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# Best Practices for Engaging Birth Mothers in Post-Adoptive Grief Work

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## Best Practices for Engaging Birth Mothers in Post-Adoptive Grief Work

by

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MSW Clinical Research Paper

Presented to the Faculty of the  
School of Social Work  
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The Clinical Research Project is a graduation requirement for MSW students at St. Catherine University - University of St. Thomas School of Social Work in St. Paul, Minnesota and is conducted within a nine-month time frame to demonstrate facility with basic social research methods. Students must independently conceptualize a research problem, formulate a research design that is approved by a research committee and the university Institutional Review Board, implement the project, and publicly present the findings of the study. This project is neither a Master's thesis nor a dissertation.

### **Abstract**

Birth mothers who have placed one or more children for adoption experience a variety of difficult emotions both during and after the placement of the child. The literature reveals the idea that there needs to be an increase in the support available to birth mothers following placement. The literature also discusses the grief that birth mothers experience post placement and the importance of addressing and helping birth mothers grieve. However, there was a lack of research suggesting the best ways to engage birth mothers in post-adoptive grief work. This systematic review aims to examine past research to reveal the best approaches to increase birth mother participation in post-adoptive grief work. This was done by reviewing a total of 12 articles and abstracting common themes from all. Of the 12 articles, all of them discussed birth mothers and the grief experienced as well as recommendations for practice. None of the articles discussed successful programs already in place for post-adoptive birth mothers. After analyzing the articles, four common themes were found. Implications and recommendations for practice and gaps in the research are addressed to provide proper post-adoptive grief work to post-adoptive birth mothers, including an emphasis on counseling pre-placement.

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## Introduction

Placing a child adoption can be a difficult experience for any birth mother to go through. It is filled with both times of joy at the birth of a child and a reaction of grief to the loss they are experiencing. Post placement, birth mothers can experience a grief similar to parents who have experienced the death of a child (Claridge, 2014). A birth parent is defined as a man or woman who has placed one or more children for adoption, therefore relinquishing all parental rights to said child. Following the placement of a child, many emotions are often present including depression, sadness, shame, grief, loss, and guilt (Cortes, 2012).

There are two types of relinquishment; *voluntary and mandated*. A voluntary placement is initiated by the birth mother as she makes the decision of her own free will. A mandated relinquishment is when a birth mother's rights are terminated by law due to a variety of factors (such as threat to the child, use of drugs/alcohol during pregnancy, etc.). Both types of relinquishment bring forth their own type of grief. If the *decision* to place a child was voluntary, the grief is usually due to the severing of the bond between birth mother and child, which is a loss to birth mother. This type of loss is known as ambiguous loss (Impact of Adoption on Birth Parents, 2012). This broken bond and these difficult emotions are challenging to overcome without support available (Impact of Adoption on Birth Parents, 2012).

Unfortunately for birth mothers, when they voluntarily choose to relinquish their parental rights, they often do not receive support because people who hear of their decision feel they should not grieve because the choice to place for adoption was their own. However, this is not necessarily true. Birth mothers will often grieve to some extent for many years post placement (March, 2014). The grief looks differently depending on the factors surrounding them during

their time of placement, the support available to them, and how and if they deal with the loss of their parental rights.

Most birth mothers who relinquish their child to adoption do not participate in post-adoptive grief work. One agency in Minnesota reported they used to have a high participation in post-adoptive grief work. There was a support group meeting regularly until the early 2000s. Since then, the agency discontinued the group due to decline of participation. From that time on, the agency sees an average of 10-15 post-adoptive clients (but this is including all parties in adoption, not just birth mothers) per month out of approximately 800 placements (R. Anfinrud, personal communication, April 5, 2017). The decline participation is problematic since birth mothers who place a child for adoption may still experience grief. However if they are not participating in grief work or working through their grief, it may be coming out in other areas of their lives. This can emerge in many ways such as increased risk of self-injurious behaviors. This can manifest itself as increased drug and alcohol use, higher rates of self harm, higher rates of depression, anxiety and other mental illness, as well as being more likely to be in a similar situation in the future (Wheeler-Roy, 2004).

It is important for social workers to find the best practices to engage birth mothers in post-adoptive grief work. Part of the National Association of Social Workers Code of Ethics states that social workers have a commitment to clients to promote client well-being. Since adoptions are often facilitated by social workers, it is the duty of those social workers to ensure they are advocating for birth mothers post placement and helping them work through their grief. With the knowledge that birth mothers who have not worked through their grief are more likely to engage in self-injurious behaviors, social workers in other settings may come in contact with post-adoptive birth mothers due to the consequences of those behaviors (Wheeler-Roy, 2004).

Early interventions to engage birth mothers in grief work could help to diminish the number of birth mothers that are seen by social workers in other settings as a result of unaddressed grief.

There are preventative services available at many adoption agencies, but the lack of participation by birth mothers causes the programs set in place to be less successful and therefore seem less available.

