AN EXPLORATION OF FEMALE ADULT ADOPTEES' EXPERIENCES:

THEIR SELF-CONCEPTS OF PARENTHOOD

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Abstract

Parenthood is generally marked as a joyous event, though some research indicates that the birth of a child can possibly involve a difficult and complicated adjustment period for new parents (Ceballo, Lansford, Abbey, & Stewart, 2004). Questions regarding heritage and biological ties typically occur after developmental milestones, for example, births, marriages, and deaths, for adult adoptees.   Horowitz (2011) offered that in order to understand the uniqueness of adoptees' experiences and the specific needs they may have during childhood, it is vital to study the entire adoptee trajectory into adulthood, in order for adoptive parents and society to prepare successfully and launch adoptees into adulthood. This study explored how adult adoptees view parenthood through the lens of their own upbringing in Canada. There are gaps of information in the literature on how adoptees undertake parenting and how they approach becoming parents. In addition, how adoptees recognize themselves in their own children whether their children are adopted or not and how adoptees bond with their children. This study is an effort to address this gap offering recommendations for future research.

Using an attachment theory framework while employing a mixed methods approach through an exploratory-sequential design, highlighted results include: adult adoptees struggle with identity issues and their adoption experiences do impacted the way they become parents and how they view themselves as parents.

ACKNOWLEDGMENTS

DEDICATION

I dedicate this thesis to my son, Lachlan Gatzke. You are an incredible gift of unconditional love, laughter, and of strength.

To all those adult adoptees, may you find your voice to speak your own story and your own truth! May this information provide you some assistance and support!

To Heather Carlini, my mentor and teacher.

To my late Granny, Ms. Florence Watson, you are truly a source of inspiration, strength, and always made your house a home for others!

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Chapter 1: Introduction

Overview

In this chapter, I provide a brief historical context of the concerns that the adoption population currently face resulting from the closed adoption system era. The purpose, objectives, and research questions are provided, followed by definitions of terms used throughout the study. A brief account of my background is provided and interests in this area of study. Brodzinsky, Schechter, and Henig (1992) capture the essence of an adult adoptee and his/her identity concerns:

> Probably the most difficult time for me regarding adoption was when I got married and had my own children. When my first child was born I looked at her and realized there was no way in the world that I could ever be apart from her. I think this was the worse time for me. It brought up a lot of feelings about having been "given away"… When I got older and my children were grown, they sometimes asked about my adoption. They seemed to be more interested than I was about my background – of course, it was their biological background too. (p. 192)

Historical Context

In society, parenthood is often marked as a wonderful event, though "research indicates that the birth of a child presents many new parents with a potentially difficult and complicated adjustment period" (Ceballo, Lansford, Abbey & Stewart, 2004, p. 38). For adult adoptees, questions regarding heritage typically occur after developmental milestones, such as marriages, births (i.e. birth of their own biological child and/or through adoption) and deaths (Brodzinsky, Schechter, & Henig, 1992). To note, Juffer and Van IJzendoorn (2007) defined adoption as "the legal placement of abandoned, relinquished, or orphaned children within an adoptive family" (p. 1067). As adoption is a lifelong process versus a single event for adoptees, their interest in their birth families and genetic backgrounds become progressively more salient throughout their developments (Baden & Wiley, 2007). For example, many unknowns – facial expressions/features – can come up for adoptees, unknowns and/or questions that adoptive parents cannot answer for them. As a result, adoption is not just a process of a child being

relinquished and then placed with an adoptive family, as a single event, rather there are aspects throughout life that remind an adoptee of his/her adoption status.

In response to societal changes, many modifications in adoption policies and practices have transpired over the past 30 years. In North America, adoption practices have "historically been confidential, secretive, and anonymous among the parties involved in adoption, an effort to shield children from the presumed stigma of "illegitimacy" or "bad blood" associated with being born out of wedlock, being infertile, or having a child outside of marriage" (Grotevant, Dunbar, Kohler & Esau, 2000, p. 379). Though changing slowly, some of these attitudes still remain today; it is the adopted person's task to work through the feelings of societal stigmas attached to being adopted. The historical belief of severing ties with a child's biological family through a confidential process was thought to promote attachment between the adopted child and parents (Baran & Pannor, 1990). Javier, Baden, Biafora, and Camacho-Gingerich (2007) defined the term "attachment" to refer "to close, enduring, emotionally based interpersonal relationships" (p. 63). In the 1960s and 1970s, social forces commenced challenging the practices of secrecy and confidentiality, whereby, as stated by Grotevant et al. (2000), "the human potential movement (civil rights, women's rights, consumer rights) empowered birthmothers who had relinquished children to re-connect with this part of their past and also empowered a generation of adult adoptees to search for their roots" (p. 380).

Horowitz (2011) stated that "to determine the uniqueness of the adoptee experience and the specific needs they may have during childhood, it is essential to study the entire adoptee trajectory into adulthood in order to understand how adoptive parents and society are currently preparing them to take on adult endeavors" (p. 2). Adult adoptees *"*can be profoundly transformed by entering this stage of human life, how we find ourselves in uncharted territories as the radical—and often traumatic—differences that shaped our own childhoods morph into unknown challenges with our own children" (Yung Shin, 2012).

Purpose, Objectives, and Research Questions

"While identity issues are something that everyone faces at some time or other, the journey to identity is typically more complex and presents more challenges for adoptees, particularly those who were adopted in the closed era" (Passmore, 2007, p. 3). In fact, few studies have assessed adoptive outcomes among adults and most research, on this particular

population, has focused mainly on adult adoptees who have searched or have not searched for their biological parents (Feigelman, 1997).

Baden and Willey (2007) stated that for over the past 50 years, "adults who were adopted during infancy have been research participants for empirical studies with goals ranging from twin studies for heritability, to adjustment following adoption, to attachment" (p. 868). Developmental tasks of adulthood, for example, "generativity and life review and how they are manifested by adult adoptees have not been investigated empirically" (Penny, Borders & Portnoy, 2007, p. 30). Horowitz (2011) offered that adoption research studies have primarily focused on the needs of adoptees, biological, and adoptive parents during childhood and adolescence, with less emphasis on the developmental challenges adoptees can experience in their adult years. There are gaps of information in the literature on how adoptees parent and how they approach becoming parents; that is how adoptees recognized themselves in their own children whether their children are adopted or not and how adoptees bond with their children over the childrearing years is something that is not fully understood.

Post (2000) found that adult individuals, who have been adopted as babies, provide an intriguing picture of the impact of early separation from their mothers, the conflict between the biological and adopted environmental inheritances, and the struggle to form a coherent sense of self. Adoptees are asked as children to disavow reality, and to live as if their adoptive parents are their biological ones, and to repress their yearning for their biological parents. Adult adoptees tend to reassess their identities (e.g. as a parent and/or partner) and relationships with others (e.g. significant others and/or acquaintances), at each adult transitional stage (marriage, birth of their own children, and death), since they may face difficulties (e.g. with trust, unresolved feelings of abandonment/rejection). Recently, a pattern has become more prevalent in my clinical practice; where counselling adult adoptees have presented with family concerns, self-esteem issues, and/or workplace stress. The common denominator for these clients was unresolved adoption experiences. A secondary counselling concern that surfaced among them was how they relate and/or attach to their children, apart from their own perceptions of their self-competencies towards parenthood. Some negative perceptions have arisen in some adult adoptees with whom I have worked who have either relinquished or aborted their firstborn children because of their own post-natal experiences of being relinquished.

This present study explored how adult adoptees view parenthood through the lens of their own upbringings in Canada. This focus will assist those in education and health care professions to better understand the developmental perspectives and specific needs of adult adopted persons and the effects on the next generation within Canadian families. The research question for the study was: How do adult adoptees' experiences of adoption influence their perspectives of parenthood? Furthermore, some additional questions I addressed were: How do those adoption experiences impact their self-concepts and identities, as parents? How do adoptees' childhood experiences influence their perspectives on being a parent?

I used a mixed methods approach (e.g. exploratory-sequential design) to address the gap in the literature with the research findings. Qualitative interview questions and quantitative measures are discussed within the literature review and methods section.

Definitions

It is crucial for the reader to understand the distinctions among closed, open, and semi-open adoptions, as Corder (2012) stated that "the distinction greatly impacts the adoptee in how he or she experiences being an adoptee at each stage of life" (p. 448). Distinguishing the difference is emphasized because I interviewed adult adoptees who grew up within the closed adoption era.

Closed adoption pertains to the adoptee and adoptive family having no contact with the birth family unless a search is commenced, usually in adulthood (Kavanaugh & Fiorini, 2009). Adoptees are not aware of their birthparents' names and other identifying information. Corder (2012) stated that "closed adoptions are becoming less common, but many of today's adult adoptees are involved in closed adoptions" (p. 448). Open adoptions are when the adoptee and adoptive family have contact with the birth family by sharing letters, pictures, and/or having in-person visits (Kavanaugh & Fiorini, 2009). Open adoptions are more common in practice among domestic and international adoptions. Semi-open adoptions pertain to adoptions where adoptive and birth families do not exchange identifying information, for example last names or places of residence (Corder, 2012). Typically, information, such as, letters and pictures are sent through social services agencies or attorneys a few times a year.

Relative to self-concept and adoption, the term self-concept "is one part of a larger concept known as self-esteem or self-regard" (Groze, 1992, p. 169). Moreover, self-concept is measured at a general level of specificity, which includes the evaluation of one's competence

and feelings of self-worth associated with the behaviors being considered (Pajares, 1997). There are many research studies on self-concept in many different subgroups of the adoption population, however few studies are available that focus on the self-concept of adult adoptees (Groze, 1992). Groze stated that "adoption status is one dynamic that may influence the self-concept" (p. 170) of adult adoptees.

Lastly, the attachment theory, as developed by Bowlby (1969), primarily focuses on parent-child relationships. Heinz Brisch (2002) stated that attachment theory is influenced by the fields of ethology, developmental psychology, systems theory, and psychoanalysis. In addition, the theory focuses "on the fundamental early influences on the emotional development of the child and attempts to explain the development of and changes in strong emotional attachments between individuals throughout the life cycle" (p. 15). Also, the attachment perspective emphasized the need for emotional engagement with an attachment figure, especially during times of need (Johnson & Sims, 2000). Edens and Cavell (1999) proposed "the utility of attachment principles in the study of adoption" (as cited in Feeney, Passmore, & Peterson, 2007, p. 130). Attachment theory suggests possible long-term implications of difficulties adoptees can experience into adulthood, for example, a sense of not belonging within their adoptive families and/or with significant others. The distinctions between attachment styles are offered by Siegel (1999) for infant attachment styles and Hughes (2013) for adult attachment styles (see Appendix A for descriptions).

Researcher's Background

I was accepted into the Master's degree program in Educational Counselling at the *University of Ottawa* about ten years ago. Enrolled in a program that consisted of both course work and practicum placements, I had an interest in the area of adoption and foster care. In the program, students were able to focus on developing their identities as counsellors, through class assignments and chosen practicum sites. While completing my graduate studies, I pursued a certificate in foster care through *Algonquin College*, in Ottawa, Ontario, and attended professional development workshops in the area of attachment theory and family of origin issues. The workshops provided me with insightful information (i.e. on attachment styles, intergenerational trauma, etc.) and contributed to my seeking out practicum placements in the area of individual, couple, and family counselling through a local community centre.

Through my practicum placement at the local community centre, I experienced a balance of counselling clients and supervision meetings with the site supervisor. In consultation with my supervisor, I would often discuss the process of the therapeutic rapport and what interventions would be beneficial for particular clients. As an intern, I was assigned to co-counsel a couple who were seeking to obtain support around the husband's extramarital affair. Though a rather complex case, the wife disclosed that she was adopted as a child and had sought an abortion for their first expected child. Given my prior knowledge of relevant literature in the area of adoption issues, I expressed an idea to my site supervisor, in our supervision meeting, that the wife's identity as an adopted person may have impacted her relationship with her husband. Unfortunately, my supervisor did not entertain the idea that the wife's adoptive status influenced the couple's relationship dynamics, as a possible layer, contributing to the presenting issue. My idea centered on the thought that experiencing one loss would intensify all other future losses. Respecting the wisdom of and an appreciation for the site supervisor's experience, as a clinician, this interaction propelled me to learn more about the effects adoption had on all members involved. For example, the grief and loss that can impact biological parents, adoptive parents and adoptees. Towards the end of my graduate degree, I was accepted and enrolled in an online post-adoption diploma via the *Carlini Institute* in British Columbia.

Having completed both a graduate degree and a post-adoption diploma, I have had many great opportunities to present at national and international conferences, and to counsel individuals, couples, and families relative to adoption, foster care, and attachment issues. Developing my professional identity in this area occurred with many consultations with an excellent clinician and supportive mentor, Heather Carlini. Although adoption practices have been around for centuries, pre- and post-adoption services and educational programs are rare to find in Canada. Having lectured and advocated in bringing awareness to the mental health community, I have found that the healthcare community has remained largely silent on post-adoption issues.

Henderson (2002) suggested two reasons for the underrepresentation of adoption in the mental health literature. These reasons include both cultural and moral values, particularly those related to bad behaviour, shame, and privacy, and economic factors. The latter reason pertains to the social status of many biological parents, the "business" of providing adoptions, and the expense of obtaining a child.

In private practice since 2006, I have noticed various patterns among individuals and families seeking pre and/or post-adoption counselling. Of particular interest to me is an area that is under-researched: the developmental milestones within an adopted person's life – marriage and parenthood. As a clinician, I have observed common patterns among adult adoptees, for example, those having an elective abortion for their first born child, surrendering their first born to adoption, deciding not to have any children biologically or adopted, and/or deciding to have only one child. I have always wondered how adult adoptees' upbringings impact their decisions and perceptions of their self-competencies towards becoming parents and/or parenthood.

Apart from the patterns observed in practice, I have also noticed the need for assessment of children who are adopted or fostered and presented with attachment difficulties only to find no services that offered this specialization. The lack of services is due to formal training not being available and/or formal discussion on the topic of adoption in graduate level programs. Being accepted into the School and Counselling Psychology Master's degree program at the *University of Saskatchewan* has been an honor, since I wanted to fulfill the dreams of studying assessment tools and to conduct research in the area of adoption. This program has provided me with the necessary skills and competencies to seek status as a registered psychologist within the province of Saskatchewan. I will now assist those in the adoption and foster care community more thoroughly, by having testing and diagnosis privileges as a registered psychologist.

Though I have had the privilege and honour to assist individuals and families in this area, I have personal experience with adoption upon which to draw. I was adopted as an infant, within the closed adoption system, and I am currently married with my own biological son. My family, on all sides, have been touched by foster care and/or adoption stemming from the earlier 1900s. It seemed a natural step for me to train and specialize in this area because of my personal connection to adoption. Given my background, I have remained sensitive to the opinions and bias I bring to the study, personally and professionally. I understand that all adoptees are at different stages within their own journeys and have varying opinions based on their own personal experiences. My personal and professional experiences enabled me to observe opinions in the reviewed literature at a different and deeper level. Researchers have noted the importance of including someone who is a member of the target sample on research teams in order to gain the perspective of the adoption triad (Auerbach & Silverstein, 2003). Also, obtaining firsthand knowledge was valuable during the data analysis phase, to ensure that interviews were not

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misinterpreted by those without firsthand knowledge of particular adoption concerns (McLean-Taylor, Gilligan, & Sullivan, 1996).

Given previous professional and personal experiences and current interests in the area of adoption, I believe I was well-suited to conduct a study that has practical implications for both the adoption community and current/future educators and clinicians alike. Once I am a registered psychologist, it is my plan to serve the adoption community.

Chapter 2: Literature Review

Historical Account of Adoption and Attachment

This literature review briefly looks at how the world of adoption is ever-changing over years, decades, and even centuries. In order to comprehend today's current adoption issues, it is pertinent to have a historical account of the policies and practices that have changed, as a result of the times.

Adoption is not a new phenomenon, in fact references to adoption can be found in the Bible and in codes and laws of the Babylonians, Chinese, Egyptians, and Hebrews (Sokoloff, 1993). During those times, it was believed that the custom was to provide childless couples male heirs in order to maintain family lineages or to fulfill religious practices (e.g. ancestor worship). Sokoloff (1993) stated that adoption law is based upon early Roman laws designed to benefit adopters while benefits to adopted children were secondary.

However, given the evolutionary changes, current adoption law rests on the 'best interests of the child.' Fast-forward to the nineteenth century, many adoptive parents wanted assurance that their adopted children were theirs legally. In years prior, children were placed in adoptive homes, but many never had legal papers put into place solidifying their adoption. Sokoloff further added that in Massachusetts, in 1851, the first comprehensive adoption statute was passed outlining major provisions to be followed in order for adoptions to legally proceed. For example, written consent had to be obtained from the biological parents for the child to be adopted. Secrecy, anonymity, and the sealing of records became a standard adoption practice, within the first half of the twentieth century. These practices were designed to provide anonymity to both biological and adoptive parents and to protect them against public scrutiny. From 1920 to the 1940s, laws were passed that also denied everyone access to adoption records "except upon a judicial finding of good cause" (p. 21). This meant that original birth certificates were sealed and amended ones were issued when the adoption was finalized. Social workers working for adoption agencies urged the movement of secrecy believing that such a stance would remove the stigma of illegitimacy from children born out of wedlock and would protect the promised anonymity of both parties. This practice was taken up by the ministries to make the successful integration of the child into the adoptive family a smoother and secure transition.

Given that much of the focus has been placed, by society, policy officials, and researchers, on American adoption practices and policies, Canadian practices share similar evolutions. Specific to Canada and to those employed in the adoption field, is the known 'Sixties Scoop.' Briggs and Dubinsky (2013) referred to this part of Canada's history as one that involves "trauma, shame, and controversy" (p. 129). This scoop era occurred between 1960 to the mid-1980s, when Aboriginal children, in Canada, were apprehended in large numbers throughout the country and were adopted primarily into non-Aboriginal homes in Canada and abroad (Sinclair, 2007). Sinclair stated that "consequently, Aboriginal communities and families have now faced several decades of fall-out from the Residential school period, which included, as by-products of an assimilationist agenda, the deliberate destruction of traditional family, social, and political systems, intergenerational abuse, and social pathology in many communities" (p. 68). The devastation resulted from institutional abuse and trauma over many generations and because of child welfare involvement within Aboriginal communities.

Current issues seen in adoption today arise from the second half of the twentieth century (Sokoloff, 1993). As already seen with the First Nations' history of trauma and abuse, at the end of World War II a demand and interest in healthy, young infants increased. As a result of this trend, agencies were inundated with a large number of applications and workers devised specific criteria designed to get the 'best parents' for each child in order to obtain the 'best fit.' Sokoloff stated that agencies often tried to match the physical appearance of adoptive parents with the projected physical appearance of their adopted infants, thereby minimizing questions that strangers might ask.

This period marked a time when adoptees and biological mothers began to claim their rights, which they believed were denied by the existing adoption laws and policies, and the practices of respective placement agencies. Movements and organizations began to form to raise awareness regarding their felt injustices and to promote openness of the sealed records. Grotevant and McRoy (1998) stated that, in response to this demand, agencies began to offer biological mothers and prospective adoptive parents a continuum of openness dependent on their needs and desires (e.g. pictures, letters).

Similar patterns, for example, of abuse and neglect, secrecy, in Canadian history also occurred in Australian history. However, for the abuse and neglect of children in institutional care, known as the Lost Innocents and the Forgotten Australians, Briggs and Dubinsky (2013)

commented how this group was offered an apology in 2009 in response to biological mothers "who felt they had been profoundly harmed by the secrecy and pressure on young women to relinquish their children that characterized adoption a generation ago" (p. 132). Briggs and Dubinsky further stated that some women affected by the secrecy, never received an official apology. In 2012, the Australian government "recommended a further apology to those mothers whose children were removed from them in state- and church-run maternity homes" (p. 132).

In late 2013, a Canadian group, known as "Origins Canada," initiated a similar political awareness campaign in hopes to receive an apology from the Canadian federal government. Rea (2013) reported that, Dufferin-Caledon MP, David Tilson supported the commencement of a parliamentary committee to look into the forced cases of adoption in the 1960s.   These forced adoptions are a world issue that occurred to all women and their respective firstborns regardless of country. Though this description of the history of adoption is brief, the idea of closed adoption is rarely used in today's adoption practices – the movement and focus is more on the openness between biological and adoptive families, in order to foster healthier attachments and communication among all parties.

Attachment Theory and Application to Adoption

The basic foundations of attachment theory were established by Bowlby (1969) with the primary emphasis focusing on parent-child relationships. According to Johnson and Sims (2000), this attachment perspective emphasized a need for emotional engagement with an attachment figure, especially during times of need and distress. The researchers stated that though most of the attachment literature refers to the mother-child bond, the bond can most certainly be applied to that between a father and child.

Central to Bowlby's (1969) theory are parents' continuous interactions with their children. In turn, children then internalize these experiences (e.g. being confronted when distressed) forming assumptions about their parents. From this process, children develop mental representations or 'working models' of self and other. That is, Bowlby stated that if a parent is readily available and responds to the child when in times of distress, the child will develop a working model of self as worthy of affection, and a model of the parent as one who is lovable and reliable. However, if a parent is unaware and unresponsive to the child's needs, the child will view the self as unworthy of affection and will view the parent as uncaring, distant, and/or rejecting. Johnson (1996) offered the concepts of a safe haven and a secure base from the world.

To clarify, the researcher stated that humans have an innate survival mechanism that provides individuals with both of these concepts, as they are motivated to seek and maintain contact with others. Further, Johnson referred to a safe haven as one that provides a source of comfort, care and protection, while a secure base refers to an irreplaceable other who assists to comfort one from the world. When the security of the attachment is threatened, separation and distress responses result. This distress is seen through primary responses such as protest, anger, followed then by clinging and seeking, and then by depression and despair (Bowlby, 1988). If the parent still does not respond to the child, detachment and separation result.

