

Adoptive Parents & Expectant Parents Alike Preparing for a Healthy, Lifelong Relationship

by Leslie Foge, MA, MFT

A pregnant woman sits in comfortable office across from a man and his wife—possibly the couple who will raise her unborn child. She has seen pictures of them, their house, their dog, and have had numerous phone calls over several weeks, but this is the first time they have met face-to-face. All three smile nervously at each other. Though the phone calls have dispelled some of the tension, none of them have ever been in a situation remotely like this one. How should the conversation begin? What should they say? The husband clears his throat and says, "We were hoping to tell you a little bit more about our road to adoption and why we want to adopt a baby..."

In some domestic infant adoptions, expectant parents and adoptive parents are able to establish direct communication with one another. However, there are powerful emotional forces on both sides that can make communicating clearly and honestly a challenge. For the sake of the child, it is important to overcome these emotions. Important work can be done to build a healthy, lifelong relationship between a child's birth and adoptive families.

Once a match or a placement has happened, the work begins of developing a relationship that will stand the test of time for the adults involved in an adoption. Regardless of the timeframe, it is never too early or too late to start the relationship-building process between the expectant and adoptive families.

At the time of placement, the practical aspects of transfer of custody often take center stage. In order for legal obligations to be filled, the process can become about dotting I's and crossing T's. However, establishing healthy family relationships should be considered just as crucial. In a healthy adoption, all triad members and

their extended families are important. Their needs should be considered and compromise should be the name of the game. The integrity of the adopted child's genetic and adoptive heritages is honored with the hopes that the child will then be able to honor and embrace the wholeness of him/herself.

In the early stages of a birth family/adoptive family relationship, the focus should be on getting to know each other organically, even if the relationship needs to start out by phone. If this is prior to the birth of the child, a "match" will have to be agreed upon. Be careful not to feel compelled to "match" unless you have felt ease about talking about your bottom-line beliefs with each other. What are your hopes regarding ongoing contact and openness? Is spirituality an important consideration for you? What are the health histories, including mental health and substance abuse histories, for both the expectant and adoptive parents? What kind of support does each parent have for an open adoption from family members and friends? What is the expectant parents' and adoptive parents' commitment to the adoption process if the baby is born with severe disabilities? Identify topics you would like to talk more about in the near future. Often it is helpful to have social workers or counselors to help with these conversations. However, it is imperative that these conversations occur between the expectant/birth parents and pre/adoptive parents, adult to adult, in service of the child's best interests.

Some of the topics that adoptive parents and expectant parents need to broach with each other are complicated and delicate. These kinds of conversations require well-developed communication skills: you must be able to listen carefully as well as speak clearly and honestly. You may wish to have an adoption counselor facilitate these interactions. You will need to navigate sensitive adoption issues such as the nature of the relationship

you are creating in the near future; ideas about the long-term future of the relationship; your commitment to one another; your commitment to the child; and qualitative openness. (Qualitative openness refers to the quality of the relationship rather than just the frequency of contact or visits. Both sets of parents can demonstrate open-heartedness in adoption by mindfully and compassionately including their children's other parents and extended family in their thoughts, words, and actions.)

In my work with adoptive families in these formative stages, I emphasize developing empathy for all members of the adoption triad, including oneself. Birth parents, adopted children, and adoptive parents have grief about their respective losses. While the losses for birth parents and adoptees are easier to see, adoptive parents have significant losses as well. What they may have expected to be the simple process of becoming parents has often turned out to be a long and difficult journey, over the course of which they have had to give up many things, including privacy, control, and in some cases the ability to continue their family bloodlines. Each triad member needs to acknowledge their grief, talk about it, normalize it, accept it (the grief, not necessarily the loss) and have self-compassion. Once each triad member feels validated in the full range of their feelings, they will be much more likely to be able to tolerate and empathize with the experience of the other. I believe that if birth parents and adoptive parents can respect and understand one another's feelings, conflict that may arise can be successfully negotiated without putting the child in the middle or using them as a buffer to the adults' feelings.

It was about a month before Bianca was due to give birth. She had been matched with Stephanie and William for one month, and she and her mother Inez had met with them several times. The visits had gone well—Bianca and Inez felt very comfortable with Stephanie and William, and vice versa. But today, the group needed to talk about plans to name the baby, which felt like a potential point of conflict. Everyone was nervous about starting the conversation.