Despite the knowledge that post-adoptive grief work is important for the well-being of birth mothers, there seems to be a lack of participation in post-adoptive grief work. Due to this lack of participation, there seems there is also a lack of support available. The two go hand in hand. Generally if support is available to birth mothers, it can include one-on-one counseling, peer to peer mentoring, or a support group. There are many ideas and practices that are thought to be productive forms of support. This study sought to find the best practices for engaging birth mothers in formal post-adoptive grief work. Because the grief looks different for both types of relinquishment, the best practices for engaging birth mothers in post-adoptive grief work will also look different. Therefore this study focused on voluntary relinquishments. A systematic review was selected because it is the study typically used to identify best practices and gaps found across studies.



## Literature Review

### Introduction

There are a variety of emotions that are present following the placement of a child for adoption. The grief that comes along with adoption may last a lifetime. Many birth mothers experience this grief in different ways and for different reasons. Even when the decision to place a child for adoption is voluntary, a birth mother will still experience a sense of grief and loss to some extent (Impact of Adoption on Birth Parents, 2012). One of the explanations of this grief may be due to ambiguous loss, which is defined as “loss when a loved one is physically absent but psychologically present (Boss, 2009)”. There is a bond that is developed between a birth mother and her baby during pregnancy. This attachment is disrupted when a child is placed for adoption. Besides experiencing the grief of the broken attachment, when a birth mother is grieving this broken bond, there often has been little support available to her as the loss is viewed as a choice. Therefore society has assumed that birth mothers will not and should not experience these emotions of grief because they essentially knew what they were choosing (Impact of Adoption on Birth Parents, 2012). The end result may be a sense of guilt and shame for birth mothers and this stigma does not allow them to process the grief they are experiencing (March, 2014).

When support is available, it is typically not utilized by birth mothers. One example of support offered to a birth mother is creating a greater availability of opportunities to discuss the placement. Some of these opportunities can include meeting with their social worker who assisted in the placement for grief counseling or meeting with a support group. In doing so, birth mothers are found to have better adjustment as they are able to process their emotions and work through the grief (Neil, 2004). An open adoption can be another form of support for a birth

mother, but that does not mean grief is nonexistent. Openness allows a birth mother to have some peace with her decision because she is able to see how her child is growing up in his or her adoptive family. She has access to know if her child is healthy and taken care of. In closed (or confidential) adoption, much of the grief comes from a sense of wondering how the child is doing, who they look like, their safety, and their success. Regardless of the amount of openness, a birth mother will continue to experience grief and loss at some point in her life (Cortes, 2012). Therefore it is important she works through and acknowledges this grief early on post placement.

### **Effects of Grief**

If a birth mother has not had support throughout her pregnancy and adoption planning, the grief experienced post placement can be even more detrimental. Oftentimes a birth mother without support during her pregnancy decides to place for adoption because she does not have the support in place to feel able to successfully parent. Post placement, many birth mothers feel the similar feelings of loneliness and isolation experienced during their pregnancies, causing them to grieve the placement of their child alone (Dinwoodie, 2015). Birth mothers who experience this “postrelinquishment isolation” can feel a lack of emotional support and they may feel unable, or unwilling, to talk about the placement of their child (Madden et al., 2017). This, again, can be due to the societal stigma that comes with being the choice of the birth mother. She is made to feel that she cannot grieve the placement of her child (Impact of Adoption on Birth Parents, 2012).

There can be detrimental effects to a birth mother who does not deal with her grief. These effects can include self-destructive behaviors due to feeling the need to punish themselves for the decision to place their child for adoption (Cortes, 2012). In one study, birth mothers were interviewed to assess their grief post placement. The study found that grief was highly likely to

be a driving factor in these behaviors (March, 2014). These behaviors can include: “disruptive marriage/ relationships, addiction, clinical depression, and overprotectiveness of any additional children” (March, 2014). March indicates that this could be a sign of the posttraumatic stress disorder of placement that a birth mother may be dealing with (2014). She states, “Women who face these types of situations are more likely than men to be involved in psychiatric treatment programs and/or social support services and those who are identified as birth mothers may have their placement assessed as a precipitating factor for their current predicament and their emotional response diagnosed as pathological (March, 2014). Even if a birth mother places her child in what she believes is the best interest of the child, a birth mother can feel as though she “rejected” her child (Impact of Adoption on Birth Parents, 2013). If these feelings continue, counseling may become necessary. Therefore it is important for birth mothers to be informed and allowed to deal with the grief they are experiencing, and encouraged to try to work through some of that grief even before placement occurs (Johnson, 2012).

Despite the knowledge that birth mothers need to work through their grief, there is little publicly known about the feelings related to an adoption. The majority of people have not experienced placement and are uninformed or able to relate to or support a birth mother. The emotions birth mothers experience need to be further explored and made knowledgeable to those outside of adoption in order to improve the practices to help birth mothers work through the feelings that come along with placement (Cortes, 2012). Because these emotions may not be public knowledge, the majority of counseling centers are unable to counsel in the most effective way for clients who have placed for adoption.

