

Children and Permanency: Perspectives on Relationships over the Life Span

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Sydney Ideas Event --- August 28, 2019



Created through the generosity
of adoptive parents,
Andrew and Virginia Rudd,
who wanted to improve the
lives of adoptive families and
their children through
research.



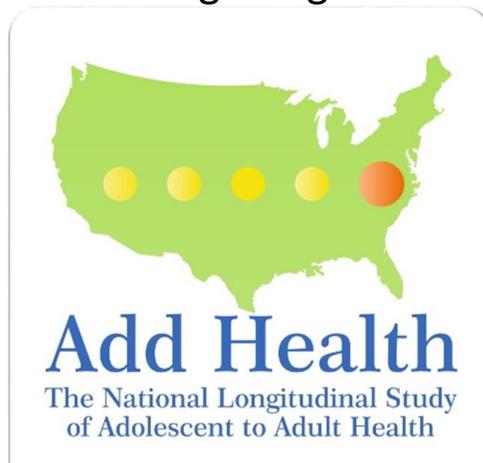


Mission



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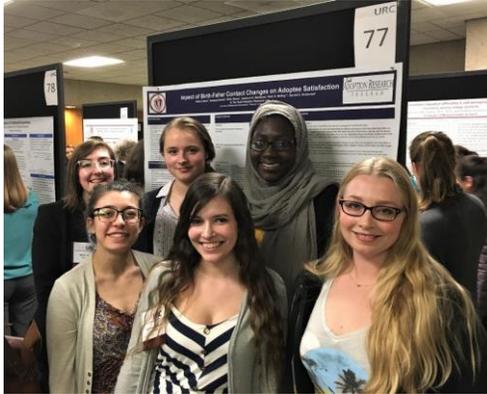
...to advance knowledge about the psychology of adoption through original research





Mission

...to mentor the next generation of adoption-competent researchers



Mission

...to engage with community partners to incubate, implement, and evaluate innovative programs that have potential for broad impact



Rudd
ADOPTION RESEARCH
PROGRAM

Mission

...to provide evidence-based knowledge to inform adoption practice and policy at agency, state, federal, and international levels



Rudd
ADOPTION RESEARCH
PROGRAM

Mission



<https://umass.edu/ruddchair/future/>

Mission

...to create an adoption-friendly campus at UMass Amherst.

Undergraduate Courses
 Research Lab Opportunities
 Parent Group for Faculty & Staff
 AMP – Adoption Mentoring
 Partnership
 ASAP – Adopted Student
 Advisory Panel
 Foster Youth Advisory Group



TODAY'S PRESENTATION

- Adoption in U.S. context
- Presentation based on our 30-year longitudinal study of openness in adoption
 - How do relationships between adoptive & birth family members change over time?
 - How do some thrive while others get off track?
 - What happens when adoptees come of age and take over contact?
 - How can professionals help?

5 Milestones in US Adoption History



I - 1851 Adoption Act

1851 – The Act to Provide for the Adoption of Children in Massachusetts

- Adoption as humanitarian gesture – charitable organizations
- Recognized adoption as a legal and social procedure based on the best interests of the child rather than the adults
- Gradual shift from “children for families” to “families for children”

2 - Orphan Trains



- Approx 200,000 orphaned or homeless children transported from Eastern cities to Midwest
- Began 1851 (charitable organizations)
- Ended 1929 (organized foster care)

3 - Stigma, Shame, & Secrecy

- Stigma & shame across the adoption triad
- Led to attempt to mimic biological families (“bionormative” bias)
 - Matching
 - Altered birth certificates (still today)
 - Sealed records
- Some children were never told they were adopted
- “Late discovery adoptees”

4 - Indian Child Welfare Act - 1978

- 1976 study : 25-35% of all Indian (US indigenous) children were being placed in out of home care.
- 85% were placed in non-Indian homes or institutions (incl. Indian Boarding Schools)
- ICWA states that Indian tribe (sovereign nation) has jurisdiction over its children - children cannot be placed in non-Indian home or institution over objection of the community
- “There is no resource that is more vital to the continued existence and integrity of Indian tribes than their children.”