It has been known that parental sensitivity is a vital component in the development of secure attachments in parent-child relationships (Ainsworth & Bell, 1969; Blehar, Lieberman & Ainsworth, 1977). Tyrrell and Dozier (1999) stated that attachment theory suggests that there are different patterns of parental responsiveness that are associated with child attachment styles. For example, children's parents who are responsive and sensitive to their needs are characterized as having a secure attachment. That is, these children trust their parents' availability and know that their parents will be there for them in times of distress. However, for parents who are not sensitive to their children's signs of need, the children do not develop trust and the result, therefore, is an insecure attachment. While children who do not need their parents in times of distress are considered to have avoidant attachment styles, children who display both dependent and hostile reactions towards their parents in times of need, on the other hand, are considered to have resistant or ambivalent attachment styles. Main and Soloman (1990) proposed a fourth attachment style, one that is disorganized/disoriented relative to attachment. To clarify, they suggested that children with these attachment styles often appear to lack the coherent ability to regulate attachment and often seem confused when their attachment processes are activated by their parents.

Adoption, Attachment, and Self-Concept

Groze (1992) suggested that attachment theory is useful in the area of research and practice relative to attachment issues and adoption. The researcher stated that self-concept is one part of a larger term known as self-esteem or self-regard. Currently, given that the term self-esteem is inevitably changing by its mere definition, this section will only focus on the term self-concept. Further, he emphasized that adoption status is one dynamic that may influence the self-concept of adopted children. Though dated, a pertinent study conducted by Stein and Hoopes

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(1985) examined identity formation of 50 high school students adopted at an early age. They found that there was no evidence suggesting that adopted adolescents had greater difficulty in identity formation than their non-adopted peers. Some studies examining adoptees and self-concept have been debated over the years regarding the validity of their findings, given that the findings are often based on adoptive parents' self-reports of their children's psycho-socio-emotional development and adjustment. Stein and Hoopes suggested that adopted children's overall quality of family relationships and the openness of family communication surrounding adoption issues enhanced identity formation.

Johnson and Fein (1991) examined conceptual issues in the study of attachment, relative to Bowlby's theory, in order to study attachment in adopted children. The researchers offered that attachment is central in the decision-making of prospective adoptive parents because the inability of children to form an attachment is one of the main reasons adoptions fail. Though determined in a dated study, the genesis of attachment was considered to be the sensitive period within the first few minutes of a child's birth with which parent-child attachment was optimal (Klaus & Kennell, 1976). Singer, Brodzinsky, Ramsay, Steir, and Waters (1985) argued that attachments in adopted infants, who did not experience the biological maternal bonding via post-natal contact, did not differ from attachments in non-adopted infants. Given that infants were apprehended immediately after birth, by social services, this is an important finding above to consider. This historical stance was taken within the closed adoption era, prior to the advent of attachment research becoming available.

In the closed adoption system, some children placed with adoptive parents came from circumstances involving abuse and/or neglect from their biological parents. Groze (1992) argued that it is not the adoption and/or the mistreatment alone that affect self-concept, but rather the pre-adoptive history, including pre-placement history and mistreatment history that influences children's attachment styles. He offered that attachment behavior serves as a platform for building one's self-concept, that is, those children who have more positive attachment patterns within their families will have a greater self-concept compared to those with under-developed attachment patterns. Kaye (1982) stated that a strong sense of self cannot be separated from a sense of belonging (e.g., through assimilation and entitlement); that is, adoption and attachment are intertwined for a child to belong permanently within an adoptive family.

Baptist, Thompson, Norton, Hardy, and Link (2012) explained that while secure attachments can buffer the effects of difficult family experiences for children, behaviours can be transmitted across generations. Children learn these behaviours, in order to manage conflict and to communicate their needs, from observing and experiencing relational patterns from their families. Studies based on attachment theory have shown intergenerational effects, that is, secure attachment patterns transmitted from one generation to the next, through the means of sensitive parenting (Gibbons & Brown, 2012). Relative to adoption, for example, Gibbons and Brown explored a model that predicts a recollection of having been loved by one's parents (e.g. parental warmth) that is associated with more positive attitudes towards his/her adoption. Also, the relationship between parental warmth and adoption attitudes is affected by two other variables for adoptees: motivation to parent and greater liking of children. In addition, the researchers suggested that "there is evidence for long-term intergenerational effect of parental love; remembered parental love may have far-reaching consequences, including both increased motivation for parenting and higher-quality parenting of one's own children" (p. 142). Therefore, in order to fully understand self-concept, it is pertinent to understand attachment in the context of how parents modeled behaviour, attachment, and emotion to their adopted children.

Adoption Studies: Adopted Children and Adoptive Families

Much of the literature (Sharma, McGue, & Benson, 1998) has over-represented adopted children in mental health referrals and services for other related behavioural concerns. As a result, Juffer and van IJzendoorn (2007) examined whether adopted children have lower self-esteem than their non-adopted peers. They hypothesized that given their pre-adoptive histories, some children have suffered the consequences of neglect, abuse, and/or malnutrition. Selman (2006) mentioned that pre-adoption risks (e.g., abuse) cannot be generalized to every adopted child because every child has a different story when relinquished within a closed adoption system. For example, referring back to the Sixties Scoop and the adoption of Aboriginal children in Canada, Sinclair (2007) stated "children were apprehended by the thousands, in questionable circumstances, with economic incentive rather than neglect or abuse emerging as the motive for removing children from their homes" (p. 67).

In other studies, comparing adopted children with their non-adopted peers, researchers showed that adopted children have more developmental delays (Beckett et al., 2006; Morison,

Ames, & Chisholm, 1995), attachment problems (e.g., Chisholm, 1998), internalizing and externalizing behavior problems (Stams, Juffer, Rispens, & Hoksbergen, 2000), and psychiatric problems (Hjern, Lindblad, & Vinnerljung, 2002) in adolescence and adulthood. Some studies found lower self-esteem in adoptees than in non-adopted individuals (Lanz, Iafrate, Rosnati, & Scabini, 1999), while other studies claimed there was no difference between adoptees and nonadoptees (Lansford, Ceballo, Abbey, & Stewart, 2001), or there were differences in favor of adoptees (Brown, 2000). In some studies on adopted children's behavioral issues, adoptive parents reported more difficulties than did adoptees themselves (Versluis-den Bieman & Verhulst, 1995). As a result, lower self-esteem may be found to be a result of relying solely on parents' reports rather than being based on adoptees' self-reports (Hollingsworth, 1997). Juffer and IJzendoorn (2007) examined whether adopted children develop acceptable levels of self-esteem by positive experiences within their adoptive families, despite potentially being triggered by negative feelings and/or thoughts surrounding their relinquishments. The researchers stated that they found no statistical differences relative to self-esteem between adopted and non-adopted persons and, contrary to the researchers' initial perspectives, adopted children are able to develop normative levels of self-esteem and across the life span. Drawing upon the attachment theory, they suggested that the ultimate test of an adopted child's adjustment rests on the quality of their internal working models of others and self, and in turn, how they evaluate others and themselves.

Internal Working Model of Self and Other

It is the internal working model of others and self, described as an unconscious blueprint of emotional development that can influence future relationships (Morton & Browne, 1998). Carriere (2008) stated that identity formation and preservation are complex issues, especially when loss is intertwined with one's identity. The author explored the importance of identity and adoption for Aboriginal children in Canada, and further offered that every adoptee experiences loss in several areas of his/her life that are "prevailed in profound ways throughout an adoptee's life" (p. 64). The loss, she noted, eventually then seeps into one's emotional, physical, mental, and spiritual areas of his/her life. For example, in one interview with a woman named "Donna," finding her identity became central to her life: "So right now, it's identity issues. It's becoming a bigger part of my life, of finding out who I am and putting all the pieces together and finding out about my culture, and I am drawn more to Aboriginal communities" (p. 65). As much as a

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secure attachment can serve as a protective function (Sroufe, & Fleeson, 1986), Muntean, Tomita, and Stan (2012) stated that abandonment is an intensive traumatic experience for children to endure. Adoption processes bring about many changes, both important and challenging; that is, the adopted child gains a new family, new experiences, and educational expectations. The authors offered that adoption processes only come after the trauma of a child having lost his/her biological connections and social and emotional support systems. Further, children are faced with complex factors (i.e. mental health issues, effects of abuse and/or neglect), from both external and internal environmental aspects, which can lead to proactive and retroactive reactions. However, children can overcome the complex trauma provided that healthy development can occur within their adoptive families.

Core Adoption Issues

The scope of Silverstein and Kaplan's (1982) seven core adoption issues: loss, rejection, guilt and shame, grief, identity, intimacy, and mastery/control go beyond the length of this section to describe, in detail, for each and every member (adoptive parent, adoptee, and biological parent) in the adoption community (see Appendix B). The researchers proposed that these core issues are present, regardless of the circumstances and/or characteristics of the adoption and individuals involved (e.g. biological parents, adoptees, and adoptive parents). Though the focus of this research is on adopted persons, grief and loss are also part of biological and adoptive parents' realities. To clarify, adoptive parents, for example, experience grief and loss with infertility of which those experiences come into the adoption equation. Timm, Mooradian, and Hock (2011) stated that loss and grief is an evolving process that may continue to impact the adoptive family throughout the adopted child's life. It is important for adoptive parents to recognize that these issues can come up and be able to be open and willing to proactively sort through them. That said, they too can often struggle with issues of entitlement and control, such as whether they have a "right" to the child, emotionally or legally. Kramer and Houston (1998) stated that many adoptive parents worry that biological parents will return someday in order to adopt their child back, even with the adoption finalized. Despite the mixed findings in comparing adoptive families to non-adoptive families, one study found stronger parent-child relationships among adoptive families than non-adoptive families (Cohen, Coyne, & Duval, 1996).

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Adoption Studies: Adult Adoptees

According to Erikson (1968), identity formation, by the very definition of the self, is individuating from parents which occurs as a primary developmental task in adolescence. Though all adolescents construct a sense of identity, being adopted adds an additional layer of "differentness" to integrate into an individual's overall sense of self (Grotevant, 1997). Kohler, Grotevant, and McRoy (2002) stated that most adopted persons, raised within the closed adoption system, commence their search in their late 20s to mid-30s for their biological parents. The search often occurs around the time of a significant life event, for example, a marriage, pregnancy, birth of a child, divorce, death of a family member, and/or an important birthday. The researchers further explained that searching may be a form of identity work that occurs and continues into young adulthood. Kohler et al. stated that unfortunately, little is known, to date, about the types of identity-related processes that occur during this time period, in an adopted person's life. For example, adoptees often look for similarities in genetic features among their adoptive families to find no similarities.

Of interest, Kohler, Grotevant, and McRoy (2002) revealed that there are connections between gender and adopted persons' levels of preoccupations with their adoptions. For example, the researchers found that girls and women expressed a greater interest in their biological parents than did boys and men because women identified more strongly with their biological mothers. Other reasons for the gender difference pertained to a heightened awareness of the pertinence of intergenerational linkages through adoptive women's own pregnancy and child-bearing experiences, or "they possess greater overall openness or sensitivity to interpersonal relationships in general" (p. 100). Passmore (2007) stated that the emerging sense of identity is intertwined or linked to one's self-esteem and that it can be difficult for adoptees to develop a healthy self-esteem if they are not able to establish a coherent identity.

Identity difficulties can develop if adopted persons' lives are built on denial, secrets, illusions, and mystery. Groza and Rosenberg (1998) argued that identity confusion contributes to issues relative to forming intimate relationships and developing a positive self-concept. Identity confusion can promote feelings of alienation and isolation, feeling different, and not having a sense of belonging. In essence, the lack of knowledge (the norm in a closed adoption system) of whom one is, can affect identity development and one's ability to project into that future. Levy and Orlans (2000) offered that adoptees' adaptations to their adoptive families are

dependent on the nature and quality of prior attachments and their reactions to separation and loss. Unresolved loss regarding prior attachments (healthy or unhealthy) inhibits the development of future attachments.

According to Lifton (1994), some adult adoptees may describe themselves as shy loners/floaters, as lacking self-confidence, as having issues with control and power, and/or intimacy and commitment. Further, she suggested that they may look secure, but internally suffer feelings of shame, inner badness, and defectiveness and a fear of abandonment. These feelings could lead to the internal imprinting of an unconscious message adoptees may give to their partners and/or friends, such as: "Do anything you want to me, but don't abandon me. Inside every adoptee is an abandoned baby. It lies coiled in the core of the adopted self like a deep sorrow that can find no comfort" (p. 110). These feelings can have a significant impact on an individual's sense of self and well-being regardless of age.

Identity development is a key struggle for adoptees. Grotevant (1997) argued that creating an identity for those who are adopted is a lifelong developmental task involving unique issues leading into adulthood and beyond. Adoptees are attempting to answer the fundamental existential question of 'Who am I?', considering the mystery they have to solve relative to their genetic, cultural, and familial histories (Lifton, 1994). Grotevant, Dunbar, Kohler, and Esau (2000) coined a term "self in context" which consists of the adoptee's intrapersonal, family, and social worlds whereby they gain awareness in all of these dimensions. The researchers described these dimensions in further detail. First, the intrapersonal facet of developing one's identity pertains to the cognitive and emotional processes that are involved in building an identity. To clarify, those adoptees did not make the choice to be adopted, yet each individual has the choice and control in how being adopted impacts their current decisions. Grotevant et al. further mentioned that adoptees' identity development falls along a continuum ranging from being preoccupied with adoption issues to having no interest in adoption issues. Though their development is not linear, but a multifaceted, multilevel process, they can get stuck along any point in this continuum, producing unique personal and individual issues and struggles.

Second, Grotevant et al. (2000) stated that the family context is a vital aspect of one's identity, largely dependent on the type of adoption and the adoptive family's comfort level in discussing adoption issues. To clarify, adoptees have the possibility of interpreting their adoption as a negative experience when aspects from the adoptive family are kept secretive.

Third, the social dimension pertains to adoptees being confronted with negative social attitudes towards adoption. The bias that media portrays towards adoption could affect their desire to integrate the role of adoption into their sense of selves. Krueger and Hanna (1997) offered that adult adoptees experience death anxiety through anxiety within relationships with others which prompts a sense of loss. In other words, Fall, Roaten, and Eberts (2012) stated that "for most adoptees, being 'given up' for adoption represents a death of a vital relationship in an unexpected and uncontrolled way" (p. 444). The researchers further mentioned that adult adoptees often face anxiety every time a relationship nears an end, by clinging onto relationships that may be unhealthy, in an effort to 'control death'. Adoptees eventually need to deal with the fear and pain of abandonment that has been imprinted in their lives, and move on to feel and become connected to others.

Adult Adoptees and Bio-Psycho-Social Perspectives

Very little is known about the longer-term implications of being adopted, relative to psychosocial adjustment in adulthood (Collishaw, Maughan, & Pickles, 1998). The researchers found that adopted women showed fewer problems in their early twenties than men. The marked difference among men versus women was job stability, associated with behavioural issues stemming from childhood that continued onwards. The researchers examined relationship and parenting histories among both men and women. A significant result found among adopted women was delayed childbearing, having their first child at 26.2 years of age compared to a birth comparison group whose average age of childbearing was 23.1.

Cubito and Brandon (2000) analyzed 525 female and 191 male adoptees by examining gender differences, by search status (e.g. those searching, those who were not searching, and those who had made contact with their biological parents) and by their utilization of mental health services. These authors attempted to address the important gap in the adoption literature regarding the concerns of psychological adjustment in adult adoptees. They found that their sample reported higher levels of psychological maladjustment, with women scoring higher on a scale measuring anger. Moreover, both male and female adoptees were at an increased risk for overall levels of distress, depressive symptomatology, and anger.

Though research in the area is limited, studies of adopted adults' views (Howe & Feast, 2000; Triseliotis, Feast, & Kyle, 2005) offered that not only are these individuals curious about

their origins, at times they felt it was difficult to discuss their background with their adoptive parents, blocked by their sensitivity to their parents' feelings (e.g. divided loyalties).

Decker and Omori (2009) stated that little attention has been devoted to examining the effect of age at adoption in adoptees' later years. Studies in the area demonstrated that children who are adopted at an older age will more than likely present with behavioral and emotional problems during their teen years. The researchers specifically focused on the socioeconomic status (SES) and psychological well-being of older child adoptees and how these children did later on in life, specifically in their 30s and 40s. The researchers examined, the following relationships, among adoptees: age at adoption, the individual's future education levels, incomes, home ownership and divorce status, and depression scores. Howe, Shemmings, and Feast (2001) studied 472 adopted adults from the United Kingdom about their adoption experiences. The researchers found that babies adopted at birth were more likely to have successful adoptions than older-placed adoptees. In addition, older-placed adoptees were at an increased risk for behavioural problems, poor mental health, and displayed relational difficulties within their adoptive families.

An aspect that is not considered in the research is that older-placed adoptees have a reference point to compare prior historical experiences to newer ones within the adoptive home while infant-placed adoptees do not have such a reference point to compare their pre and post-adoption experiences. Decker and Omori (2009) concluded that age at the time of adoption did not significantly impact later income, home ownership, divorce rate, or depression levels in those adults within their mid-30s. Later-placed adoptees earned as much, owned their own homes, and were as likely to get divorced as those who were placed as infants. Both groups had an equal probability of feeling depressed.

Adult Adoptees and Attachment Security

Feeney, Passmore, and Peterson (2007) examined the impact of one's adoptive status and family experiences on adult attachment security and how their attachments predict relational outcomes. The authors argued that the idea of adoptees being at-risk for general adjustment difficulties within the literature still remains quite controversial. They stated that the reason for the mixed findings is unclear, however, they liken that "methodological (sampling and measurement) differences between studies may be one factor. Another possibility they raised is that the link between adoption and adjustment depends on the range of factors, biological (e.g.

prenatal drug exposure), social (e.g. functioning within the adoption family), and social structural (e.g. financial well-being of the family). Further, regardless of the mixed findings, they asserted that adoptees' issues stem from loss which is central to their experiences and to their relationships. To date, there is significant amount of literature in the area of adoption, loss, and abandonment. However, there are fewer studies that have examined the impact of adoption on adults' relationships, specifically with their peers. The researchers mentioned that this area has certainly lacked a strong theoretical framework. To their knowledge, Borders, Penny, and Portnoy (2000) were the only researchers to have explored the link between adoption and adult attachment security. In comparing adoptees to non-adoptees, the researchers found that adoptees were underrepresented in the secure attachment group and overrepresented in the preoccupied and fearful groups, and reported less support from their social support systems (e.g. family and peers). Feeney, Passmore, and Peterson (2007) emphasized that though the study provided the first step in linking adoption with adult attachment, it did have its limitations: "limited by its cross-sectional nature, its reliance on a categorical measure of attachment, and its failure to fully consider the role of early parenting and ongoing relationship experiences in relation to attachment" (p. 130). They determined that insecure attachments among adoptees may be more widespread than among non-adoptees. However, adoptees still tend to be overrepresented in the insecure attachment categories (e.g. fearful). Adoptees scored higher on the avoidance and anxiety, two dimensions that underlie measures of adult attachment.

Adult Adoptees: Research Questions and Measures

Parental Bonding Instrument

Passmore, Forgarty, Bourke, and Baker-Evans (2005) compared adult adoptees versus non-adoptees relative to self-esteem, identity processing style, and parental bonding. They stated that much of the literature reviewed tends to focus on understanding the implications of childhood adoptions for later psychological functioning, by using simple research comparisons that are made between those who are adopted and those who are not, on various psychosocial indicators. They hypothesized that adoptees would have lower self-esteem and parental care than those who were not adopted. Second, they expected that reunited adoptees would report having higher self-esteem than those who did not reunite. Third, they hypothesized that positive parenting, higher parental care and lower parental overprotection, would predict self-esteem.

Their results indicated that adoptees did report having lower self-esteem and lower maternal care than non-adoptees. However, there were no differences relative to the parental care in comparing both groups. The researchers also found that one's adoptive status did not significantly correlate with any of the identity styles. Reunited and non-reunited adoptees, and non-adoptees did not differ significantly on any of the identity style measures either. Lastly, their third hypothesis on positive parenting was only partially supported in their results. Parental bonding variables explained more of the variance that they found in adoptees' self-esteem than just examining one's adoptive status alone. In essence, the quality of parent-child relationships is more pertinent than one's adoptive status in predicting self-esteem. This finding is well supported by other studies that suggest well-functioning adoptive families can help buffer adoptees against developing poor or low self-esteem (Kelly, Towner-Thyrum, Rigby, & Martin, 1998; Levy-Shiff, 2001). Adult adoptees must accept that they have dual identities. For some, anxiety may be felt over having loyalty to two sets of parents (Corder, 2012). Identity formation is further complicated should the adoptee not develop a strong bond with his/her adoptive parents (Nydam, 1999). Hence, I examined how adult adoptees' experiences of adoption influence their perspective of parenthood. In order to explore this aspect, the *Parental Bonding Instrument* (Parker, Tupling, & Brown, 1979) was used. This measure described various parental attitudes and behaviours, requiring individuals to think back over the first 16 years of their lives to rate both the attitudes and behaviors of their mothers and fathers separately. This scale has also been referenced in addressing the third research question, in order to access the intergenerational effects: *how do adoptees' childhood experiences influence their perspectives on being a parent?* Feeney, Passmore, and Peterson (2007) utilized this measure to explore what impact one's adoptive status and family experiences has on their adult attachments. Possessing high alpha coefficients and good reliability and validity (to be further discussed in Chapter 3), this measure tapped into their experiences with their adoptive parents, which in turn got internalized as the working model of self and other.

French (2013) examined the terms 'self-worth' and 'self-esteem' as both are used to reflect the notion of what people think about themselves within society, while establishing a general valuation of themselves as individuals. The author offered that the current role of self-esteem in adopted adults is limited in the literature. Also, the researcher argued that adoption researchers have viewed self-esteem "as a largely static product of intrapsychic machinations"

(p. 129). Juffer and van IJzendoorn (2007) stated that between-group research designs tend to put adoptees against non-adoptees when examining self-esteem or present different subgroups of adopted individuals. In addition, self-esteem has been acknowledged in many well-known theories of adoptive identity (Brodzinsky, 2011; Grotevant & Von Korff, 2011), but the "mechanisms by which self-esteem may be a contributor to identity have been largely unexplored" (French, 2013, p. 129).