Grief can also manifest itself multiple years after a placement, even if a birth mother thinks she has worked through it. Cortes discusses that the feelings of grief and loss can surface

about 12-20 years following a placement (2012). This further shows that grief in a placement, even if voluntary, does not simply disappear without being worked through. Studies even show that more than half of birth mothers who have been surveyed report that placing their child for adoption was “the most stressful time in their life (Neil, 2004)”.

### **Importance of Post-Adoptive Grief Work**

Early on post-placement, challenges can occur when parties in an adoption experience unmet expectation as they adjust to the placement. Sometimes, adoptive families may feel pressure to provide the support a grieving birth mother may need by providing emotional supports or contact with the child. Although support and contact are not necessarily a negative decision, it cannot be the only way a birth mother processes her grief (Faase, Bobo, Magnuson, 2014). Post-adoption services need to be set in place to help birth mothers develop the healthy coping strategies to deal with this loss. Ideally, these options should be made known to a birth mother prior to the finalization of the adoption, so she has the knowledge and can utilize these options and strategies post placement (Faase, Bobo, Magnuson, 2014).

Studies suggest there are a multitude of services that can be, and arguably should be, offered to a birth mother to help her with her grief and loss. A ritual around the time of placement, such as an entrustment ceremony, honors both the birth mother and the adoptive family, as it is a physical display of the transfer of parental roles. In an entrustment ceremony, a birth mother is able to place the child in the arms of the adoptive family, allowing her to place her child with the adoptive family she has chosen to parent her child. This allows the birth mother to say goodbye to her child and to maintain some sense of control as she is reminded that this is the family she chose to raise her child (Impact of Adoption on Birth Parents, 2013).

Support should also be available in the form of a counselor. A counselor needs to be able to understand, or attempt to understand, what a birth mother is experiencing in order to offer the correct and appropriate support for her situation. Studies show the ability to share feelings openly can be helpful to move towards healing and through the stages of grief in the hope of reaching some resolution (Impact of Adoption on Birth Parents, 2013). A counselor needs to be able to support a client by allowing her to express these feelings, and be able to bring her back to reality if those feelings become a fantasy of reversing the adoption or co-parenting her child. These feelings can help a birth mother ease the pain, but an effective counselor's role is to assist a birth mother in accepting her role as birth mother (Impact of Adoption on Birth Parents, 2013).

Another form of support that can be beneficial to a birth mother is talking with someone who has walked a similar adoption journey. In the midst of feeling alone and not understood, a support group or mentorship can help a birth mother feel connected with someone else who understands their experience. Since all birth mothers are different, there needs to be multiple sources of this type of support (Impact of Adoption on Birth Parents, 2013). A support group or mentorship may be helpful for a birth mother who likes to discuss with someone in person. For other birth mothers, a website, blog or book that includes personal stories of birth mothers is a form of support that would assist them in their grief journey (Impact of Adoption on Birth Parents, 2013). Grief work can be tailored to each individual birth mother, but a framework can be set in place ahead of time.

An open adoption can help a birth mother even further with her grief. Because an open adoption allows a birth mother to continue to have contact with her child, it can help give birth mothers a sense of peace. Each adoption relationship is unique, but birth mothers benefit from information about their child in an open adoption (Impact of Adoption on Birth Parents, 2013).

The agency can assist the birth mother in navigating this relationship to benefit all parties involved.

### **Summary**

As research shows, post placement can be an emotionally trying time for all parties in adoption, but it is especially difficult for birth mothers. One quantitative study that interviewed post-adoptive birth mothers states that all the women they interviewed had experienced “an overwhelming sense of repressed grief” when the researchers had contacted them (March, 2014). Because there is little support and few resources available to birth mothers, there are few birth mothers who are involved with post-adoptive grief work and who are participating in the healing process. Although the knowledge of this area would be beneficial to all parties in adoption, including placing agencies, there are gaps in the research on ways to improve the grief work for birth mothers.

### **Conceptual Framework:**

The conceptual framework chosen for this study is the ecological framework. The ecological model uses the perspective of “person-in-environment” meaning that people act on their environments, which “shapes the responses of other people, groups, institutions, and even the physical environment” (Hepworth, Rooney, and Larsen, 1997, p. 17-18). It seeks to study the topic using a wider lens to look at the issue from the micro, mezzo, and macro level. The topic of adoption and the impact on birth mothers is influenced by each of those levels, each in different ways.

The micro level contains “various client systems, including individuals, couples, and families (Hepworth, Rooney, and Larsen, 1997, p. 14). Family, friends, adoption social workers, etc. may fall into this category. In many cases, a birth mother’s main supports will fall in this level and will influence a birth mother both during the placement and after. The people at this level help set the tone for how the birth mother may or may not respond post placement. If it is a supportive environment where she is able to openly discuss adoption, it may influence her responses differently than if the environment is one that is more closed off to discussion of adoption.