Unseen Tears: The Native American Boarding School Experience in Western NY
<https://www.youtube.com/watch?v=ioAzzgmes8c>

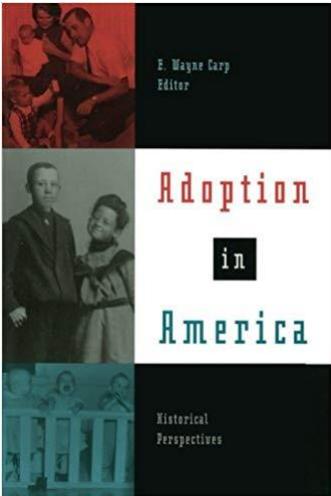
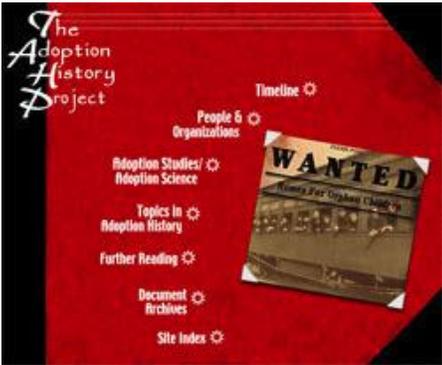
5 - Adoption Reform Movement



ADOPTEE RIGHTS LAW Sign up for legal news and advocacy updates



For more information...



ADOPTION IN THE US TODAY

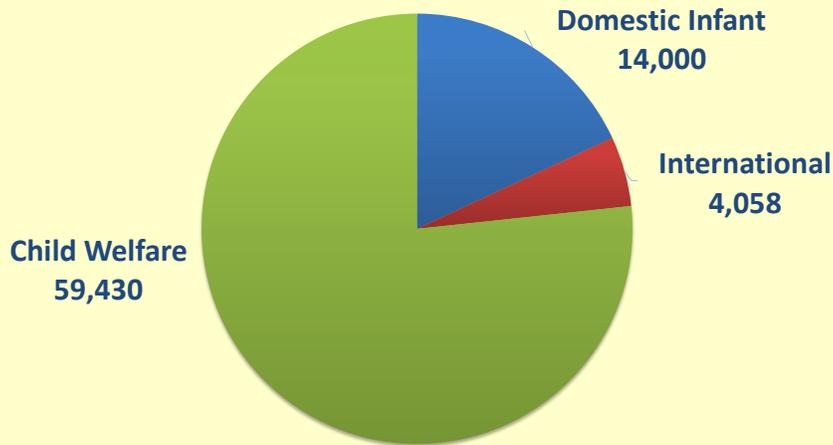


- Population 327.2 million
- 1,527,000 adopted children under age 18
- 50 states which prize their autonomy
- Adoption law is considered part of family law, which varies from state to state

Characteristics of the 442,995 Children in U.S. Foster Care System (9/30/2017)

- Avg. age 8.4 years; 52% Males; 56% non-white
- In care an average of 20.1 months
- **123,437** children are awaiting adoption
- Numbers in care and awaiting adoption have been rising over past 5 years

CURRENT U.S. ADOPTIONS PER YR



Sources: AFCARS; U.S. Department of State;
Child Welfare Information Gateway--updated 2019
Does not include stepparent adoptions.

MOVING FROM AN OLD PARADIGM...

Adoption is a legal process:
Parenting rights and responsibilities
are legally transferred from birth
parents to adoptive parent(s)

Child is "subtracted" from one family
and "added" to another

...TOWARD A NEW PARADIGM

The **Adoptive Kinship Network** is a permanent connection—through the child—between the birth and adoptive families.

The child has **psychological** membership in both families, even if the birth and adoptive family members never meet.

THE MOVEMENT FROM SECRECY TO OPENNESS – A PERFECT STORM

Began at private adoption agencies in the late 1970s to early 1980s

Why?