Parenting Sense of Competence Scale

Moyer and Juang (2011) stated that little information has been offered regarding adoption experience because a large portion of the adoption literature focuses primarily on the pathology among adoptees. Further, the researchers have suggested that within-group variability should be addressed regarding the culture of adoptive families, reunification status, and age at adoption. In addition, they also stated that constructing an identity gives a person a sense of continuity of past, present, and future. Adult adoptees experience many transitions that center on personal relationships, for example, leaving their adoptive families, marriage, and parenthood. During these pivotal times, identity is redefined and adoption issues become a more important topic for some adoptees (Grotevant, 1997).   Baden and Wiley (2007) stated that there is not agreement within the adoption literature on adoption's impact on identity. In addition, researchers have not adequately examined identity development among adult adoptees. I examined how the adoption experiences impact the adoptees' self-concepts and identities as parents. Given that few researchers have investigated what being adopted means for adult adoptees (Borders, Penny, & Portnoy, 2000), the *Parenting Sense of Competence Scale* (Gibaud-Wallston & Wandersman, 1978; Johnston & Mash, 1989) was used to explore parents' experiences and to measure parents' self-esteem/self-concept. This scale is "designed to measure parents' satisfaction with parenting and their self-efficacy in the parenting role" (Gilmore & Cuskelly, 2008, p. 50). Johnston and Mash (1989) proposed that parents' self-esteem encompasses both perceived parental self-efficacy and satisfaction from parenting children.

It is pertinent to clarify which concept, self-esteem or self-concept, was used within this thesis. Gray-Little, Williams, and Hancock (1997) stated that self-esteem, an evaluative component of self-concept, is quite commonly used within research. However, self-esteem has its own limitations in that it is depicted as a global and uni-dimensional construct, whereas self-

concept is more multi-dimensional in nature. In fact, dimensions of self-concept contribute to global self-esteem in which these dimensions are considered to be important in contributing to one's sense of self (Fox, 2000). For these reasons, I used the notion of self-concept in this research rather than the global construct of self-esteem.

Experiences in Close Relationships-Revised Questionnaire

Verrier (1993) argued that in separating a child from his/her mother and disrupting the prenatal attachment, lasting damage can result, impacting the child's emerging sense of self. In addition, given that feelings of loss are never completely resolved (Silverstein & Kaplan, 1982), these feelings may intensify at transitional periods during an adult adoptee's life, for example, graduation, marriages, and childbirths. The last question that this researcher explored is how adoptees' childhood experiences influence their perspectives on being a parent. In answering this aspect, the *Experiences in Close Relationships-Revised Questionnaire* (Fraley, Waller, & Brennan, 2000) was used. Also, references to *The Parental Bonding Instrument* (PBI) were made in order to access the intergenerational effects adoption has on the dynamics between adult adoptees and their own children. Adoptees are often overrepresented in the insecure attachment categories (Feeney, Passmore, & Peterson, 2007); this attachment inventory is designed to assess two fundamental dimensions underlying attachment patterns: anxiety and avoidance (Fraley, Waller, & Brennan, 2000). Ravitz, Maunder, Hunter, Sthankiya, and Lancee (2010) stated that as adult attachment becomes more increasingly pertinent in research, "research that incorporates measurement of attachment provides a unique perspective because attachment constructs are theoretically and empirically distinct from other personality and social constructs, such as neuroticism, global distress, self-esteem, defensiveness, dysfunctional beliefs, and support seeking" (p. 419). To clarify the particular use of this attachment inventory versus other well-known ones, Fraley, Waller, and Brennan (2000) noted that adult attachment measures have suffered many psychometric limitations, for example, classifying people into discrete categories (Bartholomew & Horowitz, 1991; Hazan & Shaver, 1987). The authors stated that more recently, researchers are focusing on dimensional models of attachment (e.g. Brennan, Clark, & Shaver, 1998), thereby creating multi-item inventories examining individual differences on attachment dimensions. Further, the inventory used in this study has been revised by the authors because as provided by Fraley, Heffernan, Vicary, and Brumbaugh (2011) self-report measures

on adult attachments are relatively long. Though the *Experiences in Close Relationships* (ECR; Brennan, Clark, & Shaver, 1998) and the *ECR-Revised* (ECR-R; Fraley, Waller, & Brennan, 2000) are the most commonly used in the area of attachment, both contain scale items that assess anxiety and avoidance "with a sizable amount of redundancy among some attachment items" and, in essence, "an ideal measure would allow attachment to be assessed across multiple relationships without placing too much of a burden (in terms of the number of items rated) on research participants" (p. 616). For these reasons, the *Experiences in Close Relationships-Revised*, along with *The Parental Bonding Instrument*, were used to address the final aspect in this study.

Chapter 3: Methods

Using the following approach, I referred to the attachment theory framework to draw upon the strengths of both qualitative and quantitative methods through an exploratory-sequential design. Creswell and Clark (2011) defined an exploratory sequential design as one in which "the researcher starts by qualitatively exploring a topic before building to a second quantitative phase" (p. 86). I wanted to determine if any new themes would arise among adult adoptees in the qualitative part of the study. Greene et al. (1989) stated that the intention of the two-phase exploratory design is to use results from the qualitative method (constructivist) to inform the second portion (post-positivist), that of the quantitative method (as cited in Creswell & Plano Clark, 2011). "This design is based on the premise that an exploration is needed for one of several reasons: (1) measures or instruments are not available, (2) the variables are unknown, or (3) there is no guiding framework or theory" (Creswell & Plano Clark, 2011, p. 86). As there are no standardized measures or instruments in the uncharted area of adult adoptees and their self-concepts of parenthood, my design made it possible for me to explore the research questions.

The research questions for the study were:

1. How do adult adoptees' experiences of adoption influence their perspectives of parenthood?
2. How do these adoption experiences impact their self-concepts and identities, as parents?
3. How do adoptees' childhood experiences influence their perspectives on being a parent?

By utilizing, at first, a constructivist approach, I made the assumption that adult adoptees' (Gall, Gall, & Borg, 2007) "social reality is constructed by the individuals who participate in it. These 'constructions' take the form of interpretations, that is, the ascription of meanings to the social environment. Features of the social environment are not considered to have an existence apart from the meanings that individuals construct for them" (p. 21). Through the adult adoptees' experiences, I produced a rich description of their perceptions of parenthood, while reflecting on their own attachment histories and experiences with their adoptions. The next step (quantitative portion) employed a post-positivist approach, that is, I assumed "an epistemological doctrine that asserts an objective reality, but one that cannot be known from a

value-free perspective and with absolute certainty" (Gall, Gall, & Borg, 2007, p. 649). Individuals are all biased and all our observations are affected (theory-laden) – subjective versus objective (objectivity is not a characteristic of adult adoptees rather it is a social phenomenon of all of their accounts). In other words, persons have their own subjective perspectives and assumptions, thereby impacting their own observations about a particular issue. However, collectively, there may be a common theme or trend arising that is consistent among all perspectives about a particular issue. For example, an adoptee may have the self-perception of not being a loving parent to his/her child because he/she was abandoned at birth and may infer this perception onto other adoptees, as being a norm. However, if the perceptions of adoptees are pooled together, one might determine that though adoptees are relinquished at birth, being adopted can impact one's self-perception of parenthood and their very identity. The social phenomenon here is being adopted can impact one's self-perception of parenthood and not whether or not adoptees can be loving parents. When qualitative and quantitative methods are used in combination with each other, both approaches can provide a more complete picture of the research questions at hand (Green, Caracelli, & Graham, 1989; Johnson & Turner, 2003; Tashakkori & Teddlie, 1998).

I employed a qualitative approach by examining adult adoptees' constructed realities through their narration of their stories. Denzin and Lincoln (2005) offered that narrative is retrospective meaning-making, that is, the shaping of a person's past experiences. Further, they stated that a narrative describes what has happened, and also expresses emotions, thoughts, and interpretations. I used this particular qualitative lens, in order to attend to the similarities and differences across adults' adoptees' narratives, exploring themes and/or patterns relative to the participants' perceptions of parenthood. This data collection was accomplished through both qualitative, semi-structured interviews combining the use of open-ended, closed-ended, and probing questions (commencing from very general to more specific questions) (see Appendix C).

I used a quantitative approach by examining how adult adoptees' rated their experiences of both their adoptive mothers and fathers relative to their parents' attitudes and behaviours. In addition, I explored how adoptees' perceived themselves and their identities as parents, such as, their self-efficacies, and lastly, I utilized a measure that explored how adoptees' attachment to others, in order to address intergenerational effects adoption may have on adoptees and their own children.

Participant Recruitment

Participants recruited had to meet the following criteria: (i) 19 years of age or older, (ii) adopted within the closed adoption era (excluding semi-open and open adoptions) within Canada, and (iii) a parent (either biologically or through adoption). In addition, other inclusion criteria participants had to meet were:

(1) participants were available for both the qualitative and quantitative sections;

(2) participants did not present with any current suicidal ideation and/or were not currently in a state of crisis;

(3) participants were willing to discuss both their childhood experiences as an adoptee and views towards parenthood

(4) participants were able to commit to an approximate 3-4 hours of their time to participate in the following:

     ✓ one 60 minute interview to discuss ethics, consent forms, and answer some open-ended and closed-ended questions about their adoption and parenting experiences,

     ✓ one 30 to 45 minute for the self-report questionnaires,

     ✓ one 45 to 60 minute follow-up interview to review (modify or change) the transcribed interview provided.

Upon obtaining *University of Saskatchewan's* Behavioural Research Ethics Board approval and given the sparse literature available in the area of adult adoptees, the study employed a convenience sampling approach, whereby participants were recruited from all over Canada through advertising on online groups (i.e., Canadian Council for Natural Mothers, Origins Canada), adoption newsletters (e.g. Adoption Support Centre of Saskatchewan, Forget-Me-Not-Society, Parent Finders Ottawa), and through word-of-mouth. The advertisement outlined the purpose of the study, eligibility to participate (selection criteria), length of involvement, ethical approval obtained from the *University of Saskatchewan's* Behavioural Research Ethics Board and the contact information of the researcher and faculty thesis supervisor.

Measures

Given that research has yet to empirically examine many areas of the adult adoptee experience (Freundlich, 2002), there are no standardized measures as a result. As the researcher, I used the following measures as the self-administered questionnaires.

Demographic questionnaire. In order to obtain basic demographic information, participants were asked items that included age, gender, marital status, occupation, educational level, age when adopted, if placed in foster care, such as how long. These aspects were collected in order to determine if participants' responses varied among age, gender, and marital status. In addition, persons were asked about their educational backgrounds and what they did for work because, as noted in the literature review, it is common for adult adoptees to delay having children as a result of furthering their education and/or careers. These questions were vital in determining how each disruption (from birth to foster care – perhaps multiple homes – to adoptive family) impacted adoptees' attachment processes and, in turn, their perspectives on parenthood.

The Parental Bonding Instrument. The Parental Bonding Instrument (Parker, Tupling, & Brown, 1979) is "a retrospective measure in which participants separately rate the extent to which each of their parents exhibited particular attitudes and behaviors during the first 16 years of their lives" (Passmore, Feeney, Peterson, & Shimmaki, 2006, p. 27). The measure comprises a 12-item care scale (e.g., spoke to me with a warm and friendly voice) and a 13-item over-protection scale that examines controlling behaviors (e.g. tried to control everything I did). A scale from 0 (Very unlike this parent) to 3 (Very like this parent) is used to rate each item. Parker, Tupling, and Brown (1979) reported test-retest correlations of .76 for the care scale and .63 for the overprotection scale over a three-week period, and Wilhelm & Parker (1990) found adequate test-retest reliability determined from a 10-year longitudinal study (as cited in Passmore, Feeney, Peterson, & Shimmaki, 2006) (see Appendix D). Participants were asked to complete this scale relative to their upbringings with their adoptive parents.

Parenting Sense of Competence Scale. The 17-item scale (Gibaud-Wallston & Wandersman, 1978; Johnston & Mash, 1989) is "designed to measure parents' satisfaction with parenting and their self-efficacy in the parenting role" (Gilmore & Cuskelly, 2008, p. 50). Respondents indicated their responses by using a Likert-scale where 1 represents 'strongly agree' and 6

indicates they 'strongly disagree' to an item. High scores indicate positive parental experience. Jones and Prinz (2005) identified this scale as "the most commonly used tool for measuring parental self-efficacy" (as cited in Gilmore & Cuskelly, 2008, p. 48) (see Appendix E).

Experiences in Close Relationships – Revised. The 36-item self-report attachment measure (Fraley, Waller, and Brennan, 2000), derived from an item-response theory of adult romantic attachment (Brennan, Clark, & Shaver, 1998), provides scores on two subscales: Avoidance (or Discomfort with Closeness and Discomfort with Depending on Others) and Anxiety (or Fear of Rejection and Abandonment). Respondents indicated their responses by using a Likert-scale where 1 represents 'strongly disagree' and 7 represents 'strongly agree' for each item. Fraley, Hefferman, Vicary, and Brumbaugh (2011) stated that the anxiety dimension denoted the extent to which people tend to worry about attachment-related issues, for example, the availability and responsiveness of an attachment figure. The avoidance dimension, on the other hand, refers to the extent with which individuals are uncomfortable opening up to and depending on others. They further offered that "prototypically secure people tend to score low on both dimensions" (p. 617). The alpha reliabilities for this scale are .88 and .92 for anxiety and avoidance scores, respectively (See Appendix F).

The *Experiences in Close Relationships – Revised* scale was chosen, with the attachment theory in mind, because early childhood experiences with one's parents set the course for relationships later on in life (i.e. intimate relationships, attachment to children, etc). Horowitz (2011) suggested that "attachment may be a strong predictor of desire to become a parent" (p. 20). Juffer and Rosenboom (1997) offered that adoptees, when compared to non-adopted persons, are generally as attached and experience average levels of attachment to their adoptive parents. Horowitz argued that if an individual has developed a secure relationship during his/her formative years, then security in one's intimate relationship should logically follow. Next, Horowitz offered that adults' attitudes and future decisions to become parents can be affected if they have insecure attachments and/or have difficulty forming intimate relationships with others. Lastly, Horowitz stated that "adults who were found to be avoidant and more ambivalent individuals not only held models of parenthood which would not influence positive parental relationships, but they also anticipated being easily aggravated by children and therefore less likely to desire them" (p. 20). Of interest, Rholes, Simpson, Blakely, Lanigan, and Allen (1997)

suggested that adults with insecure attachments may not only be uncertain of their parenting skills, but may experience anxiety around their parenting abilities which may thus influence their decisions to parent. Therefore, as discussed above, adult adoptees may experience more emotional challenges than non-adult adoptees for example, they may possess mixed feelings about becoming or being parents.

It is important to clarify that these quantitative instruments used, in this study, were designed for both females and males and were not designed specifically for adult adoptees. They were used, as there are no known instruments that have been utilized with the adult adoptee population.

Procedure

For the present study, I provided in the advertisement, (see Appendix G) an email address as a method of contact. An email address was created for the sole purposes of this study in order to ensure my own privacy versus using a personal email address. Participants were advised that the study obtained ethics approval via the *University of Saskatchewan's* Behavioural Research Ethics Board. Once an email of interest was received, I responded to the potential participant and obtained a phone number. I had a total of 10 people contacted me with interest in participating in the study. Only three met the criteria set out for the study. The remaining seven either did not return the corresponding email or did not meet the eligibility criteria set forth. All 3 participants who met the study's criteria completed all phases of the study. Calling by phone from my office to ensure participants' privacy, I asked each of them the selection criteria questions (see Appendix H) and discussed the study in more detail. If a participant met the selection criteria, a date, time, and choice of venue was agreed upon for the interview. The two choices were offered (convenience for the participant): (i) my office at 901 1st Avenue North, office no. 25, Saskatoon, SK or (ii) in a campus classroom (e.g. Rm 1219) in the Education Building, at the University of Saskatchewan. However, if the participant did not reside in Saskatoon or Saskatchewan, the interviews were conducted over Skype. There was no cost to the participant and Skype is a free service that can be downloaded on any personal computer.

At the first interview, a consent form (see Appendix I) was discussed and signed. In the qualitative portion of the study, I conducted semi-structured interviews, which consisted of

general demographic questions and moved to more specific and open-ended questions (e.g. What comes to mind when you hear the word "adoption"?) (see Appendix C). To clarify, with one participant who was interviewed in person, the consent form and qualitative questions were discussed in the same timeframe. Consent forms were obtained prior to the initial interview from the participants who lived in British Columbia. At the commencement of the qualitative interview, the consent form was discussed in order to address any questions or concerns the Skype participants had. With the one participant who was interviewed in person, the consent form and qualitative questions were discussed in the same timeframe. In order to build rapport with each interviewee, I sought a balance between direct and more probing questions (e.g. Tell me more about …) to ensure that the interviewee was at ease and felt comfortable to describe his/her perspectives and life experiences. Interviews were recorded, in order to ensure accuracy of qualitative responses, and then were transcribed for analysis.

At the end of the first interview, I provided each participant with a paper or electronic copy to answer the self-report questionnaires. The second and quantitative portion of the study entailed respondents answering questionnaires that took no longer than 30 to 45 minutes. I provided the in-town participant with a paper copy of the questionnaires, while the out-of-town participants obtained an electronic copy. All 3 participants returned the questionnaires within a few weeks. During the weeks in which the participants were completing the questionnaires, I transcribed the interviews. Once the transcribing was completed, I then cleaned up the interview (e.g. editing for the ahs and ums) prior to finalizing and emailing transcripts to participants. To ensure participants' privacy and confidentiality, all transcripts were password protected when emailed to them. A separate corresponding email was sent with the password. Though initially I had planned to have a second interview with the participants, with my intention to provide them with an opportunity to add, change, or delete any information appearing on their transcripts, I found that all 3 participants did not require the additional final and follow-up meeting. To clarify, when the participants emailed back their transcripts, they had provided the changes and omissions necessary and added more information that came up for them after the interviews. The participants did not add any more information that would have required a Skype or in person interview for the final and follow-up meeting, as I had initially planned. A final interview was not required because the participants did not provide any more information that would require another scheduled meeting. In responding back to their emails, I decided to email them the two

second interview questions (see Appendix C) to ensure this step was covered and provided them with the data/transcript release form (see Appendix J). Upon completion, all participants were provided with a $20 gift certificate to Starbucks (provided with a choice of Starbucks or Tim Hortons) and a thank you card for their time and interest in participating in the study.

<div align="center">**Data Analysis**</div>

In both qualitative and quantitative studies, researchers follow a basic process of conducting research through a series of steps: posing a question, collecting data, analyzing data, and interpreting the results from the data obtained (Creswell & Plano Clark, 2011). In this mixed-methods research, I analyzed the data obtained from the qualitative phase first, followed then by analyzing the quantitative section afterwards. Each section below is described individually, and then I integrated both sections' findings, and discussed the results within the integrated section.

Qualitative Phase

Thomas (2006) stated that though collection of qualitative data in the realm of evaluation is common, knowledge of strategies that are efficient and defendable for analyzing such data is less common. Within this qualitative portion of the study, while I examined the transcribed data, I noticed common anticipated themes arise and I also discovered new emerging themes from the interviews. Some examples of the common anticipated themes were: identity and loss. Silverstein and Kaplan (1982) stated that these identity and loss issues, among others that they identified, are universal adoption issues and trigger emotions that are experienced, to some degree or another, by every adoptee. Given that the adult adoptees, in this study, grew up in the closed adoption system, all participants only had fabricated social histories to assist them in answering questions about their birth families. Their identities are built on the past, present, and future in order to feel whole as individuals. As a result of not having answers of their pasts, the participants are often faced with having to deal with the void and/or profound sadness that rest inside of them. This is the core issue of loss that adoptees experience, which is another core issue that Silverstein and Kaplan (1982) identified years ago.

All the participants interviewed had read a lot about adoption over the years. As all adoptees embark on different journeys to understanding themselves, some individuals read a lot

about their personal experiences regarding a situation they have experienced. For example, adoptees may be reading about how the effects of adoption impact their self-concepts or identities. When I was interviewing each of the three participants, I jotted down some notes on possible new emerging themes, so that I could go back to further explore those themes when transcribing the interviews. For example, when one of the participants described her reunion experiences with her biological family, she referred to some of her experiences as being "synchronistic". Harper Stiffler (1992) investigated the many stories, shared by those who were separated by adoption, about the uncanny or funny coincidences only discovered as significant at reunion many years later. For example, one of the participants referred to discovering her 'true self' upon reuniting with her biological family because she could finally determine where some her mannerisms came from.

Apart from discovering new themes with the interview data, I divided the interview data into smaller units (e.g. phrases or sentences) and then assigned a label to those units, in order to group the themes obtained (Creswell & Plano Clark, 2011). One method that assisted me in breaking down some of the data was bolding certain words or phrases (a color that can be assigned within NVivo 10 software). There are many practical qualitative data analysis programs used today (Creswell & Maietta, 2002) and NVivo 10 is what I used, in this study, to manage all interview data. Creswell and Plano Clark (2011) stated that software programs, such as NVivo 10, can assist researchers to store documents for analysis, while enabling the researcher to block and label text segments with color coding from interviews for easy retrieval. In addition, organized themes were displayed into a visual diagram to see relationships among the established themes.

Marshall and Rossman (2011) explained that codes are generated into categories and themes. From there, following Creswell (2003), I looked for broader patterns or generalizations from the themes or categories. My next steps were to compare those patterns or generalizations to past experiences and/or to the literature. I employed a method of open coding, identifying any relating variables involved in adoptees' experiences, and then I used axial coding, looking for connections between each theme, in order to reduce the number of themes I identified.