Part of building a healthy family relationship is being able to work through conflict. In the beginning, both pre/adoptive parents and expectant/birth parents are trying to make a good impression on one another, but one needs to be careful about getting into the habit of avoiding difficult topics. I have heard both pre/adoptive parents and expectant/birth parents say they feel as though they are walking on eggshells around each other. Addressing "hot" topics and maneuvering through conflict successfully early on can pave the way for success later.

In my practice, I usually spend some time with the expectant/birth family and the hopeful pre/adoptive families separately, to flush out the topics each person wants to be addressed. With an agenda set we, as a group, tackle each topic respectfully, listening while each person speaks of their desires and fears.

Stephanie and William had a family name picked out – that of Stephanie's grandmother. After their long struggle with infertility, they had many strong emotions about connecting their child to their familial heritage. Bianca had hoped that her name would somehow be included in the baby's name, as a way of expressing her love for and connection to a child she was not able to raise herself. Once the topic was broached, each person took turns expressing their desires while the others listened attentively. They were able to understand that no one in the room was trying to "claim" the baby as exclusively their own, and move together towards a solution that everyone felt good about. The baby would be named after Stephanie's grandmother, and given the middle name of Bianca, a permanent tribute to the woman who gave her life.

It is not uncommon for adoption placements to happen very quickly, in which case the building of the open relationship happens mostly after-the-fact. The period after the birth of a baby placed in an adoption is a period unlike any other. The birth parents' developmental tasks are to reconcile their decision to place their child for adoption, begin the grieving process, and develop positive hopes for the future. The adoptive parents are joyful and relieved, celebratory and fulfilled. At the same time, they may be haunted by grief for the birth parents' loss and sometimes they can also be fearful and insecure. Their task is to claim this baby as their own, attach and bond, thinking of ways as parents that they can communicate their child's story to him/her as s/he gets older. Both adoptive parents and birth parents can benefit from having someone to talk to about this difficult but inspirational transition.

Sometimes, birth parents and adoptive parents are encouraged to leave each other alone during the post-partum period, to settle in with new roles and responsibilities. But that does not mean that they shouldn't be supportive of each other. If all members of the triad family are healing, the entire adoption will be healthier. For example, if the adoptive parents know that the birth family is getting good support and care from family members and friends, they can start to turn their attention to bonding with the baby. If adoptive parents can be open to helping the birth parents by being open to contact, the long road of healing can begin for all. A birth mother can do a lot to encourage adoptive

parents' sense of entitlement by complimenting them on their parenting or reiterating their choice of adoptive parents, but ultimately the feeling of legitimacy needs to be developed within the adoptive parent themselves. Similarly, birth parent grief can be soothed by the adoptive parents' support, as they remind the birth parent how important they are to the adoptive family and especially to the child. That said, the grieving process is a road that the birth parent has to walk alone for the most part. It will serve both the adoptive parents and the birth parents well to remember that theirs is a long-term relationship that will take care and attention to maintain. As adoptive and birth parents work together to craft their own personal open adoption, they may not have the full unconditional support of their family members and friends. They will need to keep focusing back to the child to inform them about their intentions and tone.

Another important way to take care of yourself during this period is to find a supportive community of people who share your experience. I regularly meet birth moms who tell me that they have never talked to or met another birth parent. On Your Feet Foundation (www.onyourfeetca.org) is an organization that provides birthmothers with mentoring, educational and vocational guidance, educational grants, and a network of peers who meet, socialize, heal, and support each other. Similarly, if I had one piece of advice to give adoptive parents, it would be to stay connected to the adoption community. An organization like Pact provides opportunities for education, support, and social activities with families like your own. Other adoptive families are resources you can turn to for questions about development stages, openness issues, boundary-setting, communication with others, referrals to professionals, and more.

I highly recommend that all adoptive and expectant birth parents strive for direct contact (face-to-face if at all possible) during the preparation phase of adoption, and that they put all their hopes, fears, and questions on the table, maneuvering through conflict if necessary. Make room in the process to acknowledge the loss that all parties are experiencing. Always keeping the child's best interests in mind, adoptive parents and birth parents must negotiate how they can best support each other—and when that support should come from other sources. I believe that many adoption difficulties can be minimized by some specific preventative work. Take advantage of the opportunity to get to know your child's other family to set the stage for a healthy adoption – a lifelong relationship.

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