- Fewer babies to place, yet high demand
- Birth mothers less willing to lose all knowledge of their child
- Evolving view that contact may be in the best interests of the child (adoption reform movement)

CONTACT TRENDS IN THE U.S.

- 55% of private agency infant adoptions now include direct contact, 40% involve mediated contact, and only about 5% are totally closed
- Contact in child welfare adoptions is increasing. When not possible with birth parents, it often includes birth siblings and grandparents
- Contact in international adoptions is on the rise for certain countries of origin

IN A TYPICAL DOMESTIC INFANT OPEN ADOPTION

- Birth parent(s) selects the adoptive family with agency assistance
- Direct contact between birth family and adoptive family members
- Post Adoption Contact Agreement may be signed -- legally binding in some states, including Massachusetts
- Day-to-day dynamics are worked out by the participants with little professional support

...Nevertheless,
adoptive parents
are the legal
parents and have
all legal parenting
rights and
responsibilities.



OPEN ADOPTION CONTACTS MAY...

- Include meetings, phone calls, social media (Facebook etc.); exchange of pictures, gifts, letters, e-mails, etc.
- Involve a variety of people
- Vary in frequency, as those involved decide for themselves how often
- Have verbal or written agreements that vary in flexibility, legal enforceability
- **WILL** change over time, as participants and circumstances change.

INITIAL CONCERNS ABOUT OPENNESS

Adopted children: confusion, leading to problems with self-esteem, identity, and mental health

Adoptive parents: fear intrusion, lack entitlement to feel like “real” parents

Birth parents: continual unresolved grief, inability to adjust to changed role

ADDED CONCERNS ABOUT CONTACT: CHILD WELFARE SYSTEM ADOPTION

Adopted children: safety risks, consequences for mental health

Adoptive parents: fear of intrusion and for safety of child and family

Birth parents: feelings of anger, shame, guilt; differing reactions within extended family; birth parent(s) dealing with mental illness or substance abuse

OUR RESEARCH FOCUS: DOMESTIC INFANT ADOPTIONS



Overarching Research Questions



- What are the links between openness arrangements and psychosocial outcomes for adopted persons, adoptive parents, & birth parents, considered over time from placement to 30 years later?
- How are relationships managed within adoptive kinship networks over time?

THANKS TO OUR RESEARCH TEAM

- Hal Grotevant, University of Massachusetts Amherst
- Ruth McRoy, Boston College
- Gretchen Wrobel, Bethel Univ. (Minnesota)
- Susan Ayers-Lopez, Univ. of Texas-Austin
- Dongwei Wang, UMass Amherst
- Jessica Matthews, UMass Amherst
- Rachel Farr, Univ. of Kentucky
- UMass Grad Students: Krystal Cashen, Karin Garber, Albert Lo
- Boston College Grad Students: Kat Nielson, Christina Sellers, Addie Wyman Battalen
- Many talented graduate and undergraduate students and volunteers over the years

SINCERE THANKS TO OUR RESEARCH PARTICIPANTS AND OUR RECENT FUNDING PARTNERS



*Ofc of Population Affairs
US Dept of Health &
Human Services*



The Rudd
Adoption Research Program
at the University of Massachusetts Amherst



WILLIAM T. GRANT FOUNDATION
Supporting research to improve the lives of young people

PARTICIPANTS

- **190 adoptive couples:** mostly white, middle to upper middle class; mean age 40 years at Wave 1
- **1 target child per family:** followed from middle childhood to young adulthood; approx. half females; infant placements (average=4 weeks); no transracial, international, or special needs
- **169 birth mothers:** 93% white, ages 14-36 at placement (M=19.3 years); all voluntary placements, wanted a better future for child

CONTACT at WI (c. 1987)

Confidential adoptions	32.6%
Stopped mediated	8.9%
Ongoing mediated	27.4%
Fully disclosed	31.1%