A strategy that is common among much qualitative data analysis is a general inductive approach (Thomas, 2006). Thomas stated that the primary objective of this approach "is to allow

research findings to emerge from the frequent, dominant, or significant themes inherent in raw data, without the restraints imposed by structured methodologies" (p. 238). In addition, Thomas mentioned that inductive coding begins with close readings of interviews, establishing and linking categories to other categories in various relationships (e.g. hierarchy of categories). NVivo 10 allowed for me to re-read the interview at a deeper level, while establishing and breaking down themes and subthemes. The chart below summarizes how I embarked on my coding journey through the qualitative research data from the interviews.

Table 3-1

The coding process in inductive analysis

Initial reading of text data	Identify specific segments of information among the categories	Label the segments of information to create categories	Reduce overlap and redundancy among the categories	Create a model incorporating the most important categories
Many pages of text	Many segments of text	30-40 categories	15-20 categories	3-8 categories

Source: Thomas (2006); Originally adapted from Creswell (2002, Figure 9.4, p. 266)

LeCompte (2000) proposed a five-step model, as follows:

Step one: Tidying up

The initial step that I accomplished in my analysis was "tidying up" (Romagnano, 1991). This process is essential to coding and analyzing the research data. LeCompte offered that researchers must: make copies of all data, review research questions thereby comparing them against the data collected, and identify any missing data by determining if the data collected can address and/or answer each research question set-out within the study.

Step two: Finding items

In this step, I engaged myself with specific items in the data set of which were coded, counted, and assembled into research results. Items were sifted and sorted, as the data was sifted by repeated readings through interviews to identify items that were relevant to the research

questions. I engaged in a systematic process of looking for frequency and declaration (LeCompte, 2000). While the frequency is identified because items can be numerous in amount, declaration pertains to items that are identified as significant by participants who told me items exist.   NVivo 10 enabled me to generate the frequency or population of words, from the word count option, to get a better idea of what themes were emerging.

Step three: Creating stable sets of items

Relative to the third step, I identified initial items, and then organized those items into groups or categories by comparing and contrasting items. This approach enabled me to look for things that were alike, as LeCompte (2000) explained, and/or things that were slightly different. As a result of this step, I changed initial descriptions of categories, as required.

Step four: Creating patterns

At this stage, I identified patterns. Identifying patterns enabled me to see how information could be assembled in meaningful ways. LeCompte (2000) stated that, "collecting data and finding items, involves taking things apart and identifying their constituent parts. Locating patterns involves reassembling them in ways that begin to resemble a coherent explanation or description of the phenomenon under study" (p. 150). Using NVivo 10 allowed me to visually look at the patterns and/or themes emerging (through the creation of tree diagrams).

Step five: Assembling structures

In the final step involved in this approach, "groups of them (patterns) are then assembled into structures, or groups of related or linked patterns that, taken together, build an overall description of the program or problem being studied" (LeCompte, 2000, p. 151). Within NVivo 10, I was able to establish hierarchies, for example, main themes, and then group relevant sub-themes under the main themes. This process of establishing hierarchies enabled me to see the patterns among the themes and sub-themes.

LeCompte (2000) stated that in order for researchers to create great research findings, the analysis must yield results that are meaningful to the population being examined. For internal validity, I shared the data and interpretations with participants (member checks) to ensure the

rigor and credibility of the study. In addition, I brought to the analysis my years of counselling experience as a certified adoption, foster care, and attachment psychotherapist. Apart from being a Certified Canadian Counsellor, I am also an adult adoptee. These personal and professional contributions provided breadth and depth to the data analysis, for example, in the types of questions posed to participants and in conveying a certain understanding to the participants' experiences. Golafshani (2003) stated that "engaging multiple methods, such as, interviews and recordings will lead to more valid, reliable and diverse construction of realities" (p. 604).

Quantitative Phase

In this exploratory sequential mixed-methods study, the quantitative portion was completed in the second phase. Blaikie (2003) stated that the most challenging objectives in quantitative research for researchers "is to establish the elements, factors or mechanisms that are responsible for producing the state of some social phenomenon, or regularities and trends in it, that is, to explain why social phenomena are as they are or behave as they do" (p. 116). The author further offered that researchers are set out to answer the "why" to their questions, in order to determine the causes of what researchers have set out to study. Given the small sample obtained ($n = 3$), I am not assuming that the quantitative results can be generalized to a larger population. Though these instruments have not been used for this specific adoptee population, the measures used in this study, have addressed their psychometric properties (reliability, validity), as already discussed above. That said, the quantitative results may provide an intriguing start point, in conjunction with the qualitative results, with a larger sample size, for future research. For example, if a parent has questionable doubt regarding his/her parenting abilities, an avoidant or anxious attachment style may offer a possible answer versus just guessing what the participant is experiencing. As with exploratory designs (Creswell & Plano Clark, 2011), my research questions and purpose "call for the qualitative strand to have greater priority within the design" (p. 87) than the quantitative strand.

Integration of Qualitative and Quantitative Data

In the end, I interpreted the connected results by summarizing, analyzing, and interpreting both qualitative and quantitative results, as per the basic procedures in implementing an exploratory design, according to Creswell and Plano Clark's (2011) work. Results from both

portions of the study were reported collectively versus individually. Using the principles of the attachment framework, I then analyzed both strands of data, qualitative and quantitative in order to address my research questions set out for the study. Below is an integration of the major themes, including quotes from the participants combined with quantitative findings. A discussion is offered in this section along with supporting information from the literature. To clarify, I used the four steps by Creswell and Plano Clark (2011) to realize the exploratory design of my research study:

(1) I designed and implemented the qualitative strand as described above;

(2) I used strategies to build on the qualitative results;

(3) I designed and implemented the quantitative strand

(4) I interpreted the connected results (e.g. summarized and interpreted both qualitative and quantitative results) (p. 88).

Once I had designed the qualitative strand from drawing upon my clinical experience and from the known gaps within the literature, the strategies that I used to build upon the qualitative results were from useful quotes or sentences from the participant. Given I reviewed and role-played the qualitative questions, and drawing upon my experience as an adult adoptee as well as from counselling others, I anticipated potential answers to the qualitative questions. As a result, and given time constraints, I thoroughly researched quantitative measures prior to finalizing them. I had changed my selection of measures a few times, in order to best reflect the research questions I was trying to answer.

When interpreting the connected results, the findings generated assisted me to answer my research questions. Findings were then compared with sourced literature findings, when possible. As noted earlier, some themes, for example, loss and grief, have already been studied in adopted children and/or youth (Silverstein & Kaplan, 1982). For this study the qualitative strand, versus the quantitative strand, was emphasized due to the depth of information obtained from participants as well as the close link between the questions designed for the interview with participants and the actual research questions.

Ethical Considerations

All respondents were treated in accordance with the Code of Conduct outlined by the *College of Psychologists of Saskatchewan* and the *Tri-Council Policy Statement* of Ethical Conduct for Research Involving Humans (TCPS2). The benefits of this kind of research were explained to participants, conveying the importance of their input in contributing to a better understanding of this particular population and in shaping services to be offered to them. Adoption is very complex and multi-faceted in nature and, as Corder (2012) stated, "one issue that adoptees may deal with throughout life is a sense of loss and grief" (p. 449). Though unpredictable, it was possible that some respondents may have experienced some unresolved emotions after the initial interviews. To minimize harm, I provided post-adoption support and services contact information to all participants should they have required support to address any emotions they experienced. For out-of-town participants, I made a note of telling them about the supports that are available to them, if needed and/or required. For example, when I listed counselling organizations, I selected ones that were available in all major cities (e.g. Catholic Family and/or Family Services). These companies are Canada-wide.

Chapter 4: Results

In this section, I present the participants who were interviewed, followed then by reporting the qualitative and then the quantitative data separately, and integrated both sections.

Participants

Participants interviewed in this study were 3 female adult adoptees ranging from 29-53 years of age. To ensure participant confidentiality, I chose pseudonyms. In addition, in my use of participants' quotations, I removed specific names to assure their anonymity and I edited repetitive and unrequired words (i.e., um, yeah, etc). I removed or edited certain portions of the transcript, to ensure confidentiality and to increase the readability of the text. Two participants were Caucasian, and one was First Nations in ancestry. One participant resides in Saskatchewan, while the other two reside in British Columbia. Adult adoptees' children's ages ranged from newborn to mid-twenties, with one of the participant's child presenting with special needs, for example, autism. All of their children are biological rather than adopted or fostered. In terms of occupation, Rebecca is a teacher/early childhood educator and is married with two children. Cassie is a social worker, a single mother with a newborn. Elaine is an accountant, recently separated with three grown children. The following results described below are discussed with Rebecca's, Cassie's and/or Elaine's perspectives (i.e. quotations) on the questions posed.

Qualitative Phase Results

In order to provide context to the results, the following is a brief background description of my clinical experience in the field of adoption and attachment, and of the female participants from this study.

I have been in clinical practice for over 10 years now, and have had the privilege to study under many attachment experts over the years. After I graduated from the University of Ottawa, in 2005, with a Master's degree in Counselling, I wanted to specialize in an area that was unique from other practitioners in town. I realized that there was a need for adoption and foster care therapists. I have assisted many children and families relative to adoption and foster care issues. Whether families adopted children internationally or domestically, the one concern that presented was how to attach to their children. Over the years, I decided to trained and specialize

in Dyadic Developmental Psychotherapy by Dr. Daniel Hughes and in another attachment approach that was more applied in nature. In addition, I am certified and specialize in fertility counselling in order to fully understand some adoptive parents may have experienced prior to forming a family through adoption. Over the years, I have noticed similar patterns among families, children, and even more currently adult adoptees. More specifically, I have noticed many adult adoptees struggling with their sense of self and how to parent their children. This clinical experience has led to my interest in researching those patterns, for example, of identity, loss and grief, among adult adoptees. The following below is a brief look at the three adult adoptees' backgrounds.

Rebecca

Through the stories told by her adoptive parents, Rebecca was adopted at one month of age. Growing up, she resided in an eastern province prior to moving to a western province, where she currently resides. Rebecca stated that her father was a minister and described him "as a workaholic". She mentioned that she always felt comfortable with him, and that her father would often console her when she had nightmares. Rebecca described her mother "as a minister's wife where everything had to appear perfect". Throughout her life, she mentioned that she experienced "periods of sadness and depression throughout her life" and she disclosed experiencing abuse within her adoptive family. Rebecca mentioned that her mother "was very controlling" and "I just could never be what she expected me to be".

In her adoptive family, Rebecca has an older brother who was adopted, and a younger brother who was her adoptive parents' biological son. Initially trained at university to be a teacher, she is currently now an early childhood educator. When she was 28 years old, her daughter was born, and a year later her son was born. Currently, they are adult children in their mid-twenties. Apart that Rebecca is married, she reunited with her biological family when she was 38 years old. She reported that she has a half-brother who is older than her and was adopted out. Her biological mother remarried and had a boy and two girls. On her biological father's side, she has three siblings. Rebecca mentioned that she has reclaimed her birth name and combined her biological and adoptive name.

Cassie

Adopted at the age of 3.5 months of age, Cassie was in the NICU for a month prior to being adopted. Growing up, Cassie has three siblings and her parents adopted two other girls from the United States. She was raised in a small rural town, in a mid-western province, and continues to live in that province. Cassie disclosed that she "felt embarrassed being adopted because she lived in a small, rural town with no other adopted kids".

Currently in her late twenties, Cassie works in the healthcare field. When she was 22 years old, she reunited with her biological mother with the help from a post-adoption worker. Cassie learned that her biological mother was part of the 1960s Baby Scoop and lived in foster care her entire life. Unfortunately, the reunion with her biological mother did not work out and they never had a face-to-face reunion. Cassie found out that she has a half-sister on her biological maternal side. She started exchanging letters with both her biological mother and biological father. The response from him was more positive, though over time contact had diminished. Cassie learned that she has a half-brother from that side of her family. She is still in contact with a biological cousin from her maternal side.

Cassie disclosed that she felt no connection to her biological parents, but did towards her adoptive parents. Further, "I never felt connected to learn more about being First Nations…I just feel like I am Canadian and that's good enough." She mentioned that her adoptive mother had a previous experience with adoption, prior to her adoption. She had surrendered a child for adoption when younger. Cassie mentioned that she never told her adoptive father, for fear of hurting him that she reunited with her biological family. However, her adoptive mother was supportive and aware that she did. Despite that she has an infant biological son, she would like to adopt domestically, someday, when she is in her thirties. Cassie is parenting her son on her own and exposes him to First Nations' traditions, such as pow-wows.

Elaine

Growing up in a western province, Elaine was not adopted until she was over 2 months of age. She was in the hospital due to eczema from a milk allergen. Along with her younger brother, she was raised with the message that "you were chosen, our parents were chosen." She disclosed that "we knew that we were always wanted, and knew that we were always loved."

Elaine's adoptive mother was a teacher. As Elaine reminisced about her adoption, she remembered the experience being a positive one in her adoptive family.

Currently separated from her former husband, she has three children: two girls and one boy. Her eldest is in their early 20s and her youngest child is 14 years old. Nearing 50 years old, Elaine works in the financial field. Elaine mentioned that her adoptive mother died when Elaine was 21 years old, waited until she was 40 years old to start the search for her biological family. Her adoptive father remarried and she obtained a step-brother and step-sister.

Though Elaine has not reunited with any of her biological family, she was able to obtain some background information from her own searches. She discovered that her biological mother was on social assistance and "with baby number 5, social services said to her 'you give one or you give me four. You make the choice!'." However, her adoptive mother was provided with a different story that her biological mother was the daughter of a politician from another country. Elaine further described that if she were to keep the baby that she would bring disgrace to the family. Elaine mentioned that her adoptive mother never wanted to discuss anything to do with her adoption, that "it was never a topic to be discussed". However, she found out that her adoptive parents adopted a boy, but that the adoption failed before she was adopted. Her parents also tried to adopt a girl with special needs, but were not successful. Lastly, Elaine learned that she has four half-siblings from her biological mother.

Aside from the participants' backgrounds, in order for me to analyze the qualitative data, LeCompte (2000) five-step model was used, in conjunction with Thomas' (2006) general inductive approach for analyzing qualitative evaluation data. Patton (2002) described that the inductive analysis processes as "discovering patterns, themes, and categories in one's data" (p. 453). Themes that generated from all three interviews were:

Table 4-1

Summary of Adult Adoptees' Interview Themes

Theme	Sub-theme (category)
Identity	(1) Adapting (2) As a Parent (3) Career Development or Interest (4) Dual Heritage or Culture (rejection of, no sense of belonging, no mirroring, etc) (5) False Self (6) Mirroring of Attributes - Commonness (7) Regression (8) Repression (9) Synchronicity (subconscious connection) (10) True Self
Attachment	(1) Adoptees' Experiences within Adoptive Family (acceptance by parents, childhood illnesses, control, denial, divided loyalties, fantasy, no connection – bond, attachment – mismatched, unresolved grief – rejection Unresolved Grief - Rejection of Child's Genetic Differences) (2) Adult Adoptees – Relationships (Marriage, etc) (3) Effects of Adoptive Environment and Adult Adoptee Childrearing
Loss	(1) Adoption Reunion or Adoptive Family Effects on Next Generation (offspring of adult adoptee) (2) School Difficulties (3) Transition – Adoption Reunion with Biological Family (4) Transition – Parenthood

Societal Messages	(1) Myths and Stereotypes
Emotions of Adoptees (e.g. word of "adoption")	(1) Abandonment – Rejection (2) Acceptance (3) Anger (4) Fear (5) Not Good Enough (i.e. perfectionism) (6) Sadness

Theme 1: Identity

Rebecca, Cassie, and Elaine each made reference to how adoption impacted their lives, as they reminisced about their various experiences as adult adoptees. Though all adult adoptees have a different story, the theme of identity was a central theme for each of the three interviews. Erikson (1968) proposed that the primary theme within adolescence is to answer the question of "Who am I?" As Winkler, Brown, van Keppel, and Blanchard (1988) stated there are many changes, physically and hormonally, that affect an adolescent, creating a feeling of being out of control. Rebecca described how her identity was impacted by adoption. For example, she always wondered where her love of reading came from, and only was able to answer this question when she reunited with her biological family. Her biological mother was an avid reader like her, whereas her adoptive mother was not. In instances like this situation, adoptees often fantasize who might have the same interest, if the interest is not mirrored back or found within the adoptive family. Further, Winkler, Brown, van Keppel, and Blanchard (1988) offered, that "to maintain a sense of control and continuity through time, adolescents attempt to link their current sense of self with past perceptions of self" (p. 89). However, as Midford (1987) described the importance of identity issues in the adoptee's experience:

> Identity is of particular relevance to adoptees. By virtue of the process of adoption they leave their genealogical identity behind a legal curtain upon placement with their adoptive parents. A mystery exists because the individual adoptee's identity is based on incomplete and often unobtainable information. Research has shown identity to be a major component in understanding a number of aspects of adoptee's lives, particularly as it relates to genealogical issues. (p. 1)

As an adoption therapist, I constantly see the struggles that adoptees have relative to identity, regardless of their ages. This quote above reflects the struggles that adoptees face because they have no biological information given to them, and, as a result, struggle to form a coherent sense of self.

There are moments in an adoptee's life where identity issues surface for him/her and when not having the opportunity to have anyone mirror back similar characteristics or mannerisms, adoptees can often feel misplaced, alienated or awkward, as Cassie described her experience growing up First Nations, within a rural area:

> *It felt normal to my family, but... I remember feeling abnormal in the community. Well my parents adopted two little girls from New Orleans... so they were African American...and… we were in a community that's all basically white or First Nations...and...I was really shy, so I didn't like the attention, and I also felt like our family was complete. Like there [sic] are three of us, and we were all older and we were happy... so I didn't understand why my parents felt the need to add to the family. She was searching for that cultural piece, whereas I never feel connected to learn more about First Nations or German or anything... really... I just feel like I am Canadian and that's good enough! (Recorded interview, November 23, 2014)*

Still under the theme of identity, is a sub-theme of *adapting* that arose from the interviews. With adoptees growing up in the closed adoption system, there was no information that was shared among biological and adoptive families, in order to protect the privacies of families. As a result in having no identifying information or contact with their biological families, adoptees cannot process their nature side versus their nurture side of their personalities. Without any identifying information, adoptees begin to wonder if certain personality traits belong to their biological versus adoptive families. Given adoptees struggle with their identities, they often find themselves having to adjust or adapt in order to fit into situations to be accepted and/or to not experience any awkwardness. As Rebecca stated:

> *Yeah, up until then it was more...just...just trying to do the right thing... trying to fit in, in every situation. I remember when I was 16, sitting down and thinking and counting and I thought I've got 16 different "me's"! I am a different me in every single situation! I just tried to mold myself to every situation, like what the others were doing! There is adapting, but there is actually changing how you react to everything, just to be mimicking*

(pauses), almost mimicking each situation or just acting the way people expected me, to act in each situation. My first…whenever I went into a new situation I would sit and watch for a while and then, might venture forth if I felt okay, like I can do this. (Recorded interview, November 16, 2014)

Within my clinical practice, I have found that adoptees will often spend more energy trying to fit in versus just being themselves. However, it is hard to be just themselves, when adoptees do not have a vital part of their identities – biological or genetic information.

For an adult adoptee, identity issues come up quite often throughout parenthood. Elaine described how she thought of her adoptive parents as her parents and nothing else. It was not until her daughter had a school project and the question of *Where did you come from?* came up. Within the interview, Elaine stated that adoption does impact her own daughter with the unknowns. Elaine mentioned that she has found some biological family members, but has not had any luck in being able to reunite with them. Projects from schools can be subtle reminders for adoptees of the unknown and can bring up mixed emotions for them. Thus, the sub-theme of *identity as a parent* was generated from the interviews refers to the common school project students have to complete in health or biology class in high school:

> **Elaine:** *…trying to get answers to questions I had that my kids were curious…my kids wanted to know some stuff like…my daughter was doing a family tree at school and didn't like the family tree I gave her…and she goes "that is not your family tree, you're adopted, what is your family tree?"*
>
> **Christine:** *Oh wow! That's hu:ge!*
>
> **Elaine:** *It was huge because for me that was my family tree. My family tree was my adopted parents. …I had always accepted that…and she was like, "No…that is not your family tree…"*
>
> **Christine:** *So what did you guys end up doing with that piece then?*
>
> **Elaine:** *I said well, let's fill in the family tree with the piece we know because those are the parents that raised me, and so those are the people I see as my parents…and, umm…she…it got me thinking that, you know, at some level she was right. Those were not my…biological family tree…so I had always known at some point I was search it eventually…but I hadn't thought specifically about it…umm…until that kind of comment came and then I thought it's a little more than…it's sort of…it's sort of gnaws at you and you kind of go well, here it…aspect of it grows… (chuckles)*
>
> **Christine:** *…that it does!*
>
> **Elaine:** *Yeah, I should go and get some answers…*

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Christine: *Yeah! hmm… And I am wondering, you know, sometimes you commonly see nowadays, the...maybe three trees almost, or two trees and...did you guys come up with some sort of...blend of that? Be it the biological and adoptive?*

Elaine: *We actually have done it as two trees...biological family tree and the adopted family tree...*

Christine: *And that worked for her to?*

Elaine: *Well, she was passed the project by the time, I got the information (chuckles) (Christine: true...that's true...) (shared laughter) ...um...and interestingly my son had to do the same project and he wanted to do it with my... (pauses) ...adopted parents...the biological aspect didn't faze him...didn't really concern him...but my middle child was actually quite interested in it...of all the kids, she has been the most one to say, "have you found out anything?"..."what do you know now?" (Recorded interview, November 23, 2014)*

Adult adoptees may have experienced having to draw their family tree in high school and the unresolved feelings associated with unknown biological information and known adoptive information. For Elaine, she got to observe how each of her children responded to the lack of biological information, when it came time for each of her children to draw up the family tree for school. The unresolved feelings came back up because now the unknowns impact her biological children.