The mezzo level is defined as the “interpersonal relations that are less intimate than those associated with family life; more meaningful than among organizational and institutional representatives; [including] relationships between individuals in a self-help or therapy group, among peers at school or work or among neighbors (Hepworth, Rooney, and Larsen, 1997, p. 14). At this level, these relationships are a little further removed but will still influence the response of a birth mother. A self-help or therapy group involving other post-placement birth mothers might provoke a different response than a less formal discussion among neighbors.

The macro level is even further removed from the client, but still impacts him or her. The macro level involves “the process of social planning and community organization” (Hepworth, Rooney, and Larsen, 1997, p. 14). This may include citizen groups or governmental organizations. Minnesota adoption laws, adoption agencies, or other organizations may impact a birth mother presently or in the future, even if they are far removed from this level personally.

Post placement, a birth mother is going to be influenced or involved in one or more of these levels. To some extent, if adoption is or is not accepted by the groups in each level, or if it is simply misunderstood, it can shape the experience and grief of a birth mother. In studying this topic, there has to be an understanding that birth mothers are and will continue to be influenced at the micro, mezzo, and macro level. By changing the perception of adoption at every level, a birth mother could be viewed in a more positive light and therefore continue to positively influence her grieving process. Depending on her relationship or influence within each level, it may or may not be another place she can talk about her adoption journey because it may or may not be “acceptable” in the eyes of those institutions. Regardless, even if it is a couple of years after placement, whether the response is one of support or if there is a lack of understanding or sympathy, it will impact a birth mother and her grieving process.

This model was used throughout the collection of research from the selected articles. As the researcher collected data, it was noted with a tracking sheet. As the data was analyzed, the information was separated into the different levels: micro, mezzo, and macro. By separating the data into these levels, it assisted in answering the research question of the best practices to engage birth mothers in post-adoptive grief work. The best practices will most likely look different at each level, therefore it is necessary to separate the data in order to accurately analyze it.



## **Methods**

When a birth mother places a child for adoption, she will most likely experience grief at some point in her life. While there is limited research done on birth mothers post placement, it is assumed they are not working through their grief if they have not actively sought out support. It is unclear which support systems would cause a birth mother to want to work through her grief. If social workers and other clinical mental health professionals can examine the useful knowledge already known, perhaps there would be insight on the practices that would engage a birth mother in post-adoptive grief work. To identify and assess these practices, the researcher completed a systematic literature review.

### **Research Design**

A systematic review is defined as “an appraisal and synthesis of primary research papers using a rigorous and clearly documented methodology in both the search strategy and the selection of studies.” (What is a systematic review, 2017) It limits bias as it looks at literature from multiple viewpoints of past studies. The purpose of this systematic review was to explore the research question: What are the best practices for engaging birth mothers in post-adoptive grief work?

### **Data Collection Inclusion Criteria**

The theme of the articles used in the systematic review focus on the grief birth mothers experience post placement and the types of post-adoptive grief work support available to them. All of the articles included had research on birth mothers and adoption. The researcher reviewed the abstracts to determine if an article was to be included for the research. All of the articles in the review were required to be peer reviewed. All articles included data gathered from birth mothers who have placed at least one or more children for adoption through interviews,

observations, interviews, or post-adoptive grief work. The researcher looked at studies conducted from the year 1970-present. The search terms for the review include:

- Adoption
- Post-placement birth mothers
- Birth mother grief
- Post Adoption Grief Work
- Adoption
- Grief
- Voluntary Placements

### **Exclusion Criteria**

Words of exclusion from the search included: birth fathers, involuntary placements, and foster care. These terms were excluded because they do not maintain the focus of the study, which is focused primarily on voluntary placements of birth mothers.

### **Levels of Sensitivity and Specificity**

The following electronic databases were used to obtain sources for this literature review are: Social Work Abstracts and PsycNET. The database searches were conducted using Summon and CLICnet databases, through the University of St. Thomas library network. The terms searched simultaneously were “birth mothers”, “post adoption”, and “grief”.

### **Data Abstraction and Tracking Sheet**

In order to organize findings, the researcher used a tracking sheet to separate the information found. The form included sections to record the focus of the article (individual, group, or community), the sample size/client population, the methodology used in the design, the outcomes, and key findings. After the articles were collected, the researcher reviewed and put

information from each article into an article tracking sheet. After each article had the information on a tracking sheet, the summary of findings was then reviewed for common themes and/or trends. This process also informed the researcher of potential gaps in the literature in regards to the topic.

The initial search completed to determine the current research that had been completed was reviewed based on the studies that met inclusion and exclusion criteria for the study. Of the 367 articles found through the databases that met inclusion and exclusion criteria, 340 were excluded because their titles did not contain matches for the chosen key words. After the abstracts were reviewed, 23 articles remained. After final review, 12 articles were used in this research study.

## **Findings**

The goal of this systematic review was to analyze the practices that best engage birth mothers in post-adoptive grief work. 23 articles met inclusion criteria and were thoroughly examined for this research project, but only 12 of the articles produced common themes. Four common themes were identified and include: Communal forum; pre-adoptive counseling; validation; and open adoption.