N=190 adoptive families

Grotevant & McRoy, 1998

LONGITUDINAL STUDY DESIGN

Wave 1: 1987 – 1992

Middle childhood (ages 4-12; mean 7.8 yrs)

Wave 2: 1996 – 2000

Adolescence (ages 12-20; mean 15.6 yrs)

Wave 3: 2005 – 2008

Emerging adulthood (ages 21-30; mean 25 yrs)

Wave 4: 2012 – 2015

Young adulthood (ages 25-35 mean 31 yrs)

PROCEDURES

- Waves 1 and 2: Home visits to adoptive families. Visits or phone interviews with birth mothers
- Wave 3: Interviews and questionnaires administered online
- Wave 4: Online questionnaires; follow-up phone interviews with some birth mothers

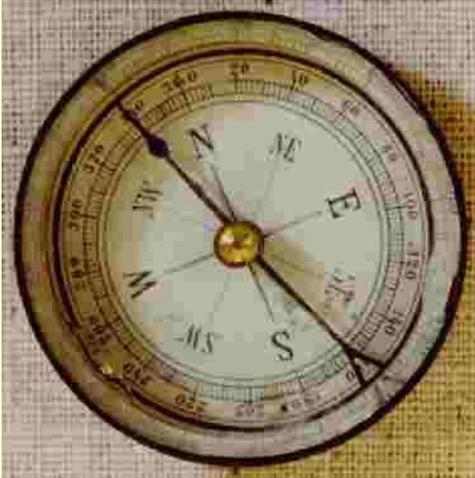
METHODOLOGY

- **Multiple respondents**
Adopted child, both adoptive parents (W1,2,3), agency staff, birth mother (W1,2,4), relationship partner (W3)
- **Multiple types of measures**
Extensive personal interviews, standardized questionnaires, family interaction task (W2), school records (elementary school into college)
- **Quantitative, qualitative, and mixed methods**
- **Technology used**
Web-administered online interactive interview (chat) at W3 for young adults; online measures at W3 and W4

TRAJECTORIES OVERTIME

No contact	41.6%
Stopped contact	13.7%
Limited contact	26.3%
Extended contact	18.4%

Grotevant, Wrobel, Fiorenza, Lo, McRoy, 2019



**NAVIGATING CONTACT
BETWEEN ADOPTIVE AND BIRTH
FAMILY MEMBERS OVERTIME**

**PLACEMENT
TO MIDDLE CHILDHOOD**



**Figuring Out the
Relationship Dance**



What are the adoptive parents thinking?

- Do they acknowledge the child's dual connection?
- What does it mean for them to be in a relationship with the child's other mother?

NO CONTACT **one adoptive mother's view**



My job is to protect my daughter and do what is best for her and give her the most stable, normal life there is.... My goal is that she would never feel any different or think of herself any differently than Joey [older biological son]. This gives a level of normalcy, stability, unity, and cohesiveness that I am very quick to defend and very protective over.



FREQUENT CONTACT **another adoptive mother's view**

“

To me, when you're going into adoption you have to be willing to accept the fact that the biological parents are in the picture, and if they're not in the picture you wouldn't have a child. That's just the bottom line, and to recognize that, and that they have rights too -- to know their child is alive and well and healthy and being taken care of.

”

What are the birth parents thinking?

- Have they accepted the finality of the placement?
- How might their sense of loss, anger, shame, and/or guilt influence their positioning?
- What does it mean for them to be in a relationship with the child's other mother?

Regulating Emotional Distance



COMFORT ZONE OF INTERACTION

- Individuals have "range of tolerance for separation and connection—a comfort zone." (Farley)
- In an adoptive kinship network, differences in comfort contribute to a dynamic process of connection and separation over time.
- Adoption often pulls adults out of their comfort zone.
- Ideal: mutually agreeable fit. Reality: mixed, like all families.