Another sub-theme that came up from the interviews was that of trying to cope with one's *dual heritage and/or culture.* Assuming that adoptees' non-identifying information is accurate, most adoptees have minimal information, in their social histories, provided to them either by the Ministry of Social Services and/or their adoptive parents. It is quite common for adoptees to reject their biological origins, from time to time, because it reminds them of their adoption status and/or a place of hurt. Hence, it is easier to ignore one's origins because there is no one to mirror those particular aspects (e.g. customs, mannerisms, etc.) from an adoptee's biological family. As Cassie explained:

> *And how I view my adoptive parents, as my "real" parents and not my birth parents…because they are the ones that are real in the flesh, they raised me and taught me my values (pauses)... and how I feel no connection to my birth family… But, I also tell them it's different for everyone…(Recorded interview, November 23, 2014)*

Another example of another participant describing how her identity issues (no mirroring of biological features) came up with her own biological child:

Elaine: *...I guess some of the teaching you get from your own kids is...is...simple teaching, like classroom kind of style teaching, but clearly some of it is you learn about who you are, and what makes you tick...and what turns their cranks, sometimes turns your crank...umm...I mean I was raised by parents who weren't biologically mine so sometimes we didn't relate. Whereas my kids have my sense of humour...umm...my kids have...um...some of my oddity expressions...the way I do things...umm...whether I be concrete or whatever...you know I see that from their dad as well right? (Christine: right...) ...it makes sense of...of his <u>characteristics</u> =*

Christine: *= that mirroring, I think we often talk about...*

Elaine: *Yes! Yes! ...whereas growing up, I didn't experience that with my own parents. I mean, yeah, there were similarities there, but, umm...you didn't get the sense of the same quirks my dad did for instance...or the same quirks as my- ...whereas with my child-, I clearly get being-, the umm...the difference in the style of parenting, style of-, we have the same sense of humour, we have the same mannerisms on some stuff... you know you look at the, some of the characteristics, and one of the lines that has come up quite often recently with the kids is that, boy the apple doesn't fall far from the tree does it! (laughs) (shared laughter) ...so there is a different delight...I think as a parent in seeing your kids have some of your characteristics...umm...you know when you see more of those similarities, than I would have seen growing up.*

Christine: *Right... like you're saying, like personality, the mannerisms...the humour...um...you know some might... (pauses) ...I don't know necessarily refer to that as a loss?*

Elaine: *I don't know if I see it as a loss as much as it is a mystery...*

Christine: *Oh (surprised tone)! Tell me more about that... a mystery?*

Elaine: *Well...in terms of it being a mystery, it is…it is a puzzle in the sense of...of…you wonder what your biological parents might have been like... Why did this, I wonder if they did that...I wonder if they would have found this hard to do...um...you know, sometimes I wonder if there's a way, you know, when I struggle with something, did they ever find a solution to how to do this...because not everything comes easy to each of us... (chuckles) (shared laughter)*

Christine: *So take it for humour, I'm guessing, you...that might be, an example would you said...with the mystery...like would my biological parents would have used humour, as I do with perhaps my children?*

Elaine: *Ah yes, and in my particular case I have a very quirky sense of humour...umm...as a youngster I had to have all the jokes explained to me, which drove my mother abso:lute:ly crazy. Umm, the-, we've discovered in-, as I've gotten older, that I do have a very good sense of humour...it's just very quirky...it's very different...and I get stuff now that I never would have gotten as a kid...probably because she took the time to explain them to me...umm, but I do have a very different sense of humour in…in...puns and stuff...whereas my son has that. He picks up on stuff like that...extremely quickly and finds it extremely funny! (shared laughter) And dishes it right back as fast as I give it out, you know, that kind of thing… (Christine: you bet....) ...he gives it back, you kind of*

look at him and go, huh? Oh ha, go away (chuckles)! Those kinds of things... (Christine: it's true...) (Recorded interview, November, 23, 2014)

It is quite common to see adoptees curious about where certain traits come from when they have their first biological relatives mirroring genetic temperaments back at them. Though for some adoptees, this could bring up some sense of loss associated with not growing up with someone, for example, a parent, who looks or behaves like them.

Another sub-theme that arose from the interview is a *false self vs. a true self*. As adoptees grow up not having a reference point in knowing what life would have been like in their biological families, they are faced to reconcile their genetic temperaments versus their environmental/social influences. As a result, and more often than not, adopted persons are conflicted between their false selves versus their true selves (or sense of themselves). Often feeling like an actor, in order to fit in, is a quite common experience for adoptees. It is easier for one to adjust to the crowd to be accepted than to be oneself, to avoid triggering the imprinted core issue of abandonment and/or rejection. As Rebecca commented:

Wow (sigh)... well I have no idea what it would have been like not being adopted. Other than... my adoptive family was not at all like me! (pauses) So I was constantly trying to suppress who I really was and be who they wanted. Not my dad, my dad was fine, like…but just overall felt like I just had to be…mold myself to whoever they wanted…they expected me to be. (Christine: um – sympathetically stated). As opposed to my true self… (Recorded interview, November 16, 2014)

Another experience that Rebecca stated for this sub-theme:

Who I really am...I really felt like I was just acting, never letting my true self, never letting me react the way I wanted to react or felt... about things because I knew it was wrong! I used to…I remember, early on, running home from school happy about something, telling my mom and she reacted negatively. So I started when I talked about things that happened at school, I would always told stories about the "other" children, when it was really me. So that, you know, she didn't approve, it was the "other" children. If she did, I could accept that! Yeah, it was! It was just to realize that all these things I'd… tried to push down and just were who I really was! They were just the real

"me"! Because that was who I was supposed to be… (Recorded interview, November 16, 2014)

When counselling adoptees, most adoptees have presenting concerns with self-esteem. Many struggle trying to work through issues of abandonment and not being good enough, as a result of being placed for adoption.

During the reunification stages, adoptees may reclaim their true identity. This is an attempt for an adoptee to have a say in his/her life, by taking back the original biological name that was changed at birth for so many. Another situation might involve an adoptee passing his/her biological name down to his/her child to honor his/her biological roots. For example:

Christine: *ok! Ah, now is Elaine, is that your-, did you take on your birth name or you left it with your adopted name?*

Elaine: *This is my adopted name.*

Christine: *Your adopted name, okay? And the reason I ask, I've seen, some people have, is they would say, reclaim their…their birth name. Or made some sort of integration of the two.*

Elaine: *(pauses) I gave my birth name to my daughter!*

Christine: *Did you?*

Elaine: *My eldest, yup! (Recorded interview, November 23, 2014)*

Some adoptees like to embrace both their biological and adoptive sides, as seen in the example of Elaine giving her daughter her birth name. This is one way adoptees can begin to integrate their own identities.

Another sub-theme that emerged from the interviews was *mirroring of attributes – commonness*. Adoptees raised in the closed adoption system, never grow up knowing who they look like, until the birth of their first-born biological child, or perhaps until adoptees reunite with their biological families. They will then find the commonness or familial attributes being mirrored back to them. As Elaine stated:

When out with my kids people often comment on how they are definitely "my kids". I don't have that. My adopted mom used to tell me that I looked like her when we were the same age but I never saw it. As an adult things like the comment, "The apple doesn't fall far from the tree." hits home. I wonder who I look like -- what does the apple tree look

like that don't fall far from. I think it has hit me more since both my adopted parents are

now gone. (Recorded interview, November 23, 2014)

Another example, as Rebecca stated:

> **Rebecca:** *I really feel that, that a lot of that is based because I was adopted. Not, they were bullying me because I was adopted, but that's where it all started... with being adopted and then all the things that happened in my home, in school, I was just an easy target! (Christine: hmm) And it might be some personality, some genetic personality (chuckles) traits too!   I wasn't the only one bullied… (Christine: hmm) in my birth <u>family</u>…*
>
> **Christine:** *There were common experiences there... in your birth family?*
>
> **Rebecca:** *Yup! Well, especially my mom. My mom and I are "very linked," I'll send you a picture or two. We ar::re identical! (Christine: oh wow!) We're identical in ever:y way pretty much (chuckles). (Christine: Wow!) It's a =* (Recorded interview, November 16, 2014)

As with all adoptees, there is a struggle for them in wanting to know who they look like.

Looking into a mirror and fantasizing where certain physical attributes or mannerisms come

from.

Another sub-theme that generated from the interviews was that of *synchronicity or a*

subconscious connection. As Jung (1958) described, "Synchronicity takes the coincidence of

events in space and time as meaning something more than mere chance, namely, a peculiar

interdependence of objective events among themselves as well as with the subjective (psychic)

states of the observer or observers" (p. 592).   Given that Rebecca has reunited with her family,

she shared many instances of the similarities she found upon reunion. This is a common

experience among family members reunited for the first time, given the familial attributes have

never been mirrored until now. Sometimes this exchange can be exciting, but it can also be

scary given it is another unknown for the reunited adoptee. As Rebecca stated:

> **Rebecca:** *Yeah! Because she lived most of her, after I was born, most of her time in Ottawa, from about a year on, and I lived in Toronto from the age of 4 or 5 on. So we were quite close! (Christine: Wow!) In fact, she used to go to meetings in the building that both my mom, adoptive mom, and dad worked in…in Toronto!*
>
> **Christine:** *That is quite a synchronicity!*
>
> **Rebecca:** *Oh, we've got lo:ts! (laughs)*
>
> **Christine:** *(laughs)*

Rebecca: *It's just... you don't believe it until you experienced it! It's... I just...there is definitely a connection that can:not be broken! (Recorded interview, November 16, 2014)*

Another example to illustrate this sub-theme came up from Rebecca's interview:

Yeah... (Christine: Wow!) Well, we definitely move all alike. The older one brother who she gave up for adoption, he found her first. And one day he was coming to visit and I had to pick him up, somewhere, and I was quite far away and I saw all these people that got off public transit... and I could tell which <u>one</u>, it was him... by the way he moved. We all move the same. The same hand gestures... mannerisms...it was funny when I was... well first when I met my mo-...anyway, one time when I, the first time I called her mom, and we were talking about it afterwards, and she says well I didn't react and I didn't...wasn't conscious of a reaction when I did that, but later on, I was talking with a friend and I did just this, almost in perceptible head-nod and I realized...that's what she did! (chuckles) (Christine: Wow!) It was so...so small that you don't really notice it, but when I did it, I realized that's what she did, when I called her mom! (Recorded interview, November 16, 2014)

Hearing a similar voice or observing a familiar mannerism for the first time can be a surreal experience for adoptees because they have never grown up with similarities until now. This was an experience Rebecca had shared.

The next major theme that arose from the interviews was: *attachment*. Within this theme, subthemes emerged: (i) adoptees' experiences within their adoptive families, (ii) adult adoptees – relationships (marriage, etc.), and (iii) effects of adoptive environment and adult adoptee childrearing.

Theme 2: Attachment

The second theme that arose from the interviews was *attachment*. The first sub-theme that pertained to attachment or referred to the idea of attachment was collectively gathered under this sub-theme: *adoptees' experiences within adoptive family (core issues of: acceptance by parents, childhood illnesses, control, denial, divided loyalties, fantasy, no connection – bond, attachment – mismatched, unresolved grief – rejection)*, and *unresolved grief (rejection of child's genetic differences)*. This sub-theme can be explained by Rebecca describing her memories, as a child, in how she experienced her mother, as a parent:

Rebecca: *She...she never bonded me with me at all... in any way... she always had an issue with me. There are stories of me crying at night with my dad walking the halls, carrying me. She couldn't handle that and I really think what it is…is that me knowing she's not the right mom...was pushing her away and she couldn't handle that. She was not strong enough herself to love me, even though I wasn't... she couldn't make me stop crying.*

Christine: *Right... Oh wow... hmm, and was that =*

Rebecca: *= It was because she loves babies, she always worked in the church nursery... and loved babies. But, you know, if I were to have ever stopped crying, I guess, she couldn't handle...*

Christine: *Hmm…and the crying, I mean...*

Rebecca: *It would have made her feel like a failure... (Christine: Oh!) She can't... (pauses) make this baby happy.*

Christine: *Hmmm, tell me more about that... make <u>this</u> baby happy...*

Rebecca: *I think, well that's from very early on... so, I think she, I think it was... the both of us were pushing each other because I would push her away and she couldn't handle that, so she just kind of gave up on trying to bond with me at all?! (Christine: hmm) (Recorded interview, November 16, 2014)*

When the closed adoption system was the norm in adoption practices, attachment research was not at the height as it is to date, when one discusses parent-child relationships. As discussed previously, historically children were placed for adoption, within an adoptive family, where the couple could not have their own children because of infertility concerns. Ministry workers would often match the child, at best, to physically match in physical appearance the adoptive family in order to avoid any suspicions that the child was adopted. Rebecca discussed how she and her mother did not bond. For Rebecca, growing up, this likely enforced her core issue of rejection, given that she was placed for adoption by her biological mother and now cannot bond with her adoptive mother. Her crying may have been due to her wanting to be soothed and consoled.

Some core themes or issues that arose from the interviews, but pertained to this category are discussed next.

(i) As every story among adoptees is different, some adopted persons report feeling *accepted by their adoptive parents.* Some other adoptees, do not feel accepted by their adoptive parents for

many reasons. For example, some adoptees feel that they do not meet their adoptive parents' expectations in what they hoped for in a child. As Cassie reported:

> *(pauses) I know that I call my mom more than some of them, and (pauses) I know some of them fight with their moms a lot, whereas I-, I've fought with her, but it's not like that anymore, you know... and (pauses) yeah, I don't know... and I tell her a lot. Whereas I know some of my friends, like when I found out that I was pregnant she was the first person that I called. (Christine: Oh wow!) um, yeah that day and, I know I have a friend of mine, she's also in a different situation, and…like…she is married, but she, she didn't even tell her mom until right before she told the rest of the world, when she was like three months pregnant, you know, so... I was like surprised, cause I'm like…I would just assume you would tell your mom early on because even if there was, like a miscarriage or something, you could still tell your mom that and not feel awkward, you <u>know</u>… (Christine: Right! ...Of course) but = (Recorded interview, November 23, 2014)*

Adoptees have different experiences within their adoptive families. Cassie was one of those adoptees that did experience acceptance versus Rebecca who experienced abuse within her adoptive family.

(ii) When being placed within a foster or adoptive home for the first time, it is common to hear of adopted infants having *childhood illnesses or colds*. Generally, though the child is not fully aware of the circumstances at that age, somatically their bodies are aware of the stress involved in being placed for adoption. As Elaine captured this experience:

> *I guess for me a lot of it, I mean I was raised, both my brother and I were both raised with the notion that, um, you know, we were chosen, our parents were chosen, because... in-, there wasn't a huge long wait list at that time we were adopted. (pauses) I know that my mom had said that there were people who had turned-, had not chosen me because I had estatic eczema...really bad eczema and so they thought it was infectious and they were all afraid of it and all that. But my mom had eczema, so she didn't care... she understood it… but I was always told that we were-, you know…um…our parents who had given us up because they weren't able to afford to take care of us in an era when, you know, there was no father around and that kind of thing. Umm... so, that's what I grew*

up with…I mean…having done research now, as an adult, more likely than not there was

no choice… (Recorded interview, November 23, 2014)

Though this sub-theme did not come up in the other interviews, Elaine described how her adoptive mother related to her because they both experienced eczema. Eczema is a skin condition that is often caused by stress or food allergens.

(iii) A core issue that is common among all adoption members is that of *control*. Rebecca stated:

And so I told, well I think I need to tell her and yeah, it probably went in one ear and out the other. But, there was a bit of understanding still at that time (Christine: Right!) She, I remember my dad, it was a three way conversation, my dad was on the phone too. And, my dad (pauses) ask[sic]ed well what is the correct term to call, like, your mother? Well is it birth-mother, whatever? And I said, well actually, I prefer 'first mother'! And so does my mom and…and my adoptive mom, "Well I don't like that!" Of course you don't! She was still with it a little. (Recorded interview, November 16, 2014)

For adoptees, given that they had no choice in the decision on where and with whom they were to be placed, they try to control unknown circumstances to avoid the awkwardness or mixed emotions that can arise when feeling out of control. Adoptees need to know about situations to prepare and avoid anxieties that may rise with the unknown circumstances. Silverstein and Kaplan (1982) identified control/mastery concerns as triggers for all members touched by adoption. As seen above, Rebecca's adoptive mother is not okay with the idea of calling Rebecca's biological mother, *first mother*. Rebecca emphasized that respectfully she wanted to refer to her as such, as that was her preference. For adoptive mothers, the triggering response of control and loss may involve the subtle reminder of their infertility concerns and that their children came from another family.

(iv) Given there is a grieving process involved among all adoption members, *denial* (stage of grieving) is another core issue or common experience among some individuals. All members experience loss, which is intertwined with the forming of a new adoptive family. In this case below, Elaine is an adult, and she does not possess her own adoption papers:

Elaine: *So I suspected from my mom, there was some shame factor in there... um... why she didn't give me my adoption papers before that, I don't know. Like I say, I know where they were…I had seen them... so, from that perspective they weren't a big shock... (Christine: Right!) But having them handing to me and saying these are officially yours now…your responsible for them... I found that really* <u>*intriguing*</u>*...*

Christine: *... and...in what ways?*

Elaine: *Um... (pauses) I guess it[sic]s kind of what, an official piece of paper, I mean you hear the story, as so much has passed on by a word... but to have the piece of paper in your hand that's officially yours... I don't know…it had an impact in terms of making it a very official statement. (Recorded interview, November 23, 2014)*

It is common for adoptive parents to hold onto adoption court orders and to put them away for safe-keeping. However, prior to a certain point in time, adoptees' biological names where on the adoption court orders, and for adoptees, this piece of paper contains a crucial part of their identity – their birth names. Most adoptees' names were changed by adoptive parents. Adoption court orders might have been viewed as a source of pain and a subtle reminder to adoptive parents of how their families were formed.

(v) Another core issue that arose was *divided loyalties.* Adoptees are caught in a place where they have to honor their adoptive parents for raising them, and are not allowed to search for their own origins because of fear of being abandoned and/or being perceived as being disrespectful or not loyal for having been raised within their adoptive families. This issue becomes more prevalent when adoptees reunite with their biological families, and now have the added pressures of honoring their biological parents who gave them life. For example, Cassie stated:

And how I view my adoptive parents, as my "real" parents and not my birth parents…because they are the ones that are real in the flesh, they raised me and taught me my values (pauses)... and how I feel no connection to my birth family, I always share that. But, I also tell them it's different for everyone because my younger sister is very connected with her birth family, but I think that my part-… partially cultural as well. (Recorded interview, November 23, 2014)

Cassie's reunion with her biological family was not successful compared to Rebecca's. Cassie experienced many said hurts from her biological mother versus Rebecca who had a completely different experience with her biological family. On the other hand, Rebecca felt no connection to her adoptive family, as did Cassie who felt completely connected to her "real" parents/adoptive parents.

(vi) Another issue that often surfaces for each of the three members is that of *fantasy*. For adoptees raised within a closed adoption system, they often fantasize about who they look like, often looking within crowds to find someone who looks like them. For adoptive parents, who could not conceive biologically, they fantasize about what their "perfect" families would look like. Often this is the marketable promise within society to go home and pretend that it is your own child. As Rebecca reported:

> *Yeah! Because before I was reunited, he never considered where I had come from. He never...he told me that, he never really thought about where I had come from! I just got this wonderful baby. I...he never thought about it and I think a lot of adoptive parents are like that! No, no, no, they just appear in our lives, they didn't come from anywhere. (Recorded interview, November 16, 2014)*

Another example of a fantasy, Rebecca offered:

> **Rebecca:** *So yeah, it's...it's hard... and in my business, I work with a lot of families and I see adopted children coming in, and... I say to the parents...that's because they are adopted. Oh, no, no, no! She was ours before she was born. No, that's because she's adopted (chuckles)*
>
> **Christine:** *So what's an example...what do you see in adopted children at your...*
>
> **Rebecca:** *Just a great, uh, independence...well one is very independent, the other one, I am thinking, is very, very... stressed. Of course, she was adopted from China when she was 2 years old (laughs)...*
>
> **Christine:** *From an orphanage... I'm guessing*
>
> **Rebecca:** *Yeah! So she's going from food, language, people, everything she ever knew, not only has she lost her mom, but now she has lost everything! And so she goes through a real tough time... the other one, they're saying how independent, she'll do everything on her own, she is only a year old. Yeah, that's... (laughs) Yeah, that's an adoptee trait... they are not gonna... (laughs) Oh, no, no, no, she was ours before she was adopted...and I think she was trying to tell me, she doesn't know if she was adopted or something... I don't know (laughs) (Recorded interview, November 16, 2014)*

Both participants discussed how they observed adoptive parents' struggle with differences that come up in their adopted children. For example, Rebecca stated how the one adoptive mother assumed that the adopted child was hers before she was adopted. As a practitioner, adoptive parents struggle with fertility issues and many not have resolved their grieving processes prior to

adopting. This is a crucial aspect to resolve, in order to promote healthy attachments between children and parents.

(vii) Another sub-theme that generated from the interviews was memories where adoptees reported experiencing *no connection, bond, or attachment (a mismatched)* within their adoptive families. As Rebecca stated:

> *I had a lot of nightmares and one night I called for my dad and my mom came in and started yelling at me because he wasn't there and I should know that. I wasn't even awake (discontent tone) Yeah, she like…there was no...(sighs) connecting that way, you know, she, if I was upset she just said, "Stop crying"... (Recorded interview, November 16, 2014)*

In the past, ministry officials did their best to match children's physical attributes to that of adoptive parents, in order to reduce the societal stigma associated with adopting a child. Unfortunately, temperaments may have been mis-matched and children felt no bond with their adoptive parents.