### **Communal Forum**

Five studies addressed the need for a forum to express grief in which other people understand the grief involved. Elbeth Neil (2004) reviewed a mixed method study on 213 women who had placed at least one or more child for adoption. Through her study, she found that it is important for birth mothers to have a greater availability of support and be able to talk about their adoption, but it may be difficult for birth mothers to “use any support offered by the agency, because of unresolved feelings of anger and betrayal” (2004). It may be more beneficial for them to have access to support with others who have similar experiences to their own. Isabel Andrews (2010) used a quantitative approach to research grief for post-adoptive birth mothers who have not given birth to other children since their placement. Through this study, Andrews concluded that the pain of relinquishment “affected some women in ways that reduced their chances of having another child, whether due to poor choices in men or to a decision that they were not ready or worthy of having children” (2014). Andrews suggests the benefits of a support group so women can share their experiences with other women who understand what they went through, and are currently experiencing, related to grief.

Karen March (2014) conducted a quantitative study with 33 birth mothers over the course of 3 years. She attended support groups, completed observational research with a self-

help search organization, participated in weekend therapy retreats, and watched media presentations on relationships between birth mothers and the child they placed. Through these studies, she recommends continued counseling of clients post placement in a setting where they can “help birth mothers explore their perception of motherhood, their sense of what makes a “good or bad” mother, and the meaning such images hold for how they view self as a mother who has placed children (2014).”

Laura Frame, Amy Conley, and Jill Duerr Berrick (2006) used focus groups, interviews, and observation to understand the peer support interventions. Through telephone interviews, empowerment groups, and parent volunteers, the researchers found that birth mothers in the support groups welcomed the challenges and support offered by the fellow group members and facilitators. During the groups, there were sometimes action plans written down with a goal oriented approach. This allowed birth mothers to return the following weeks with reports on their progress. This forum allowed them to take risks in attempted change as the peer support model “appears to meet its goal of promoting change”. The birth mothers had support to fall back on if they experienced setbacks in their progress.

Mary O’Leary Wiley, Amanda L. Baden (2005) conducted a review of the literature that compared adolescent birth mothers who relinquished their child with mothers who chose to parent their child. Through their study, the researchers found the importance of birth mother support groups. With support groups, birth mothers are able to work through “accepting and owning her decision, getting past blaming others for her circumstances, and becoming able to share her story and defend her decision.” It also helps for birth mothers to realize the normalcy in fantasizing about different scenario and thinking about the child they placed (2005).

### **Pre-relinquishment counseling**

Three studies discussed the importance of pre-relinquishment counseling for birth mothers as an important part of grief work. In the study by Isabel Andrews (2010), she states, “If we are to learn anything at all from this research, it is the importance of helping women to understand that relinquishment will impact them for the rest of their lives (2010).” In the study by Terril L. Blanton (1990), the researcher completed a quantitative questionnaire mailed to 149 post-adoptive birth mothers. Blanton suggests that the “differences in preadoptive and postadoptive services may influence biological mothers’ overall acceptance of and adjustment to both the adoption and the grieving process (p. 10)” ;

As mentioned earlier, the review of the literature conducted by Mary O’Leary Wiley, and Amanda L. Baden (2005) that compared adolescent birth mothers from 45 different articles who relinquished their child with mothers who chose to parent their child, the researchers found the importance of pre-relinquishment counseling. They report this is “best for the birth mother” and pre-relinquishment counseling caused birth mothers to be less likely to have a disrupted placement.

Claridge (2014) completed a systematic review of three clinical case studies and a literature review consisting of 45 articles which focused on birth mothers who have voluntarily relinquished a child for adoption. Through her study, she found that it is “important for counseling to empower birth parents to make their own decisions regarding relinquishment in order to prevent later grief and regret”. She continues discussing that post-adoptive services are also important, but it needs to be coupled with pre-relinquishment counseling.

### **Validation**

Three studies discussed the importance of validating a birth mother’s grief post-placement. In the study by Dinwoodie (2015), the researcher completed a systematic review

exploring how birth mothers are affected by grief. Dinwoodie states that 42% of birth mothers “report that they don’t feel they have received emotional support after the placement of their child (2015)”. In her research, she found that birth mothers need to “feel free to express her emotions openly and without judgment (2015)”. These emotions also need to be validated, no matter what circumstances she was in when she choose to place for adoption.

The review of the literature by Claridge (2014) discussed the role of clinicians post placement. She reviewed 45 articles and through her analysis suggests that clinicians need to “(1) be available and accessible, (2) be nonjudgmental, attentive, and open, (3) encourage and facilitate the expression of feelings (4) provide reassurance around the intensity and range of feelings (p. 10, 2014).” This contributes to a comprehensive, systematic treatment approach.

The Evan B Donaldson Institute (2006) completed a year-long examination and completion of content analysis from over 100 articles and studies from the past few decades relating to the topic of birth parents and adoption professionals. Through the study, the Donaldson Adoption Institute found the importance of education for adoption professionals on the negative stereotypes of birth parents who have placed a child for adoption. The research shows that outdated stereotypes can “affect people’s lives in a negative way” and adoption professionals should be attentive to the needs and rights of birthparents. Proper education will equip adoption professionals to view birth parents as caring for their children and will help affirm their feelings relating to placing for adoption (2006).