(Grotevant—2009)

“We used to write daily and call each other weekly, in the beginning. When the children were real little, it was tremendous intensity. And I think as our birth mother became more secure in herself and went on to finish college, her need to see them once a week or once a month became less and less. And you know, she feels more comfortable with us, we feel more comfortable with her, and we just know that we always have access. You just take it one day at a time. **If you want it to work, you’ll work at it.** We feel it’s healthy and want it to work because of our children.” (adoptive mother)

FEAR OF RECLAIMING

Comparing closed, mediated, and fully disclosed adoptions – least fear of reclaiming was in fully disclosed

DIVERGING CONTACT NEEDS

- Adoptive parents initially want to establish “their family” boundaries -- gradually become more confident and more open
- Birth parents initially feel “one down” – may feel insecure – some continue to have their own problems. Some gradually move on, some establish new relationships, some find it too painful to have much contact

BENEFITS OF CONTACT

- Children know the truth
- Access to ongoing health information
- Larger family circle of love and caring
- Contact can be normalized from an early age

ADOLESCENCE



**I don't want to
be different ...**



Teenage years



- Want to feel “normal” from a “normal family” and NOT DIFFERENT.
- Busy time – FRIENDS, school, activities
- Becoming independent while remaining connected to family
- Parental sensitivity needed – teen years can be difficult, even in the best of circumstances

Where does adoption fit in to life?

We asked MTARP adolescents...

Please rank the following areas in terms of their importance to you:

- occupational future
- friendships
- religion / spirituality / morality
- my health
- family in the future
- adoption

Ranking of Adoption by MTARP Adolescents



**Note: Rank 1 = most important;
Rank 6 = least important**

Two important adoption connections with teens

- Main thing teens want to understand is WHY?
- Family events (especially graduations, weddings, holidays) require consideration of Who is invited? Who is considered to be family? What are their roles to be?

Challenges in Contact



Uncomfortable Meetings

I: And where did the meeting take place?

R: At the mall ... I think it was a pizza place and we were just eating.

I: And was that an arranged meeting or did you just run into her?

R: It was an arranged.

I: OK. And what happened at that meeting?

R: Well, we talked and I felt really uncomfortable.

I: What do you think made you feel uncomfortable?

R: I don't know, she cried, and she was hugging me, it was just weird.

I: More than you'd like to have it?

R: Yeah.

Challenges with Letter Exchanges

I: How do you feel about receiving or not receiving letters?

R: I have no problem receiving them - it's sending them that I have a problem with because I don't know what to say. ...

I don't know what she expects me to say. I don't know the impression I'm giving from the letter because I know the impression I'm trying to give, but is not always there - cause it's a letter and you don't get to hear the sound of your voice.

Inconsistency and Broken Promises

I: If you could ask your birthparents any 3 questions, what would they be?

R: Well, I'd ask my dad why he did that.... Because I called him on the phone and he said, "All right, I'll give you a call tomorrow." And he never did. I'd ask him why he did that. Why my mom doesn't call anymore and never writes to me really.

Contact Faded Away

I: If you had 3 questions that you could ask your birthparents, what would they be? ...

R: Why don't you spend more time with me? Am I very important in your life? If you ever met me, would you still remember me or forget me?

I: Is that your birthfather that you'd direct that to or your birthmother, also?

R: Both.

Extra Relational Work for Extended Contact

“It’s just been, like such an awesome experience...and like hard, I guess, at times... You always have to, you know, consider everyone else’s feelings, too.”

(Adopted adolescent, Wave 2)

Child adjustment is less a function of contact *per se*, than of how satisfied the family members are with their contact arrangements. Greatest dissatisfaction occurred when adoptive family members wanted more contact, but were unable to bring it about.

(Grotevant, Reuter, Von Korff, & Gonzalez, J of Child Psych & Psychiat, 2011)



What Does It Take to Make Contact Work?

- Adult commitment; keeping promises
- Sensitivity to preferences of child
- Realization that teen years can be tough even in the best of cases
- Contact may make teens feel different and “not normal” – may not appreciate importance until older

EMERGING ADULTHOOD



**Time of identity
exploration but also
some uncertainty**



Emerging Adulthood...

