieving because they can’t fully understand their loss during childhood. “They can’t grieve fully until late adolescence,” Kaplan said. This necessity to grieve repeatedly as their understanding of adoption grows can lead adoptees to fear that their grief will never end.

## 5. Identity

A person’s identity is derived from knowing what he is and what he is not. Adoption threatens a person’s sense of knowing who he is, where he came from, and where he’s going, Silverstein said.

Birthparents and adoptive parents are confused about their identity because they “are parents, yet aren’t parents,” she said. “Birthparents lose part of themselves to the universe,” and their identity as care-taking parents to that child can never be reclaimed.

Birthparents frequently have difficulty knowing how to respond when they are asked how many children they have.

The loss of procreation diminishes identity for adoptive parents because they do not have the sense of being tied to future generations.

Adoptees lose their family identity through adoption and “borrow” the identity of their adoptive families, but often “feel they are playing a role,” Silverstein said. Lack of information about their birth families may impede developing a sense of self, and negative information about their birth families can lead to a negative self-image.

Adoptees who do not have a sense of “belonging” to their families may behave in extreme ways to “belong,” such as by becoming “people pleasers,” or by joining cults.

## 6. Intimacy

People who are confused about their identity may have difficulty getting close to anyone, Kaplan said. And people who have had significant losses in their lives may fear getting close to others because of the risk of experiencing loss again.

In addition, adoptees may fear intimate relationships because they may unknowingly be involved with a birth relative, or because they are unsure what they might pass on genetically to their offspring. They may also have difficulty getting close to others as a result of their early experiences with bonding and attachment.

Infertility treatments may have robbed adoptive parents of the “joy of intimacy,” Kaplan said. As their child grows, adoptive parents may be reserved about expressing love physically with their children because they think the incest taboo might not function in adoptive families. Or they may avoid closeness with their child because they fear rejection or loss.

Parents who adopt older children do not have a chance to develop intimacy with their child the way parents do with an infant, such as by diapering and bathing the child.

Birthparents may connect the loss of their child with the sexual encounter that led to the pregnancy, and fear intimacy because they believe it leads to loss.

## 7. Control



All those involved with adoption have been “forced to give up control,” said Silverstein. “Adoption is a second choice. There has been a crisis whose resolution is adoption.”

Because human beings need to feel in control to feel secure, the loss of control in adoption can have a long-term effect

Birthparents may emerge from the adoption process feeling victimized and powerless.

Adoptive parents have learned to be helpless. “They’ve learned they can do everything and still remain childless,” Silverstein said. When they do receive a child, they may not be able to connect the event to anything they did. Adoptive parents who do not feel entitled to be their child’s parent because their actions did not lead to the child’s arrival can be lax in parenting. Those who try to re-exert control over their lives may overprotect their children or try to control them.

Adoptees are either too young to be consulted about their adoption or are offered little alternative. The haphazard nature of how they joined their families can result in their having difficulty understanding cause and effect. Consequently, they may act without a sense of cause and effect, leading to inability to take responsibility for their actions.

### **Working through the Issues**

Just because those involved with adoption must deal with these seven issues doesn’t mean it cannot be an enriching experience, said Kaplan. In fact, the growth that occurs as a result of working through these issues makes people more interesting. She believes it is essential for people to recognize that they have a right to be happy and that losses can lead to growth. Otherwise, they may become attached to their losses, preferring the familiar—if unpleasant—to the unknown but possibly happier view of life.

### **Working through seven core issues in adoption**

In the accompanying article, Sharon Kaplan and Deborah Silverstein point out the ways that adoptive parents, adoptees, and birthparents

may be affected by their adoption experiences.

While many people may realize that loss and grief are part of the adoption experience, they may not be aware of the impact these issues have had on their lives. For example, a woman may not realize that her irrational fear that her husband will leave her stems from feeling worthless because she couldn’t “give him” a child.

Kaplan and Silverstein suggest that people involved in adoption explore each of what they call the “seven core issues in adoption” to see how they have been affected by them. To do this effectively, individuals may want to go beyond their adoption experience and look at their feelings about themselves and their relationships.

For example, while it’s valuable to ask one’s self, “How has infertility made me feel out of control,” it is sometimes more effective to work backwards, asking, “How do I feel out of control? What experiences with infertility and adoption may have contributed to my feeling out of control?”

With that in mind, individuals can ask themselves questions such as these, some of which were suggested by Kaplan and Silverstein:

- \* *What losses have I had in my life and how have I coped with them?*
- \* *What or who am I afraid of losing? Is that loss a real possibility or is that an irrational fear? How might that fear be connected to adoption or infertility?*
- \* *In what ways do I feel inadequate or worthless or have low self-esteem?*
- \* *What do I expect from relationships? Do I think I must give more of myself to someone in order to have close relationships that withstand difficulty or do I have a series of short-term relationships or only superficial relationships?*
- \* *Do I feel I must be “on guard” with people so that I only show my best side or am alert to early signs of rejection?*
- \* *How do I describe or define myself? Do I feel I am masquerading in a role and fear that others will discover I am not what I appear to be [competent parent, successful entrepreneur, desirable spouse]?*
- \* *In what ways do I feel like a victim or*



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*controlled by others? How important is it for me to be in control of myself and of others?*

Perhaps the most important question for individuals to ask themselves is how they have grieved for their losses in adoption. Silverstein says if people don't know the answer to this question, it is likely they haven't grieved.

To grieve, it is necessary to get in touch with the feelings resulting from loss. People who haven't grieved for a loss suffered in the past may want to look at whether they have become "stuck" in a particular stage of grief: denial, anger, bargaining, or depression.

They may also want to look at behaviors they engage in that may keep them from experiencing the uncomfortable feelings associated with grief. Compulsive or addictive behavior such as overeating, substance abuse (alcohol, recreational drugs, or prescription drugs), or even exercising, cleaning house, or working excessively are all ways people distract themselves from feeling their emotions or numb themselves so they can't feel them.

Some people may want to explore these issues or seek help in grieving from a therapist, social worker, or other individual knowledgeable about adoption issues.

### Questions and Answers

*Q. How can I say to my daughter that her birthmother placed her for adoption because she couldn't take care of "any" child when her birthmother had another child who was not placed? When should she be told she has a biologic sister?*

A. You can still say that your child's birth-mother couldn't care for any baby born to her *at this time in her life*, as long as you emphasize that the birthmother's circumstances and not some quality in your daughter resulted in the adoption plan. It's very possible that the birthmother's circumstances changed since the birth of her first child; for example, she may have become ill. Or perhaps she learned with her first child that the responsibilities of raising a child were more than she was prepared to handle.

You can tell your daughter that her birthmother probably didn't place her other

daughter for adoption when she became ill or realized that raising a child was too difficult for her because her other daughter was already used to her being her mother and it would have been too hard for her to get used to a different mother, but that when she was born, her birthmother decided to place her for adoption right away so she and her new parents could get used to each other.

Children are likely to be confused about the idea of having brothers or sisters who don't live with them until they are old enough to differentiate between adoptive and biologic relationships. Sometime after the age of 6, your daughter will probably wonder whether she has any biologic siblings. If she doesn't ask the question directly, you can volunteer the information during one of your discussions of her birth family.

-LRM

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