### **Openness in Adoption**

Three studies discussed the importance of openness in addressing birth mother grief. In a qualitative study completed by Cinda L. Christian MA, Ruth G. McRoy PhD, Harold D. Grotevant PhD & Chalandra M. Bryant PhD (2008), the researchers studied the differences in

grief resolution ranging from birth mothers who had a confidential adoption to those with fully disclosed adoptions. The study had 190 adoptive mothers, 190 adoptive fathers, 171 adopted children and 169 birth mothers. The participants were recruited from 35 different adoption agencies. The results of their study concluded that birth mothers “in fully disclosed adoptions had significantly better grief resolution than those in confidential adoptions,” Those who had less than fully disclosed adoptions scored “fair” or lower on the grief resolution scale. The researchers note that while having a fully disclosed adoption “does not guarantee successful grief resolution” but helps to inform birth mothers pre-placement when they are considering openness options.

In a study conducted by Reuben Pannor, Annette Baran, and Arthur Sorosky (1978), they completed a mixed methods study with 38 birth parents (36 women and 2 men) that had placed a child for adoption. In their findings, they found that the birth parents experienced feelings of loss, pain, and mourning. During their time of placement, most of the sample size had confidential adoptions, but 82% expressed a desire to have a reunion. The findings suggest that adoption agencies should “actively encourage birth parents, adoptive parents, and adoptees to update their records to reflect their current status and attitudes toward the possibility of a reunion” as many had grief related to wondering about the status of their child.

In a review of the literature completed by Alio (2009), the researcher referenced 16 articles in which birth mothers that placed a child for adoption from the hospital and their interactions with the nurses along with the impact of their grief. The researcher found that women who chose an open adoption “received support from families, friends and co-workers”. Those that chose closed adoption described their experience as “dehumanizing, demoralizing,



and secretive” (2009). The researcher states that both report pain and loss, but women who have an open adoption benefited from having more support.

### **Discussion**

The goal of this systematic review was to review the practices that engage birth mothers in post-adoptive grief work. Of the 12 articles that were reviewed, four common themes were identified and include: Communal forum; pre-adoptive counseling; validation; and open adoption. These themes help to understand the best practices for engaging birth mothers in post-adoptive grief work

#### **Communal Forum**

As was overviewed in the literature, it is important for birth mothers who have placed one or more children for adoption to have access to talking with others who have walked a similar journey. The articles reviewed discussed the significance of being in community and having shared experiences with another. As the research shows, birth mothers are more likely to be open to challenge and growth from those who know their experiences versus a third party who has not experienced it. If a support group is going to be used, it would be helpful to make the focus be a time of sharing between birth parents, with adoption professionals there to guide the conversations if necessary, but otherwise to have minimal engagement. Because this communal forum is focused on a time of sharing with others who have walked similar journeys and can understand the experiences more than someone who has not experienced it, it is best to be directed by those who have personal adoption connections. Of the articles in which birth mothers utilized communal forums, these forums were suggested to be better attended than those that were not.

#### **Pre-relinquishment counseling**

The literature suggested that pre-adoptive counseling was important, but after conducting a systematic review, there is more light shed on the weight of importance this factor carries. Without proper counseling before the placement occurs, women are less likely to be empowered to make their own decision or to fully understand the impact their decision will have on them for the rest of their lives. Even though research shows the benefits of post-adoptive counseling and there are multiple findings that show various ways to engage birth mothers in post-adoptive grief work, perhaps the most useful practice at this time is pre-adoptive grief counseling. The literature shows that the grief resolution is more successful if birth mothers know ahead of time the impact their decision may have on the rest of their lives. If birth mothers are well informed and well equipped with knowledge on all of their options and the potential outcomes, they have the opportunity to become empowered and are more likely to feel the decision was one they chose versus feeling they had no other option. Birth mothers are more likely to be meeting with their social worker or adoption professional on a more regular basis and will be more likely to retain the information given by professionals. The hope is the birth mothers will take what they learn and apply it to the grief they are experiencing post-placement, with help and encouragement from their social worker.

### **Validation**

Along with the need for pre-adoptive grief counseling, there is simply a need for validation for post-adoptive birth mothers. As discussed in the literature, there is a social stigma that placing for adoption is the choice of the birth mother and therefore she can be made to feel as though she cannot grieve the placement of her child (Impact of Adoption on Birth Parents, 2012). Because of this, the research has shown that validating a birth mother's feelings is important. In a few of the studies examined, simply acknowledging and saying to a post-adoptive

birth mother that grief after placement is normal could make a difference in helping her to acknowledge that there is grief to process. She may need the freedom to discuss and share her feelings in order to move forward and not need to grieve alone, and she may not do so without permission to discuss it.