- Roughly ages 18 into late 20s
- Higher education or training, entry into work and family commitments, busy time
- Both adoptive identity and ethnic / racial identity become important

Emerging Adulthood & Adoption

- Main questions are about medical and health background information, even if there is contact
- Intersects with plans for getting married and having children

No Contact

Desire for Health and Medical History Only

“I would like to have a little more medical history. I’m just more curious more [than] anything, especially now that I have a child... I’m not quite sure I’m ready to involve her [my birth mother] in my life with my child”

(Adopted emerging adult, Wave 3)

Stopped Contact

Contact Fading Out or Ending

“The communication just stopped...I am guessing she [her birth mother] moved. Or she got too busy with three kids... I don't have time to think about where she is, or should I contact her”

(Adopted emerging adult, Wave 3)

Stopped Contact

Contact Not Working Out

“My [adoptive] mother felt like she [my birth mother] was intruding, and I believe she felt threatened.... The only reason I am not pursuing a relationship with [my birth mother] right now is out of respect for the mother that raised me.”

(Adopted emerging adult, Wave 3)

Limited Contact

Keeping Contact Limited

“I wish I had more contact with her [my birth mother] and her family, but I understand that they have their lives and I have my life.”

(Adopted emerging adult, Wave 3)

Limited Contact

Challenges in Negotiating Increased Contact

“She is trying too hard...I wanted to find her to say thank you for giving me life...I was glad to meet her but I am not ready to make her a part of the family.” ...

“I wanted to find her. And I had good reasons for it. I just wish that someone could have helped me to know what might possibly happen after I found her and helped me work through it.”

(Adopted emerging adult, Wave 3)

Adoptive Kinship Network Dynamics

- Adoptive parents typically step back and let young person decide how to continue contact
- At the same time, adoptees' partner may have influence over contact
- As children come into family, what about adoptive and birth grandparents? – How are they to be involved in the life of their grandchild?

YOUNG ADULTHOOD

**Getting established
and settling down...**



Young Adulthood

- Late 20s to mid 30s – getting established in work and family, becoming parents
- Many young adults continue to rely on parents for emotional and material support well into their 30s
- Better able to reflect on histories and integrate good / bad, accept and forgive

What is the most important thing you would like to tell us about your being adopted?

I feel loved by my birth mother who made the decision to give me and my brother up for adoption because she couldn't give us the life she wanted, and loved by adoptive parents because they chose us for life.

It means that I have a flexible and unique definition of family. It is not determined by blood. It consists of those around me who love and support me. They make me a better person.

Adoption honestly doesn't affect my day to day life - when it comes up, I'm not embarrassed to tell anyone – it does make me feel different, but not in a bad way. I'd consider it to be more of a unique and special quality about myself.

I love both sets of parents and am glad to have been a part of both families. Now that I am married I have 3 families.

REMARKABLE INSIGHTS

“

I feel adoption has given me a lot. A complete sense of perspective that not a lot of children and young adults, or adults have for that matter. It has allowed me to be completely accepting of others' families, and be able to see issues within families that I wouldn't have normally been aware of or really even cared about. ...I like the view point it gives me.

”

(age 27)

ONGOING CONTACT

Birth Mother's View at W4

“People say, do you have kids, and I say, yes, I have a child, but it's a little bit of a different situation. I mean at parties, at work, whatever, I'm always very open about him, and he and his parents and his sister and his grandma and his aunts and uncles are absolutely a part of my family. So I think, I think it has expanded my definition of family, which is a wonderful thing.”

5 TOUCHPOINTS FOR PRACTICE

- Reframe family in terms of child's dual connection to birth & adoptive family
- Commitment to the relationship because it is in the best interests of the child
- Emphasize need for adults to work together:
 - Effective communication
 - Flexibility in day-to-day arrangements
 - Keeping commitments & being consistent
- Listen carefully to the adopted child
- Provide ongoing support when needed by birth or adoptive family members

UMassAmherst

Thank you for your
interest!



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