(viii) For many adoptive parents who struggled in creating a family and underwent fertility treatments, as a result of multiple miscarriages or trouble conceiving, they experienced *unresolved grief*. Unresolved grief may be experienced by adoptive parents when there are subtle reminders that their children are adopted and, at times, they may reject the child's genetic differences, for example, the child's mannerisms. The following below involves a continuous dialogue between the researcher and Cassie discussing whether or not she can tell her adoptive father that she has partially reunited and the fears of hurting his feelings, if she did tell him of the reunion:

> **Cassie:** *(pause) Well... I still never told my dad because he doesn't have any biological children, but like I... I think I told you my mom gave a baby up for adoption and did the search when we were still kids, so, it was a lot easier to tell her because she has a biological child she had given up for adoption. And she had done the search, so, it was a lot easier!*
>
> **Christine:** *And with your dad, what prevented you from telling your dad? Your adoptive dad?*

Cassie: *I didn't want him to feel like he wasn't a good enough dad, the fact I needed to know or search for my biological...father... I didn't want him-, to take away from him in any way, as him being a dad, you know?*

Christine: *Right! Is it kind of like...just to clarify, like...kind of...I guess, a sense of hurting him? Would that be "it"? (Cassie: Yeah!) okay!*

Cassie: *Yeah, I didn't want to hurt or have him question, his parenting or anything...*

Christine: *And do you think he would have if you told him?*

Cassie: *(pauses) I mean you'd have to feel...like a little bit of hurt because I know how I feel when my sister talks about, she-...I am very careful with my language, I never call my birthparents my mom or my dad... or even my biological siblings, I don't call them my sisters and brothers... and my sister wi:ll! She'll be like...and stuff like that and I know that hurts my feelings, it hurts one of our other sister's feelings, like... because we didn't grow up with them... it's bio-, they are biologically siblings, but it's not like...it's not the same bond but...maybe should... I don't <u>know</u>... (Recorded interview, November 23, 2014)*

As already discussed above regarding divided loyalties, Cassie appeared to be protective of her adoptive father's feelings, in not referring to her biological parents as 'mom' or 'dad'. Though there is a curiosity about her biological origins, she does not want to give her father the impression that he was 'not good enough'. Given her mother had a previous experience with adoption, Cassie found solace in knowing that her adoptive mother would understand the need to search and shared similar feelings of loss and grief.

(2) Another sub-theme that arose from the interviews was experiences of *adult adoptees – relationships (e.g. marriage, etc)*. As Carlini (1993) offered that adoptees struggle with intimacy within relationships, because being in a relationship involves a commitment. Currently, Elaine reported that she is separated from her partner, and stated the following, when inquired, relative to thoughts pertaining to having children:

Christine: *And so...your...what were your thoughts...your husband's thoughts or your experience of that when he...had concerns, as I think you had put it...?*

Elaine: *He never expressed them to me... (Christine: oh!?) No, he never did...and I...there's a whole other history that goes along with this but...umm...he...I always thought he had, he was on the same page as me... and it wasn't until...I guess a year or so ago that I had discovered quite likely he had never been on the same page as me...he has had no experience with adoption at all other than me, but...umm...and I guess it was just not in the works for him...I don't know = (Recorded interview, November 23, 2014)*

Though Elaine did not share why she was separated, and I am not assuming to know the reason, it is common for partners to struggle to understand how adoption impacts them directly or

indirectly. For example, given that some adoptees experience trust and rejection issues within relationships, these issues can impact adoptees' partners in how they relate to adopted persons. Adoptees' first relationships were severed by being placed for adoption, thereby it is possible that all other future relationships are impacted by this first experience of loss so early on in life.

(3) A third sub-theme that came up was a connection between *effects of adoptive environment and adult adoptee childrearing*. Cassie had a very positive experience within her adoptive family and felt a sense of belonging, and mentioned that her adoptive mother has had experiences with the adoption system prior to adopting her (e.g. she has placed a child up for adoption). She reflected on how she experienced her adoptive family, inspiring her to want to become a parent:

> *I just... I guess how important it was for them to have a family and a big family...and my mom...was like an amazing parent, like she was a homemaker so she did the whole...like making all of our meals...you'd come home, there would be cookies on the counter...ah...we grew up rur-, in the country, so... lots of outside time, going for walks, we always had pets, so it was a really good childhood, like there was nothing bad about my childhood...(pauses)...and just how much my mom thought it was important to be a parent as well. And I mean, I... I like, I don't love kids, but I like them (chuckles) and it's in my-, I'm in the field where I meet some really cute kids, so... I definitely knew that I would want to be a parent someday... whenever that day was...and...yeah...I think just seeing that childhood made me (pauses) want to be a parent... (Recorded interview, November 23, 2014)*

Another example of how an adoptee's environment impacted how they raised their own children, as reported by Rebecca:

> *From the age of about 18, I knew I really wanted to have children. I wonder if that was partly because I didn't have anyone related to me. As a parent, I knew early on that I wanted to be different from my mom - especially when I found myself doing things as she would have, I hated myself for them. But I had also learned as a child (whether because I was adopted or abused), that I didn't think right, so it was hard for me to do what FELT right at first. So I really think that my adoption experience made it HARDER for me to be a parent naturally. I find that my mom's youngest who is raising children now, parents*

the exact same way I eventually did. So I guess my genes were stronger than my

environment. Thank goodness! (Recorded interview, November 16, 2014)

Above, Rebecca examined how for her she was able to choose how she wanted to parent. She wanted to ensure that her own children felt loved and wanted - aspects that she wanted, as a child, but never experienced. Rebecca offered more of her reflections of how her adoptive environment impacted her as a parent:

> **Rebecca:** *I wanted them to have more than what I had. And, I think that all comes from right down to their mother's love!*
>
> **Christine:** *Tell me more about that....*
>
> **Rebecca:** *Just to know that... I always there for them... and would support them all the way! Everything! Yeah…and that's what I didn't get. Even if my adoptive mom had been good, she couldn't have done that, but I think...uh, with the way it was... I looked at her and thought ok my "real" mom, which I did used to think, my "real" mom wouldn't do that. She would do this! And so, when I became a parent, let's do this and that.*
>
> **Christine:** *It's almost like you knew what to... (Rebecca: Yeah) what to do, or sought out the information to...*
>
> **Rebecca:** *Let's do not what I had... (Christine: right!) Let's do the opposite of what... (Christine: yeah!) I grew up with. But, that could have happen in any family. It's a...Whether that's from being adopted, but I think the adoptive...just being adopted, just shaped everything. (Christine: hmm) in that <u>moment</u>... (Recorded interview, November 16, 2014)*

As an attachment therapist, one can observe how Rebecca struggled with how to be a parent and what was involved in being an engaged parent. The struggle for her was she did not have that modeled to her by her adoptive mother. For example, the warmth or engagement she would have liked to have experienced by her adoptive mother.

Theme 3: Loss

Adoption is very much intertwined with *loss* for all members, within a closed adoption system. For adoptive parents, the loss is of the dream in having their own biological children. For biological mothers, it is having no support in raising their own children and having to surrender their children to adoption. For adoptees, it is to be given away by the biological family and adapt to a new family over the years. The sub-themes that generated, as a result from the interviews, will be described below: (i) adoption reunion or adoptive family effects on the next generation (offspring of adult adoptees), (ii) school difficulties, (iii) transition – adoption reunion with biological family, and (iv) transition – parenthood.

(1) One of the first sub-themes that arose from the interviews was: *Adoption Reunion or Adoptive Family Effects on Next Generation (offspring of adult adoptee).* Not that all adoptees interviewed were at the same place of reunion as the others. For example, Rebecca offered how she experienced herself, as a parent, having reunited with her biological family. She reflected on how she was raised within her adoptive family:

> **Rebecca:** *But again, it's just parenthood for me is loving them, keeping them safe and providing them with whatever they need to meet all their needs! There's a story about parenting though, after my birth-mom visited, the first time...my daughter and I were going to an event and... and during this event, it was during the evening, she was tired, she leaned against my shoulder. My first instinct was to push her off and then it was like, ha, I know what to do now! And I just put my arm around her (Christine: oh wow! What a beautiful moment!) Yeah! (Christine: Wow!) That was after being with my mom for a week or so...*

> **Christine:** *Wow! It was like it was just in your nature almost?! Or...or...*

> **Rebecca:** *My first instinct was to push her away...push her off. (Christine: right!) That's what I would have got from my adoptive mom. (Christine: Right) So that's what I was raised with, so that's what I was going to continue! (Christine: right!) And then, just having my birth-mom here and hugging me and, you know, whatever (laughs). It was like, haaa, I know what to do! (Christine: Wow!) I know how to be a mom, now! (Christine: awe:ee!) (Recorded interview, November 16, 2014)*

Rebecca described how she had a choice to parent the way she had been parented or to be a parent she always wanted to experience as a child. Rebecca really identified with her biological mother, relative to her warmth and caring nature; aspects that Rebecca aspired to be like when interacting with her own daughter.

(ii) Another sub-theme that emerged among the adoptees interviewed was of *school difficulties.* As noted earlier, Rebecca reflected on how she was bullied at school, as a result as having been adopted and not knowing her true self (absence of mirroring of similarities among biological family members):

> *I really feel that, that a lot of that is based because I was adopted. Not, they were bullying me because I was adopted, but that's where it all started... with being adopted and then all the things that happened in my home, in school, I was just an easy target! (Christine: hmm) And it might be some personality, some genetic personality (chuckles) traits too! I wasn't the only one bullied...in my birth <u>family</u>...(Recorded interview, November 16, 2014)*

In my practice, some adoptees relate their experiences of being bullied to being adopted. Namely, because they may suffer from low self-esteem and may not know how to assert themselves, when faced with criticisms and/or hurtful comments.

(iii) Another sub-theme that arose from the main theme of loss was: *transition – adoption reunion with biological family.* Given Rebecca became a parent prior to reuniting with her biological family, below she reflects on how reunion changed her as a parent:

> **Christine:** *And so, I was wondering how do you think your adoption experience has impacted your views on parenthood? (pauses) I think you probably touched a little bit on that, <u>but</u>...*
>
> **Rebecca:** *And see, and that's why I was wondering whether I would be... I mean because there was me as a parent before reunion. Me as a parent after reunion. There, well- I was going down the same path, but it became so different. It became more as opposed to... I guess I trusted myself more. When I first had them, I... I was first nervous and I could see myself doing, and I probably still do some things my adoptive mom would do. But, uhmm... (Recorded interview, November 16, 2014)*

Another example that illustrated the loss in adoption reunions:

> **Christine:** *I guess in your opinion, what is the most difficult aspect of an adoption reunion?*
>
> **Rebecca:** *Oh, the feelings are so:o intense (pauses) no matter how good or bad, it's just really intense! (Christine: hmmm)*
>
> **Christine:** *Tell me more about the intensity... Tell me more about the intensity...*
>
> **Rebecca:** *(sighs) You know, I think, most of my life I tried to live in this area of intensity. And then, all of a sudden this, you meet this person and the feelings... were... hu:ge! (Christine: hmm) The grief was debilitating. It was overwhelming, the grief at not having been with her all that time. When I realized the bond, and how alive we were, then I really grieved what we had missed. (Christine: hmm) It was... hard to explain. I really did cry for about 6 months or more (Christine: wow!) I went and got some therapy. (Recorded interview, November 16, 2014)*

Though reunions are a very surreal experience for adoptees, reunions can have an impact on other family members as well. For example, effects on adoptees' children and/or partners.

(iv) Loss can also be experienced by adoptees when they become parents themselves. The last theme that generated from the interviews was: *transition – parenthood.* Cassie described how she does not reflect on her feelings of being adopted. This is a common pattern among adult

adoptees given the intensity can be heightened during this time – the intensity of mixed emotions. Cassie stated:

> *Not really, like...even with D. now being born biologically...I don't think about it really anymore... yeah no, it's I don't really reflect on those feelings... (Recorded interview, November 23, 2014)*

Elaine had not reunited with her family, as of yet, however she discussed with me about how she emphasized to her children that they were loved no matter what. Elaine mentioned that her adoptive family were not the sort people to talk about their emotions and thoughts. Another example offered by Elaine:

> *I guess from that point of view, yeah, I say adoption has very much...reinforced to me that you have, that children need to know that they are loved...knows that they're accepted no matter what...that they're-, it doesn't matter, you are not going to give up on them... (Recorded interview, November 23, 2014)*

In further reflection, as noted earlier, Elaine offered the following that fell under this sub-theme:

> *Whereas growing up I didn't experience that with my own parents. I mean, yeah, there were similarities there, but, umm...you didn't the sense of the same quirks my dad did for instance...or the same quirks as my-...whereas with my child-, I clearly get being-, the umm...the difference in the style of parenting, style of-, we have the same sense of humour, we have the same mannerisms on some stuff...you know you look at the, some of the characteristics, and one of the lines that has come up quite often recently with the kids is that, boy the apple doesn't fall far from the tree does it! (laughs) (shared laughter) ...so there is a different delight...I think as a parent in seeing your kids have some of your characteristics...umm...you know when you see more of those similarities, than I would have seen growing up. (Recorded interview, November 23, 2014)*

Some adoptees may choose to repress/numb out their emotions relative to their adoptions because of the fear of their own anger and/or grief. However, transitional periods, like having one's own child can bring up unresolved grief for adoptees.

Theme 4: Societal Messages

Apart from the various themes discussed above, I noticed a lot of societal myths and stereotypes that still exist within the adoption community, which arose within the interviews. As

to the reasons these myths and stereotypes still exist, refer to the historical and/or literature review sections, for further clarification to how adoption practices existed back then. Cassie described how her biological mother was ashamed of telling others that she relinquished Cassie for adoption:

> **Christine:** *Can you tell me more about of her being ashamed of you?   What you mean by that?*
>
> **Cassie:** *(pauses) Just being ashamed that I exist to like…like not wanting to tell people that she given a baby up for adoption and stuff like that...*
>
> **Christine:** *Kind of like, a secret?!*
>
> **Cassie:** *Yeah, like a secret! Yeah! (pauses) Never share with her daughter that she... had given up a baby up for adoption and…yeah... (Recorded interview, November 23, 2014)*

Another example Cassie offered:

> *A little bit and then also, not just like... close the file and never look at it again, kind of thing. Like I know... I guess I've seen it a bit where, I think sometimes...maybe it's more…but with infertility that... I am sure it's such a big wound that some of them don't want to accept that their child has biological family in other places... I don't know... (Recorded interview, November 23, 2014)*

Another participant, Elaine, reflected and offered the following when asked about what she thinks when she hears the word "adoption":

> **Christine:** *So I was wondering... (pauses) a few questions...for starters, what comes to mind when you hear the word "adoption"?*
>
> **Elaine:** *I don't know... it's an interesting question... um, I guess there's a lot of stuff that comes to mind... in my case, it would have been given up for, you know, I don't know that they had a choice in my day of being given up. I think they were taking in a lot of cases, but in a lot of cases you were a "chosen" child...*
>
> **Christine:** *hmm... Tell me more...*
>
> **Elaine:** *...Because the families that get you…chose you. They "chose" that... (pauses) just for the primary <u>one</u>, I mean I was always… I was brought up raised that...that... I was giving up because she wouldn't able-…she wasn't able to provide for me (pauses) but I don't know that that's true anymore... because you learn a lot more about what was going in that era, and how adoptions were handled in that era... (Recorded interview, November 23, 2014)*

In the closed adoption system, adoptees are not part of the decision-making processes as to who or where they are adopted. Part of the fantasy that is created, is that the child is "chosen", implying a specialness to the child, creating a dream of joy and of excitement for the new adoptive parents and family. When in reality, adoptees have no reference point to compare and contrast similarities and differences between their biological and/or adoptive families.

Theme 5: Emotions of Adoptees'

The last theme that emerged from the qualitative portion of this study was: *emotions of adoptees'/adoptees' emotions*. The following sub-themes arose from the interviews: (i) abandonment-rejection, (ii) acceptance, (iii) anger, (iv) fear, (v) not good enough/perfectionism, (vi) sadness.

(i) The first sub-theme that generated from the interviews was: *abandonment – rejection*. In order for adoptees to be adopted, they were abandoned by their own biological families who could not take care of them. As a result, commonly adoptees will reject others before getting rejected to avoid the hurt involved in being abandoned and/or rejected. Cassie described her experiences of being embarrassed, as a child, because she was adopted and felt abnormal:

> *I was really embarrassed of it…because it was so abnormal in my small town, like there was no other adopted kids... like when I went to college, for the first time, I met so many adopted kids and it was normal, but in growing up there was no one else. And yeah, I was just really embarrassed about it. (Recorded interview, November 23, 2014)*

Though Cassie grew up in a Caucasian family, given her biological origins were First Nations, she was embarrassed because she was the only adopted child in a small rural town. The difficulty in not being able to relate to others, in her town, who had similar experiences with adoption.

(ii) *Acceptance* was the next theme that emerged. All adoptees strive to be accepted by others because they do not want to have to deal with unpleasant triggers of rejection or abandonment. . An example, as stated by Elaine:

> *I guess from my perspective, it's-, for me it's been positive... (Christine: hmm) um... you know I am disappointed that I don't have contact with my biological family, but at the same point in time, I don't begrudge that in the sense that, um, for me it was, I don't see*

adoption as a bad experience at all. I would have-...I'd say anything it's a good

experience, um, so I... warm fuzzies, yea:hh, maybe a little, um, positive experiences,

yah... I always know I was loved and that's important... so...um...yeah, definitely some

pretty strong emotions <u>in</u>... (Recorded interview, November 23, 2014)

(iii) The third sub-theme that emerged from the interviews was: *anger*. This often results for

adoptees not only because of the lack of information made available to them, but as a result of

not having a choice and having to deal with the outcome of others' decisions for them to be

placed for adoption. As Rebecca offered:

Yeah, I never... I was never angry at her, like my brother I think, was angry at her. I

remember getting angry at a person who said to me, why would you want to find her?

She gave you away. And I remember getting very angry at that person! (Christine:

hmmm) So yeah I never, I always felt she cared for me, and did it because for the

best...for me. Because she wanted the best for me! (Recorded interview, November 16,

2014)

Upon further reflection, Rebecca described her experiences within her adoption family:

Rebecca: *Oh no! No, that's it! Doors closed. (Christine: Yeah?) (cleared throat) She didn't want to admit that there was another mother.*

Christine: *And for you, the first and birthmother, what is the difference for you? Like, in terms of the terms? Or for the...*

Rebecca: *It's more indignitive! Uh, who she is. Birth-mom says she gave birth to me and then has no more influence... no...even if I never met her, I mean, that I would still be calling her birth-mom, but even if I never met her now, I know there was still an influence there, from her. (Christine: Yeah...)*

Christine: *Yeah, that they have equal, like would you say, equal...*

Rebecca: *Influence, yeah! (Christine: Yeah?) Yeah!*

Christine: *weight or... (Rebecca: Yeah!) bearing... contribution?*

Rebecca: *Yeah, for sure, there, I mean there is, everybody says now, a mother can learn-love more than one child. Or, you know, so many kids these days have more than one mom. (Christine: Exactly...) Why is it different? (Recorded interview, November 16, 2014)*

The anger is very primal for adoptees. Given the separation from their biological families

happened at a pre-verbal age, some adoptees may not understand the emotion. Others may, and

may do anything to avoid being triggered.

(iv) *Fear* arose as another sub-theme from the interviews. It is common for adoptees to be fearful in what others think of them. Fear of abandonment or rejection is at the core of an adoptee's experience. Cassie reflected on her experiences being First Nations within a small rural community, as an adoptee growing up:

> **Christine:** *(pauses) So you were just mentioning a little bit about the kids and how they would just ask you…kind of…you know, were you adopted? And you mentioned, sometimes I said "no", and, I guess I'm curious about that piece? Can you tell me more about that ...*
>
> **Cassie:** *Just because I wanted to be normal, like them, I think and I would say no... and because I was Caucasian looking and my parents were just...they would believe me (softly chuckles) (Christine: hmm)*
>
> **Christine:** *So there were certain things that you said that they believed you?*
>
> **Cassie:** *No, I just…they know, if they were like, are you adopted? I would just say "no" and they believed me because (pauses) my parents were Caucasian! (Christine: hmm) And, they would just be like, oh just your sisters are? And I would say "yes" (Christine: hmm) (Recorded interview, November 23, 2014)*

As another example, Rebecca described that she was not afraid to attach to her own child, despite what she had experienced growing up with her adoptive mother:

> *...the child's eyes and going with them, as opposed to making them fit what we want. And, but that's part of that too, my son, wasn't sleeping so I got that book, The Gerber, whatever it was, the thing where you let them cry five minutes, ten minutes, twenty minutes, whatever... I think that lasted two nights and I was sitting outside at his door thinking, what am I teaching him. I am teaching him I won't come when he thinks he needs me. Whether he needs me or not, he thinks he needs me. And I think, you know, if I think back now to being adopted, it's kind of what I grew up with. When mom wasn't coming. Right?! (Christine: right…oh:h!) ...and maybe that's why, it almost made me flip the other way and thought, "No! I am not doing that to my child!" (Christine: Wow!) I mean, I'm thinking even, I'm thinking my birth-mom, whatever my adoptive mom was, when I was crying I really wanted my birth-mom. Not consciously, but, my mom never came! And I thought I am not going to do that to my child. I mean, I didn't think that consciously at the time, but just talking about it, I thought, yeah, that's exactly what it was... (Christine: it just makes sense... yeah...) Yeah... I...as an adoptee, I thought I can't make my child feel abandoned by me. (Recorded interview, November 16, 2014)*

Fear may prevent some adoptees from connecting with others because they already feel different inside. Often because of this fear, adoptees may reject before getting rejected by others, as a test to determine their worthiness. Sometimes some adoptees may reject bonding with their children because as infants they were rejected by their biological families, immediately after birth. So adoptees may re-enact what happened to them at birth with their own children.