Along with validation from adoption professionals, birth mothers would benefit from fewer stigmas from society. Therefore, the research suggests perhaps there needs to be education of society on the process of adoption and why someone may or may not choose to place for adoption. As mentioned, it is important for professionals to be nonjudgmental when they meet with birth mothers. If they are not educated on the statistics and facts related to all aspects of adoption, there could be a possibility for bias from professionals. Professionals and society in general, could benefit from dispelling the myths resulting of the way adoption looked in the past. If there is a change in the stigma, perhaps there would be a change in the emotional support birth mothers receive post-placement. Their friends and family members may be able to see the potential benefits of placing for adoption as well as the grief that follows, even if the placement was voluntary. If birth mothers are able to feel emotionally supported, perhaps they would be more likely to seek out professional support without feeling stigmatized or unjustified in doing so.

### **Openness in Adoption**

As research shows, openness benefits all parties involved. Studies show that birth mothers who have an open adoption are more likely to experience resolved grief than those who have a confidential, or closed, adoption. Birth mothers should be educated on the benefits of open adoptions in relation to grief and loss experienced post placement before they decide between a confidential and open adoption. Social workers should discuss the pros and cons of a

confidential vs. an open adoption so a birth mother can see both sides while making her decision. Social workers can use research on openness in adoption and share some statistics that have been found. To tie in the need for a communal forum, social workers can offer the opportunity to talk with one or more birth mothers who have placed for adoption, potentially to one who chose a confidential adoption and another who chose to have an open adoption. By being empowered to make their own choice, birth mothers may have the opportunity to take proactive measures in their grief counseling. Those who have an open adoption still experience grief, but it seems to lessen the need for post-adoptive grief counseling compared to someone who has a confidential adoption.

### **Gaps in the Literature**

Through review of these 12 articles, there were many pieces of the researcher's tracking sheet that were not included in each study or review of the literature. One consistent piece that was missing in many of the articles was the factors related to the decision to place, perhaps because there are so many factors related to the decision and the researchers did not connect it with the grief resolution post-placement. Many demographics of the participants were listed, but the factors that led to placing were not. There may need to be research that looks at the factors related to the decision to place and how that may impact a birth mother's grief resolution post-placement. Secondly, many of the studies did not discuss successful programs. There were many suggestions for practice, but few studies had researched *and* attempted interventions for grief resolution for post-adoptive birth mothers. The research shows the need for and success of pre-relinquishment counseling, but more research needs to be done on successful post-adoptive practices for grief resolution.

### **Limitations**

While the studies reviewed gave a more complete picture and insight into the grief counseling necessary for birth mothers, there are still limitations to the research. While some of the research addressed agency improvements for birth mothers and post-adoptive grief work, most addressed the benefits of post-adoptive grief work and the comparison between those who have participated in post-adoptive grief work and those who have not. The researcher was unable to locate a study that focused solely on recommendations for successful post-adoptive practice for adoption agencies or those working with birth mothers. This is because the focus of many of the studies was on the grief birth mothers experience and hearing the birth mothers' ideas on what would have been helpful for them.

The research was also limited to peer-reviewed articles that were written in English along with limited time to review all articles. Translation of articles was not available which in turn narrowed the available articles to be those written in English. Although this limitation was unavoidable, perspectives from other cultures and languages could provide further insight into what adoption looks like in other parts of the world. Beneficial articles could have been excluded from this study due to this limitation. Another limitation to this study was the range of publication dates. The studies reviewed had a range of publication dates from the 1970s up until the present. As adoption has changed over the years, the studies published more recently may have found more updated research than the ones published earlier.

### **Implications for Social Work**

This research highlighted the need for social workers to be present in adoption. The purpose of this review was to explore the best practices for engaging birth mothers in post-adoptive grief work. Social workers need to continue to develop their knowledge and understanding of the grief that comes with placing a child for adoption. Social workers also need

to continue to advocate for their clients who may be considering placing for adoption and encourage post-adoptive grief work. This research is specifically important to social work because it demonstrates the need to counsel a woman who is considering placing her child for adoption holistically. Many women considering adoption receive influence from multiple areas of their lives and social workers have a duty to help these women examine all those areas when making their decision. Social workers need to assist women by helping to provide support both before and after placing a child for adoption. Social workers need to explore her physical, emotional, and spiritual needs because they all may be impacting her decisions, both before and after placement. For example, if she has financial needs, social workers need to explore resources to meet those needs as it may change her decision to parent or place her child for adoption. Another example is if her family would distance themselves from her because of the pregnancy whether she decided to parent or place the child. A social worker would need to help her explore other forms of emotional support, especially if it directly correlates to her making a decision about her pregnancy.

Social workers also need to continue to be educated on the appropriate language surrounding adoption. Social workers have a duty to help change the perception of adoption among fellow social workers, and in advocating for clients help change the perception across other professions. For example, research points to the benefits of openness in adoption, but for social workers who work outside of adoption, they may not be aware of this information. If a client who places for adoption is seeing a social worker for assistance in a different area of her life, such as counseling, it is important for that social worker to know the benefits of openness in order to continue advocating for the client's best interest as it relates to openness in adoption. There is a need to continue to expand the awareness of grief surrounding birth mothers who

place for adoption in order to best serve them and support their decision. Social workers can also continue to advocate for potential changes in adoption laws, agency policies, and in interactions with clients or other professionals. As social workers continue to learn more about adoption specifically as it relates to birth mothers, they can help implement changes as necessary to continue to support birth mothers.