(v) The next sub-theme that arose was: *not good enough/perfectionism.* Adoptees often reflect how they are not good enough or have perfectionistic tendencies, as a result of having been surrendered for adoption. If one is abandoned, then it simply must imply that there is something wrong with this adopted infant. Elaine described two examples:

> **Elaine:** *I guess, I was probably...generally speaking... it, I just accepted it…it was part of life, right? I mean...I didn't really think a lot about it, but I do remember going through a spell when I was probably 12…13…where "Hey wait a minute, in order to have been chosen, I was given up". (Christine: Oh!) And I remember my mom not wanting to speak about that part of it. That was quite of a... umm... almost a secret piece for her...*

> **Christine:** *... like a secret-ness in a sense of being hard or just...just more of...*

> **Elaine:** *...it was never a topic to be discussed... (Christine: Okay?) (Recorded interview, November 23, 2014)*

Another example discovered in Elaine's interview:

> **Christine:** *... yeah... well, and...and…I'm curious what if had those feelings had on your life? In terms of being given up?*

> **Elaine:** *(pauses) I don't know 'cause I didn't really want to pursue anything to do with my, you know, searching for biological family and stuff until... I guess I was in my early 40s...maybe... you know...I accepted it, yeah…it was there…I know at some point I might look it up, but in the interim, I was like yes, so what, okay, I'm adopted, big deal! You know, it didn't... I don't recall the concept of adopt-, of being rejected first being that, a dominant sort of theme if you want to call it that... (Christine: hmm)*

> **Christine:** *...and hence the... you know, in the 40s, you were in your 40s rather, you had mentioned... (pauses) thinking about adoption...more particularly at that time or? ...*

> **Elaine:** *Yeah, I had thought about it off and on throughout the years, but not in a way of, shall we say acting on it... you know, to search or anything... and I had always known that I would not search until after my adoptive mom had died. Because I knew that would have hurt her.*

> **Christine:** *In what ways?*

> **Elaine:** *I don't know... I can't put my finger on anything...that would have said specifically it was a bad thing for me…a bad thing for her. Um... but I always knew, that*

I wouldn't do it until after she died. And I... so there must have been something there... (Christine: hmm) that I had picked up on...um... I mean she died when I was 21, so the wait until I was 40...that's a lo:ong time to... (laughs) Um, and within probably a month or so of her passing, my dad handed both my brother and I, our adoption papers. (Christine: oh?!) We always...we had actually seen them, we knew where they were, but I don't think my dad knew we had seen them. (Christine: oh...) but he handed them to us and he goes...he says these are yours. (Christine: huh) Do with them as you wish! (Christine: hmm) (Recorded interview, November 23, 2014)

(6) The last sub-theme to have emerged from the main theme of adoptees' emotions is: *sadness*. Sadness is a common emotion within the community. This is illustrated by Cassie's reflections on her struggles with identity:

One of the main things I have struggled with in my life is being fair skinned and carrying First Nations Status. Yes, I feel like my experiences as an adoptee would be an asset in assisting a child coming into my home through adoption because I feel like I could explain how I felt and tell them it's okay to feel embarrassed, sad, confused, etc. I would also try to keep the birth family connection alive so the child doesn't have all of those questions and fantasies about their birth family. I feel like some adoptive families put their own feelings ahead of the child especially in terms of infertility - I am sure it is such a big wound that some of them don't want to accept that their child has biological family in other places. I couldn't imagine dealing with that though infertility. My parents were never like that though - it just happened that our adoptions were closed so there was no way to keep the connection alive. My mom still read us our adoption stories and told us everything the social workers had told her about our birth families. She also met all of our foster families and told us about them too. I can still remember going to L's foster home to get her. It was filled with kids and I had to ask my mom which baby was my new sister! So even those memories can help me relate to the confusion, excitement, etc. of the adoption experience! (Recorded interview, November 23, 2014)

It is often an adoptee's task to integrate what they can from the biological and adoptive families, in order to make sense of their dual identities. Not having the information about one's biological family makes it even more difficult to not be able to integrate one's sense of self. All they can relate to are the environmental influences from their adoptive families. This statement is not suggesting that adoptive families are not capable in providing a loving home for placed children,

however adoptees do struggle with identity and with no identifying information it is difficult for adoptees to form a coherent sense of self. We can see this identity struggle for Cassie who was adopted into a Caucasian family, but came from a First Nations background (biological family).

Quantitative Phase Results

In this quantitative portion of the study, participants were provided three questionnaires to complete at their own leisure and were then instructed to return them to me upon completion. The results were as follows:

The Parental Bonding Instrument. The Parental Bonding Instrument (Parker, Tupling, & Brown, 1979) is "a retrospective measure in which participants separately rate the extent to which each of their parents exhibited particular attitudes and behaviors during the first 16 years of their lives" (Passmore, Feeney, Peterson, & Shimmaki, 2006, p. 27). The measure comprises of a 12-item care scale (e.g., spoke to me with a warm and friendly voice) and a 13-item over-protection scale that examines controlling behaviors (e.g. tried to control everything I did). A scale from 0 (Very unlike this parent) to 3 (Very like this parent) is used to rate each item (see Appendix D). Participants were asked to complete this scale relative to their upbringings with their adoptive parents.

Table 4-2
Parental Bonding Instrument Results – Mother and Father Forms

	Adoptive Mother *Caring* Scale Score	**PBI – Adoptive Father *Caring* Scale Score**	**PBI – Adoptive Mother *Over-Protective* Scale Score**	**PBI – Adoptive Father *Over-Protective* Scale Score**
Rebecca	3	28	23	5
Cassie	34	30	14	13
Elaine	25	29	8	5

This table indicates the results of how adult adoptees rated their childhood experiences within their adoptive homes. The scores in the chart above are the sums of each scale, and apart

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from these scores, parents can be assigned into one of the four quadrants below (Parker, Tupling, and Brown, 1979):

Table 4-3
Parental Bonding Quadrants

"affectionate constraint" - parents score high on care and high on protection scales	**"affectionless control"** - parents score high on protection and low on care scales
"optimal parenting" - parents score high on care and low on protection scales	**"neglectful parenting"** - parents score low on care and low on protection scales

Source: Adapted from Black Dog Institute (2015)

To be assigned to one of these categories, the following "high" or "low" categories are based on the following cut-off scores, which are different for mothers versus fathers: for mothers, a *care* score of 27.0 and a *protection* score of 13.5. On the other hand, for fathers, a *care* score of 24.0 and a *protection* score of 12.5. All 3 female participants rated their adoptive fathers high on the caring scale and low on the protection scale. This translates into "optimal parenting." Their adoptive mothers, on the other hand, varied in terms of their assigned categories, and resulted in: "affectionless control", "affectionate constraint", and "neglectful parenting".

Rebecca's, Cassie's, and Elaine's, as noted in the chart below, scores for their adoptive mothers did not translate into "optimal parenting". Rebecca had described that she experienced abuse in her adoptive family and that there was no connection between her and her adoptive mother. Though Cassie had a good connection with her adoptive mother, her mother did have a previous experience with adoption, which may have impacted how she attached to Cassie. Elaine's adoptive mother did not discuss emotions with her children, but did show her "strong ways". All these adoptive mothers experienced fertility concerns. As a certified fertility therapist, women experienced a roller-coaster of emotions when trying to conceive and are faced with multiple miscarriages. These emotions, if not worked through, can impact how mothers bond and attach to their adopted children.

Table 4-4

Parental Bonding Quadrants Based on Participants' Results

	Adoptive Mother Category	**Adoptive Father Category**
Rebecca	Affectionless Control	Optimal Parenting
Cassie	Affectionate Constraint	Optimal Parenting
Elaine	Neglectful Parenting	Optimal Parenting

Parenting Sense of Competence Scale. The 17-item scale (Gibaud-Wallston & Wandersman, 1978; Johnston & Mash, 1989) is "designed to measure parents' satisfaction with parenting and their self-efficacy in the parenting role" (Gilmore & Cuskelly, 2008, p. 50). Respondents indicated their response by using a Likert-scale where 1 represents 'strongly agree' and 6 indicates they 'strongly disagree' to an item. The range is 17 to 102; with high scores indicating a positive parental experience. Jones and Prinz (2005) identified this scale as "the most commonly used tool for measuring parental self-efficacy" (as cited in Gilmore & Cuskelly, 2008, p. 48) (see Appendix E).

Table 4-5

Parenting Sense of Competence Scale Results

	Participant Scores
Rebecca	34
Cassie	48
Elaine	41

Utilizing the chart above, high scores indicate positive parental experiences, and the three participants obtained lower scores indicate and, therefore, experienced less positive parental care.

Experiences in Close Relationships – Revised. The 36-item self-report attachment measure (Fraley, Waller, & Brennan, 2000), derived from an item-response theory of adult romantic

attachment (Brennan, Clark, & Shaver, 1998), provide scores on two subscales: Avoidance (or Discomfort with Closeness and Discomfort with Depending on Others) and Anxiety (or Fear of Rejection and Abandonment). Respondents indicated their response by using a Likert-scale where 1 represents 'strongly disagree' and 7 represents 'strongly agree' for each item. Fraley, Hefferman, Vicary, and Brumbaugh (2011) stated that the anxiety dimension denoted the extent to which people tend to worry about attachment-related issues, for example, the availability and responsiveness of an attachment figure. The avoidance dimension, on the other hand, refers to the extent with which individuals are uncomfortable disclosing their emotions with others and depending on other people. They further offered that "prototypically secure people tend to score low on both dimensions" (p. 617). The alpha reliabilities for this scale are .88 and .92 for anxiety and avoidance scores, respectively. (See Appendix F).

Table 4-6
Experiences in Close Relationships – Revised Results

	Attachment-Related Anxiety Score	**Attachment-Related Avoidance Score**
Rebecca	4.61	4.94
Cassie	4.22	4.22
Elaine	2.78	2.89

As noted earlier on, the particular use of this attachment inventory versus using other well-known ones, Fraley, Waller, and Brennan (2000) noted that adult attachment measures have suffered many psychometric limitations, for example, classifying people into discrete categories (Bartholomew & Horowitz, 1991; Hazan & Shaver, 1987). The authors stated that more recently, researchers are now focusing on dimensional models of attachment (e.g. Brennan, Clark, & Shaver, 1998), thereby creating multi-item inventories to examine individual differences on attachment dimensions.

For the three participants, I will be reporting the results, in dimensional terms versus categorical, in order to describe the resulting numbers listed above in the chart. However, with no emphasis placed on the categories assigned to these respondents, the attachment style was

noted from combining the avoidance and anxiety scale scores. Both Rebecca's and Cassie's scores fell in the *high* avoidance and *high* anxiety dimensions (when combined, previously known as *fearful-avoidant* attachment style). Previous research on attachment styles indicates that fearful people tend to have great difficulty in their relationships. They tend to avoid becoming emotionally attached to others, and, even in cases in which they do enter a committed relationship, the relationship may be characterized by mistrust or a lack of confidence (Fraley, n.d.). Elaine's scores fell within *low* avoidance and *low* anxiety dimensions; and when combined, previously, her score would be evaluated as *secure* attachment style. Previous research on attachment styles indicates that secure people tend to have relatively enduring and satisfying relationships. They are comfortable expressing their emotions, and tend not to suffer from depression and other psychological disorders (Fraley, n.d.).

As noted previously, the *Experiences in Close Relationships – Revised* scale was chosen with the attachment theory in mind because early childhood experiences with one's parents tends to set the course for relationships later on in life, such as, in intimate relationships and/or attachment to one's own children. Horowitz (2011) suggested that "attachment may be a strong predictor of desire to become a parent" (p.20). Horowitz offered that adults with insecure attachments and who have difficulty forming intimate relationships can, in turn, affect their attitudes and future decisions to become parents. Lastly, Horowitz stated that "adults who were found to be avoidant and more ambivalent individuals not only held models of parenthood which would not influence positive parental relationships, but they also anticipated being easily aggravated by children and therefore less likely to desire them" (p.20).

Integration of Qualitative and Quantitative Data Results

I created themes that developed from the data obtained. Researchers explained that integrative interpretations are "often referred to 'telling the story,', interpretation brings meaning and coherence to the themes, patterns, and categories, developing linkages and a story line that makes sense and is engaging to read" (Marshall & Rossman, 2011, p.219).

First Research Question

At this point, each strand of findings, qualitative and quantitative have been reported individually, and now I am to "select the most useful data segments to support the emerging story to illuminate the questions being explored and to decide how they are central to the story that is unfolding about the social phenomenon" (Marshall & Rossman, 2011, p. 219). The first question for this study was: *How do adult adoptees' experiences of adoption influence their perspectives of parenthood?* Researchers have proposed that adoptees tend to suffer from a confused sense of self (Brinich, 1980; Haimes, 1987; Hoopes, 1990), and adoptees may have to confront this developmental issue upon entering adulthood (Brodzinsky, Schechter, & Henig, 1992). Levy-Shiff (2001) suggested that "adulthood is a time for resolving basic identity conflicts permitting the formation of a stable, coherent, and positive self" (p. 97). In the qualitative portion of this study, emerging themes of *identity as a parent* and *attachment relative to adult adoptees in relationships* were revealed. Rebecca's reflections below address these two prevalent themes in how she viewed parenthood pre- and post-reunion with her biological family:

> **Christine:** *...And so, I was wondering how do you think your adoption experience has impacted your views on parenthood? (pauses) I think you probably touched a little bit on that, <u>but</u>...*
>
> **Rebecca:** *And see, and that's why I was wondering whether I would be... I mean because there was me as a parent before reunion. Me as a parent after reunion. There, well- I was going down the same path, but it became so different. It became more as opposed to... I guess I trusted myself more. When I first had them, I... I was first nervous and I could see myself doing, and I probably still do some things my adoptive mom would do. But...*
>
> **Christine:** *Like what kinds of things...*
>
> **Rebecca:** *(sighs) (pauses) kind of, you know, if they hurt themselves, well you shouldn't have done this... or something as opposed to (chuckles)... just I'm so sorry (chuckles)...*
>
> **Christine:** *There are a lot of similarities there...*
>
> **Rebecca:** *I think adoption reunion, really...I mean, as a parent coming from that family... (pauses) got... no I think, well at least, I was strong enough to trust myself even though, in that, even though I didn't know anything else...But...I'd say being adopted has made it harder for me to be... the best parent I could be. Because I had two, well of course, other people who were abused too they will go the other way. So maybe it was part of that? Maybe that's why I was doing okay before, as well?!*

Christine: *Like you said, it seemed, like there was… (pauses) …I don't know if that would be accurate to different ways of relating to being a parent? And…(Rebecca: Yes!) can you tell me a little about that?*

Rebecca: *(sighs) (pauses) yeah, one was very... old school... kids should be seen and not heard... they should do what they are told and ah, there was no room for reacting to how the child was. (Christine: hmm) you know what I mean? Just all these rules to follow. Whereas, I was battling that before, I was reunited and trying to do what felt right for my kids.*

Christine: *And doing right, meaning by? <u>Just</u>...*

Rebecca: *Giving them… (pauses) giving them what they needed. The love, the cuddles, the acceptance. I wouldn't say I did a great job with my son because he was so:oo different and it was so:oo hard to...deal with him...but I... researched, trying to figure it out, what... And I (pauses) I mean did ok, well I look at him now and yeah I did ok! (chuckles) (shared laughter) I did very well actually, but... But, I know at the time, I felt that I wasn't fair to him… (Christine: hmmm) a lot... but then I didn't have anybody like him in my family before... (chuckles) I didn't... I hadn't encountered somebody like him... (Recorded interview, November 16, 2014)*

Another example that supports these themes above is Elaine stating how adoption has impacted her views of parenthood:

…I mean, I…I guess from that point of view, yeah, I say adoption has very much...reinforced to me that you <u>have</u>, that children need to know that they are loved... (Christine: right...) ...knows that they're accepted no matter what...that they're-, it doesn't matter, you are not going to give up on them... *(Recorded interview, November 23, 2014)*

As Carlini (1993) suggested that throughout the healing process, adoptees will have to choose whether to repress the hurt or numb out their experiences of adoption. Parenthood is yet another milestone that adoptees enter and navigate a world of unknowns. The questions of Who am I? and Where do I come from? are still ones that adoptees contemplate in trying to answer, even upon entering parenthood. Parenthood or thoughts of parenthood creates new fears for adoptees. Sorosky, Baran, and Pannor (1978) stated that "they describe fears of unknown hereditary illnesses and of the complications of delivery and birth. For the most part, however, the birth of the baby is awaited as the first opportunity to encounter and relate to a "blood relative" (p. 124). The very idea of parenthood or entering the pregnancy stages can re-ignite thoughts of their own adoptions and activate adoption-related issues (e.g. abandonment, identity,

etc.) (Pinkerton, 2010). The quantitative questionnaire used to address the first research question was: *The Parental Bonding Instrument*.

On *The Parental Bonding Instrument* (Parker, Tupling, & Brown, 1979), all three female participants rated their adoptive fathers as being high on the caring scale and low on the protection scale, denoting an "optimal parenting" style. The three adoptees had varying responses relative to their adoptive mothers, but none obtained the "optimal parenting" style. Juffer and Rosenboom (1997) offered that adoptees, when compared to non-adopted persons, are generally as attached and experience average levels of attachment to their adoptive parents. In referring back to Table 4-4 (Parental Bonding Quadrants Based on Participants' Results), though we all have different attachment and/or parenting styles, it is important to note that adoptees, who grew up in the closed adoption system, generally had two or more attachment figures (i.e. biological mother, foster parents) before being placed with an adoptive family. Verrier (1993) assumed inherent to her theory that of the primary relationship is the one between mother and child and her positioning is based upon her "understanding of the current research into prenatal physiological, hormonal, and psychological connections to the fetus in utero and of the subsequent part the mother plays as a representative of the newborn's Self" (p. 216). For Rebecca, Cassie, and Elaine, if there is a sharing of utero connection between biological mother and child, based on a known loss, this experience then becomes imprinted onto the child/adoptee. The imprint that these adoptees experienced was of an early significant relationship based on loss, abandonment, and of mistrust.

In addition, Verrier (1993) was intrigued by the key to self-concept lied in the initial relationship of an infant to his/her mother. She further mentioned that "the early bonding experience, a continuum between the prenatal and postnatal experience of the mother/child unity, suffusing the child with concomitant feelings of security, trust, and unconditional love, may go a long way toward sending a child on the path of self-esteem and self-worth" (p. 216). Connecting Verrier's work to the participants' results, these assist to explain Rebecca's, Cassie's, and Elaine's experiences with their significant others. It should be noted that biological parents and adoptees are not the only ones that experience loss, but adoptive parents experience loss similarly, in not being able to have their own biological children. Prior to the rise of attachment theory, it is a well-known fact that, historically, adoptive parents were told by their workers to go home, after obtaining their newborn, and pretended that their child was biologically theirs versus

adopted. Every effort was placed on matching physical attributes of the child to that of the adoptive parents, to avoid any external questions being asked of why the adoptive parents could not have their own biological children. Adoptive parents' dreams are built on hope and unfortunately they are not truly prepared, by adoption officials, for the concerns that could arise with their adopted children.

This historical context provides a deeper understanding of Rebecca's, Cassie's, and Elaine's experiences and results. In the qualitative section, Rebecca disclosed that experienced neglect/abuse by her adoptive mother, for example, when Rebecca cried, at night, her mother would not comfort and soothe her. It was only her adoptive father who was able to comfort and soothe her. Rebecca described her father as being more accepting than her adoptive mother. This provides, quantitatively, Rebecca's bonding experiences of her adoptive mother as being high on protection scale (i.e. "we always had to be perfect") and low on the care scale (i.e. not responding to Rebecca's cries at night).

Cassie, on the other hand, described how her adoptive mother relinquished a biological child prior to her adopting Cassie. Quantitatively, Cassie rated her adoptive mother as being high on the care scale because her mother attuned to Cassie's feelings given similar shared experiences of loss. She also rated her mother high on the protection scale because it may be due to some unfinished grief from relinquishing her own child triggered by adopting Cassie; the fear of losing Cassie if she is not a "perfect mother".

Elaine described her adoptive mother as being low on the care scale. For example, her mother did not discuss emotions and she taught Elaine her "strong ways". Also, Elaine described her mother as being low on the protection scale. She described how her adoptive father gave her adoption papers after her adoptive mother died because her adoptive mother did not want to provide the adoption papers to Elaine. All adoptive fathers were rated high on the care and protection scales ("optimal parenting"). These results may arise from the fact that adoptees' initially experiences rest with their biological mothers and those particular bonding experiences are then placed onto their adoptive mothers versus their adoptive fathers. These earlier experiences then fold an internal working model on how adoptees experience their own bonding experiences with their own children. For example, if an adoptive mother/father was demanding and/or emotionally cold, then an adult adoptee may perceive her/himself, as being or becoming a parent, as turning out to have the same attributes, of that, as their adoptive parents. Of interest,

Rholes, Simpson, Blakely, Lanigan, and Allen (1997) suggested that adults with insecure attachments may not only be uncertain of their parenting skills, they could experience anxiety around their parenting abilities which can influence their decisions to parent. I discuss attachment styles later on, in the third research question section.

In addition, though most adoptive mothers and their infants develop warm and secure attachment relationships (Grabe, 1990), Brodzinsky (1985) argued that secure attachments in adoptive families may be undermined by the problems that can arise in adoptive parenthood. For example, couples who have gone through fertility treatments may not have, at best, resolved their feelings and the unresolved grief of not having their own biological children impedes bonding and attachment with the adopted infant. There may be resentment towards the spouse as a result, all of which does not create a safe environment based on trust and security. Adoption may be a risk factor for relationship difficulties in adult life (Feeney, Passmore, & Peterson, 2004), therefore, this is one of the reasons the *The Parental Bonding Instrument* was chosen, with the attachment theory in mind, because early childhood experiences with one's parents set the course for relationships later on in life. Horowitz (2011) suggested that "attachment may be a strong predictor of desire to become a parent" (p.20). Lastly, Small (1987) suggested that the birth of a child is a time when "adult children of adoption often begin to become aware of what happened to them as children and what it meant" (p. 40). Pinkerton (2010) further offered that for many adoptees thinking about entering or who have entered parenthood, these experiences are closely linked to their adoptive status, rather than as events that are separate from adoption. To clarify, adult adoptees do not necessarily experience parenthood in the same way as non-adopted persons.