### **Recommendations for Practice**

One of the strengths of this study is that recommendations for practice were identified based on the review across multiple studies. Overall, the research shows that until there is more knowledge and research done on the ways to engage birth mothers in post-adoptive grief work, there needs to be more of an emphasis on pre-adoptive counseling (Andrews, 2010). If birth mothers are educated on the impact their decision could have on their lives, they will be more empowered to make a decision on their own and less likely to place based on outside pressure. A birth parent counselor should take time before a placement to discuss and analyze all options a birth mother has for her pregnancy and affirm that the counselor will support her no matter her decision. As this review studies past research, several themes emerged involved education and advocacy before the placement of the child even occurred. Perhaps agencies need to focus more on preventative grief work counseling versus reactive post-placement. Both are necessary, but if birth mothers are more likely to meet with their social worker pre-placement instead of post-placement, it is important for social workers to dedicate time to pre-adoptive grief counseling while the client is present.

Agencies can continue to work towards building communal forums for post-adoptive birth mothers to participate in. This may include post-adoptive support groups, blogs, mentoring, etc. Agencies should still offer individual counseling with an adoption professional post-

placement, but should also include the previously mentioned practices. Before placement occurs, social workers and agencies should dedicate time to explaining the importance of post-adoptive grief counseling to clients and empower them to choose the type of post-adoptive grief counseling that is best for them.

Agencies should focus their attention and energy on educating birth mothers about the benefits of open adoption (Christian, McRoy, Grotevant, Bryant, 2008). It should be discussed when a birth mother is just starting to consider placing for adoption and the discussion should continue throughout the entire process. Adoption agencies should similarly educate adoptive parents on the benefits of open adoption so they can continue to work on their open relationship with birth mothers. If more birth mothers understand the benefits of open adoption, perhaps they will be more likely to choose it for themselves and their child. Because openness does not guarantee complete grief resolution, birth mothers should be empowered and educated on the signs of post-adoptive grief so they can identify if they would benefit from post-adoptive grief counseling.

### **Implications for Further Research**

As adoption continues to change, further research will be necessary to continue to learn the best practices for engaging birth mothers in post-adoptive grief work. At the present time, there is an emphasis on pre-adoptive grief counseling, but birth mothers often need to continue to engage in post-adoptive grief counseling. Further research is also needed to identify the best ways to confront the negative stigma related to voluntarily placing a child for adoption and ways to improve the current views on placing for adoption. Post placement, birth mothers may find that society does not understand the reason for choosing to place a child for adoption, nor do they understand the grief that encompasses placing a child. The stigma may be that adoption was



viewed as the easy way out and a birth mother did not take responsibility for her actions, which therefore does not help a birth mother process her grief post-placement, or feel as though she can talk openly about her experience. This is again why a communal forum is important for birth mothers. It could be an opportunity to bring friends and family members to such a forum so they can hear the common experiences among birth mothers.

### **Conclusion**

The purpose of this research was to identify the best practices for engaging birth mothers in post-adoptive grief work. One of the strengths of this review was that it identified recommendations across multiple studies. This review also identified gaps in the research and further recommendations for practice. A systematic literature review was completed with a total of 12 articles that met criteria for examination. The results indicated that post-adoptive grief counseling alone is not as beneficial as a combination of both pre and post-adoptive grief counseling. Unless birth mothers become more willing to engage in post-adoptive grief counseling, there needs to be an emphasis on pre-adoptive grief counseling in addition to education to empower birth mothers to understand the grief that comes along with placing a child for adoption. Birth Mothers also need to be informed of ways to identify the potential need for post-adoptive grief counseling. As stated by Claridge (2012), "Adoption is assumed to serve the best interests of families by simultaneously meeting the needs of adoptees, adoptive parents, and birth parents" (page 113). To make this statement true, there must be a focus and continued research on how to best meet the needs of birth mothers post-placement.

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## Appendix A

### Article Tracking Sheet

Author/Year:

Title:

Journal:

Database:

Focus of Article: Individual (micro)

Community (mezzo)

Institution (macro)

Research Question:

Sample Size/Client Population (Age, birth father involvement, years post-placement):

Methodology/Design Used:

Instruments/Outcome Measures:

Factors related to decision to place:

Interventions Used:

- Blog \_\_\_\_\_
- Support Group \_\_\_\_\_
- Individual Support \_\_\_\_\_
- Mentorship \_\_\_\_\_
- Spiritual Support \_\_\_\_\_
- Online Support \_\_\_\_\_
- Literature \_\_\_\_\_
- Other (list) \_\_\_\_\_

If no participation in intervention; barriers to participation:

Key Idea/Findings:

Implications and Recommendations for Practice (if different than findings)