Second Research Question

With the qualitative portion of the study, emerging themes of *attachment (sub-theme: effects of adoptive family and adult adoptee childrearing)* and *loss (sub-theme: adoption reunion or adoptive family effects on next generation (offspring of adult adoptee), and transitioning into parenthood)* arose for me to address the second research question of*: how do these adoption experiences impact their self-concepts and identities, as parents?* As Elaine described that she knows her children were wanted and would not have the same feelings, like she, in being abandoned to be chosen by adoptive parents:

Elaine: *(pauses) ...I don't know that the fact that I was adopted or not adopted has any effect on how I parent <u>my</u>...maybe it has some indirect affect because my...how my parents parented affect how I parent. Or don't parent, as the case may be. But I am not sure that that's necessarily because of adoption, as much as it is because of individual differences...umm...my identity as adoptee, I...yeah I strongly identify with being an adoptee, but I don't know that it's made a difference in my parenting.*

Christine: *Can you give me an example, just so I...understand that a little bit more clearly?*

Elaine: *No, I'm struck on that one myself... (chuckles) I mean, if I had adopted kids, maybe that would have had a bigger affect again...*

Christine: *Like in what sense...that...that...it reinforces your...like...an adoptee because you can relate or just... (Elaine: yeah...yeah...)*

Elaine: *Because I think I could relate then to...some of the struggles I had...had...because my kids never go through some of the...the stuff I did, like the feeling of rejection...you know, I had to be rejected to be chosen. My kids were always...mine! (Christine: right...wow...) so from that perspective, I think that would be the only thing, but I mean I don't know that it changed how I parented...I've pondered that one and wondered...what it would have...how that would translate (Christine: hmmm) and my frien-, and because I was adopted, but I can't run two scenarios side-by-side and say...if I was raised biologically or the other way, would I be different I don't know...*

Christine: *Sometimes we might think of, how we, how our adoption experience impacted in a way of...like you said earlier a little bit about...umm...they teach me things...about myself that is. And so maybe that, you can touch on a little bit of that, should that relate to this question?*

Elaine: *...I guess some of the teaching you get from your own kids is...is...simple teaching, like classroom kind of style teaching, but clearly some of it is you learn about who you are, and what makes you tick...and what turns their cranks, sometimes turns your crank...umm...I mean I was raised by parents who weren't biologically mine so sometimes we didn't relate. Whereas my kids have my sense of humour...umm...my kids have...um...some of my oddity expressions... (Christine: hmmm) the way I do things...umm...whether I be concrete or whatever...you know I see that from their dad as well right? (Christine: right...) ...it makes sense of...of his <u>characteristics</u> =*

Christine: *= that mirroring, I think we often talk about...*

Elaine: *Yes! Yes! (Christine: yeah) ...whereas growing up I didn't experience that with my own parents. I mean, yeah, there were similarities there, but, umm...you didn't the sense of the same quirks my dad did for instance... (Christine: right...) or the same quirks as my- (Christine: right...) ...whereas with my child-, I clearly get being-, the umm...the difference in the style of parenting, style of-, we have the same sense of humour, we have the same mannerisms on some stuff... (Christine: hmmm) ...you know you look at the, some of the characteristics, and one of the lines that has come up quite often recently with the kids is that, boy the apple doesn't fall far from the tree does it! (laughs) (shared laughter) ...so there is a different delight...I think as a parent in seeing your kids have*

some of your characteristics...umm...you know when you see more of those similarities, than I would have seen growing up. (Recorded interview, November 23, 2014)

Unlike most birth certificates, Rebecca's biological father's name was on her birth certificate, however the paternity was in question and her biological mother did not think the name on the birth certificate was Rebecca's biological father. Upon a few phone calls with her potential biological father, both agreed to undergo some genetic testing. To both of their surprises, genetic tests revealed that they were both related without a reasonable doubt. As much as the news was shocking, Rebecca's adoption experiences of discovering her own biological identity impacted her more than she thought it would. She never could imagine the effects of adoption would have on the rest of her family, as in the example, below, of how her son felt a sense of loss relative to his identity, as Rebecca did growing up:

Rebecca: *And now I do see the similarities. The eyes are definitely my dad's (Christine: okay!) but everything else... and then my son...he was away at the time I got the results and he actually called, for some strange reason, that night, and I said, you know the guy... that I have been emailing with and, ah, I actually hadn't told him (chuckles) I had told my daughter, but I hadn't told him apparently. And I said well, "he* really *is my dad". "Oh, you are going to cry again?" (chuckles) (shared laughter) I didn't, it was just wasn't his intent.*

Christine: *A relief maybe? (shared laughter)*

Rebecca: *But he, when he got home, he came racing out of the airport and left the person he was with, behind. I said, "do you to see the pictures". He says, "why do you think I came out". So I gave him the pictures and then drove this person with us, where she was going, like 45 min drive away and when she got out she asked if he could, if she could see the pictures. So she looked at them and then she left, I turned around and my son, my 16 year old son was crying and he cried for four hours straight (Christine: Oh...wow!) He says now I know where I came/come from! (Christine: oh...wow!) My brother, the one that is 9 years younger than me looks exactly like my son. When I saw the picture of the family, the guy didn't send me the pictures of the family until the results were in. And, ah, then he sent it and I said if you hadn't sent me that first, we wouldn't have had to do the test. Because my son and my brother look very similar.*

Christine: *Just like twins almost! Wow! Huh! (Rebecca: chuckles) Wow! It's interesting how you can look at different pictures and, you know, there might be some similarities and not, and it just depends on the... (Rebecca: Yeah!) what kind of lifespan...*

Rebecca: *People look at them now, like, and* they, *now when my...I show people pictures saying this is my dad. They say "well of course"! And when I was visiting him, I had people come up to me and you sure look like your mom and dad (chuckles) (Christine: huh!) and my mom, but...*

Christine: *Well, out of curiosity, let's say he did provide you with that picture of...the youngest to compare it with your son, I was wondering would you have still had done the DNA test?*

Rebecca: *Oh yeah! (Christine: Yeah, eh?) Just to be sure! Because he didn't see the similari-...I mean he could see his son, his saw <u>my</u>- the pictures of my son, but he didn't see the similarities. (Christine: Right! ... yeah!, hmm) Ah, because <u>he</u>, I really think that's partly when you are raised with people you look like. You don't notice the similarities. But when you are not, you (chuckles) you picked them up really quick- (shared laughter)*

Christine: *It's like a little puzzle...this goes here and that goes there, which would kind of describe it?*

Rebecca: *Yeah, my son was the one who was the <u>most</u> effected by meeting my dad. (Christine: oh?) We have pictures first time he came to visit...the two of them walking... we all left the house together. They were miles... well not miles, but really far ahead of us, cause they're both walking so fast, wearing the same colors, moving the same way. I wished I had got a video of it. I do have a picture (Christine: Wow!) but I wished I had actually video of the two of them walking down the thing.*

Christine: *Same gate...kind of...*

Rebecca: *They were just moving the same way... and when we visit that's where he is most comfortable. (Christine: Wow! hmm) And then, my brother's, my son's 6"4 and my brothers are: one's 6"3 and the other's 6"4 in that family. (shared laughter) So my friend goes there, look a-... nope don't get upset when I (Christine: Nope, we are all tall!) Spaghetti this time...*

Christine: *Oh wow! Oh, what a validating experience or just... an amazing experience for him!*

Rebecca: *With my mom and we could see that, but as I said as my son grew older he changed (pauses) and he definitely...definitely did as I figured he must, takes after my father's side. (Recorded interview, November 16, 2014)*

In the quantitative portion of the study, I used the *Parenting Sense of Competence Scale* to "measure parents' satisfaction with parenting and their self-efficacy in their parenting role" (Gilmore & Cuskelly, 2008, p. 50). The three adult adoptees obtained lower scores in their parental experiences. Though I was not able to locate a manual or journal article, the range of scores was determined to be between 17 and 102 for this scale. Cassie's score (48) was the highest, while Rebecca's score (34) was the lowest. Elaine's score was 41. As noted above, and in the qualitative section, Rebecca described her struggles in what or how a parent should be or behave towards her children, given her childhood experiences with her adoptive mother was

neglectful. She mentioned that if she had not reunited with her biological mother, then she may have continued raising her children with what she knew how a mother should be because of how she was raised by her own adoptive mother. Rebecca identified with her biological mother's mannerisms as being warm and loving, quite how she wanted to be as a mother or perceived how a mother should be towards her own children. For example, Rebecca described her struggles in being close to her daughter, but then explained how she had an epiphany and she knew how she wanted to relate to her own biological daughter (based on the new reunion experience Rebecca had with her biological mother). Though still on the lower end of the scale, Cassie's journey as being a parent has just commenced and she, unlike Rebecca, has not had the same reunion experience. Cassie's reunion was more rejecting and hurtful in her experience – this occurrence is sometimes common in some reunions because of the associated pain and grief. However, Cassie disclosed that her mother already had a previous experience with adoption and that her adoptive mother was caring and understanding when Cassie found out that she was expecting. Elaine, on the other hand, has not reunited with her biological family, and located some family members through the uses of social media. Like the other participants, I noticed that Elaine was quite informed and has read a lot about adoption issues. Although her adoptive mother "taught her strong ways", Elaine became informed on how adoption impacted her and I noticed that she made a choice to ensure that her children knew that they were wanted and loved - as she shared in the qualitative portion of the study.

As seen with the themes that emerged from the qualitative section, identity issues are present for many adult adoptees (Levy-Shiff, 2001). Levy-Shiff conducted a longitudinal study, comparing adult adoptees and non-adult adoptees and determined that adoptees achieved lower scores on the *Tennessee Self-Concept Scale* (Fitts, 1967). Also, Levy- Shiff concluded that adoptees possess "on average, to have a less coherent and positive self-concept" (p. 102). Many researchers have suggested that many adopted children and adults struggle with issues around identity, self-concept, and feelings of low self-worth (Borders et al. 2000; Brodzinsky et al., 1993; Howe, Shemmings, & Feast, 2001; Levy-Shiff, 2001; Sachdev, 1992; Verrier, 1987). A lot of these concerns stem from the very fact that adoptees have been separated from their biological families and, at the same time, having to assimilate themselves within another family system without any knowledge of their biological origins. This often creates a false sense of self and potentially impacts their abilities to view themselves as great parents. For example, Mayes

(2002) offered that all new parents are preoccupied in searching for physical appearance similarities between themselves and their newborns. However, the experience can be quite pressing and/or overwhelming for adoptees, as they have the desire for their child to resemble them. Lastly, Brodzinsky, Schechter, and Marantz Henig (1993) stated:

> The birth of a child often brings the adoptee into contact with the first person to whom he is biologically connected. This can have a profound effect. Adoptees know intellectually that they are not biologically related to their adoptive families, but many never allow themselves really to examine what this means to them. The birth of a child may force an adoptee to confront for the first time the lack of a genetic bond to the people who loved and raised him. (p. 135)

Third Research Question

With the qualitative portion of the study, emerging themes of *emotions of adoptees' (sub-themes: anger), attachment (sub-theme: adoptees' experiences within adoptive family),* and *identity (sub-theme: true self)* arose to answer the third research question of*: how do adoptees' childhood experiences influence their perspectives on being a parent?* As Pinkerton (2010) mentioned that "despite the paucity of research on adoption and attachment and the mixed findings obtained from the few studies undertaken" (p. 22), many researchers, on adoption, have agreed that loss and abandonment are significant issues for adoptees (Brodzinsky, Schechter, & Marantz Henig, 1993; Verrier, 1993). These core issues ebb and flow throughout an adoptee's life, stemming from the initial loss at a tender age. These issues affect adoptees in the way of developing and maintaining stable, secure, and trust-worthy relationships with others, and being able to model this to their own children down the road. Below, Rebecca described the internal struggle, for example, with affection that some adoptees experience with their own children; adoptees who may have not attached or bonded with their own adoptive parents, primarily their adoptive mothers:

Christine: *I was also curious, how do you think your childhood experiences, within your adoptive family, have shaped your perspective in wanting to become a parent? So if you kind of...I know they're in their 20s, but if you are able to reflect back on that...*

Rebecca: *I wanted them to have more than what I had. And, I think that all comes from right down to their mother's love!*

Christine: *Tell me more about that....*

Rebecca: *Just to know that... I always there for them... and would support them all the way! Everything!*

Christine: *As you did! (Rebecca: Yeah!) Yeah!*

Rebecca: *Yeah…and that's what I didn't get. (Christine: yeah (stated softly)) Even if my adoptive mom had of been good, she couldn't have done that, but I think...uh, with the way it was... I looked at her and thought ok my "real" mom, which I did used to think, my "real" mom wouldn't do that. She would do this! And so, when I became a parent, let's do this and that.*

Christine: *It's almost like you knew what to... (Rebecca: Yeah) what to do, or sought out the information to...*

Rebecca: *Let's do not what I had... Let's do the opposite of what... (Christine: yeah!) I grew up with. But, that could have happen in any family. (Christine: exactly!) It's a... (Christine: Exactly!) Whether that's from being adopted, but I think the adoptive...just being adopted, just shaped everything. (Christine: hmm) in that <u>moment</u>...*

Christine: *Like there is almost, like a-…like how you are describing, like an additional layer?*

Rebecca: *Yes! Yeah, it was, uh, everything in my life, comes from being adopted. (pauses) So when we ask, how does adoption shaped me as a parent? Who knows! (laughter) That's who I was... (Christine: yeah) But, it's just that contrast, when I met my mom, I thought, <u>ha</u>, that's what a mom does! (Christine: hmmm)*

Christine: *That's what I wanted as a... (Rebecca: Yeah!) ...a model...?*

Rebecca: *That's what I wanted... my mom... that's what I want to be, as a mom. (Christine: Right…wow!) The person who is there and supports you, no matter, how difficult the things you are going through. (Christine: hmm) And how bad your behavior is, which mine wasn't... my dad thinks of me as the ideal child, never got, like, never had to worry about me because I was the "good" child. (laughs) My brother was the "bad" one. (shared laughter) If Dad read <u>Primal Wound</u>, he says, "ah, yeah..." (shared laughter) (Recorded interview, November 16, 2014)*

In the quantitative portion, *The Parental Bonding Instrument (PBI)* and the *Experiences in Close Relationships – Revised (ECR-R)* were used to address the third research question. As previously mentioned, the first measure contains a care and an over-protection scale that examined controlling behaviors. I discovered that the female participants rated their adoptive

fathers as having an "optimal parenting" style. The three adoptees had varying responses relative to their adoptive mothers, but none obtained the "optimal parenting" style. Adoptive parents' parenting style, within this section, is consistent by the themes that revealed themselves from the qualitative section. That is, through themes of *emotions of adoptees' (sub-themes: anger), attachment (sub-theme: adoptees' experiences within adoptive family),* and *identity (sub-theme: true self, etc.)* depicted how an adoptive environment can impact an adopted person. As Brodzinsky, Schechter, & Marantz Henig (1993) stated, "since babies have usually already formed an attachment with their biological or foster parents, they come to the adoptive parents following a disruption of a previous relationship, which leads to a sense of loss and emotional or behavioral disorganization" (p. 36). The researchers further offered that since infants have already formed an attachment to these attachment figures noted above, children are coming into the adoptive homes already grieving a loss for that primary bond, "and because they are preverbal, their grieving can look like other problems, usually physical, that cause the adoptive parents great anxiety" (p. 36). With these findings in mind, I ponder about the role of attachment styles relative to adopted persons and their attachment to others.

The *Experiences in Close Relationships – Revised* (Fraley, Waller, & Brennan, 2000) provided me with an attachment measure to derive scores on two subscales: avoidance and anxiety. As Fraley, Roisman, Booth-Laforce, Tresch Owen, and Holland (2013) stated that on the first dimension, the:

> *Attachment-related avoidance,* represents the extent to which individuals organize their attachment-related thoughts, feelings, and behaviors around defensive goals. Individuals who are high on this dimension are, for example, uncomfortable depending on others or having others depend on them. Individuals who are low on this dimension are comfortable using others as a safe haven and secure base and serving those functions for others. The second dimension, *attachment-related anxiety,* represents the extent to which individuals are concerned about the availability and responsiveness of close others. (p. 820)

Both Rebecca's and Cassie's scores fell in the *high* avoidance and *high* anxiety dimensions (when combined, previously known as *fearful-avoidant* attachment style). Parenthood, for adult adoptees often involves a re-evaluation of parental relationships, particularly with their adoptive mothers (Pinkerton, 2010). I am not solely suggesting that

adoptees only re-evaluate adoptive ties, but they also re-evaluate biological ties as well (Brodzinsky, Schechter, & Marantz Henig, 1993). Moreover, Pinkerton further stated that adoptees, especially female ones, are no longer defined as a child, in a mother-infant bond, but rather are newly defined by becoming a mother themselves. Along with both male/female adoptees, their partners, as well might want to know more about the unknowns of the adopted person's biological ties. On the contrary, Elaine's scores fell within *low* avoidance and *low* anxiety dimensions (when combined, previously known as *secure* attachment style). Though Elaine's score are both low on the avoidance and anxiety dimensions, the participant did note the following:

> *Ya! I mean…I mean, I'm not sure if we were sort of a...emotional, touchy, feely...talk a lot about that aspect of it... um...but like I'm fiercely independent and... my mom and I talked about that, for instance, and...the thought there was that, quite likely, because I was in hospital for 2.5 months that I learned to be...more independent than...than, I might have otherwise have been…you know, self-comforting, those kinds of things. (Recorded interview, November 23, 2014)*

It is quite common for adult adoptees, in my clinical practice, to state that they are strongly independent, but commonly struggle, at the same time, with identity and/or relationship issues. The internalize struggle, for them, is balancing the over-independence and interdependence within relationships with others. In other words, to find a balance between possible fear of connection, in anticipating rejection or abandonment from others, versus to be able to be vulnerable and rely on others for comfort and need. I acknowledge the small sample size and its inability to generalize to a larger population of adoptees, my findings can provide a set point for future research to explore the variation among adoptees and the influences the status of reunion have on an adopted person's caregiving and attachment processes.

Chapter 5: Discussion

Adoptees often struggle as adults to craft an integrated identity. "With so many questions related to 'Who am I?' making meaning of one's existence can feel like trying to put together a puzzle without all the pieces" (Fall, Roaten, & Eberts, 2012, p. 445). Questions regarding heritage and biological ties typically occur after developmental milestones, for example, births, marriages, and deaths, for adult adoptees. Horowitz (2011) described that in order to understand the uniqueness of adoptees' experiences and the specific needs they may have during childhood, it is vital to study the entire adoptee trajectory into adulthood. It is important to focus on these needs so adoptive parents and society can prepare successfully and launch adoptees into adulthood. I applied an attachment theory framework, while I employed a mixed methods approach drawing upon the strengths of both qualitative and quantitative methods by using an exploratory-sequential design. The following research questions were: (i) how do adult adoptees' experiences of adoption influence their perspectives of parenthood? (ii) how do those adoption experiences impact their self-concepts and identities, as parents? and (iii) how do adoptees' childhood experiences influence their perspectives on being a parent? By "understanding the elements of the self, in context as it is related to adoptive identity development, provides one method for understanding the complex challenges facing adoptees in adulthood" (Fall, Roaten, & Eberts, 2012, p. 443).

My Research Journey

Apart from being a seasoned clinician in the area of attachment, adoption and foster care, I never dreamed of being able to do research in this area of specialization, until I enrolled in the School and Counselling Psychology program at the University of Saskatchewan. Being aware of attachment styles and intergenerational trauma, I have always been curious about how adult adoptees work through their adoption concerns and how they relate to their children. I always reflected after sessions with adoptees and wondered about their own internal struggles in being an adult relative to their identity and/or their concerns with parenting.

After having completed this study and I am reflecting on the three questions set out, I am more amazed with how resilient these women are, given the circumstances they have come from. For example, all three adoptees made every attempt to let their children know that they were

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wanted and loved. Despite that every adoptee has a different story, as seen even with these three women, I noticed the same pattern ran through their stories from a place of feeling abandoned to ensuring that their children do not grow up with the same emotions that they experienced.

Another aspect that I found intriguing, despite having the clinical experience in the area, is how far reaching identity or the loss of can impact the next generation. In other words, as Rebecca shared in her story that her son never knew who he looked like, until he met his biological grandfather. When Rebecca described this aspect of her story, I was very moved with how identity has a far-reaching impact, not just on the adoptee alone, but with their biological children. I have seen this pattern in clinical practice, with adult adoptees who are presenting with parenting concerns. Sometimes adoptees had to share their adoption stories with their children because at school their children had to do the family tree assignment. This situation was seen in Elaine's interview, and Elaine mentioned that her daughter seemed even more interested in Elaine's biological background than she did.

In a period of time when children were adopted domestically, they were matched relative to physical attributes, in order to avoid any unnecessary questions from the public. Though these women never identified as being from the Baby Scoop era, I never completely understood the intentions in placing a First Nations child within a Caucasian adoptive family. Even though I understand the histories of residential school survivors, I am puzzled by this practice. Having provided counselling to a few First Nations adoptees, they posed the same questions in trying to work through some adoption and identity issues.

Moving Forward

In reflecting on the next steps, I am aware that this research is greatly needed in being able to provide a voice for adult adoptees. As a clinician and an adoptee, my hope is that this study can provide a starting point for future research, in order to create the awareness that adoption is complex and more services are required to assist this population. Respectfully, rather than research being based on parents' self-reports of their adopted children, I hope that this research can demonstrate the resiliency that adoptees possess, along with decreasing the noted over-representation of adoptees accessing mental health services noted in the literature review.

I believe there are some implications from the perspective on the importance of identity and how far reaching its impact can be, not just on the adoptee, but also on their children. For

example, as a practitioner that supports families who adopt internationally, there still exists a closed adoption practice, in developing countries. Often adoptive parents struggle in being able to assist their children to attach to them or with identity issues. These struggles can then continue when these children who their own children. Some children that are adopted internationally may have come from orphanages where the basic needs are just being met. Sadly, for some of these countries, children are seen as economic resources. I hope that best practices and policies can be set forth, so that the best interests of children, adopted internationally, are the country's officials' first perspectives versus economical perspectives. Lastly, as a practitioner who specializes in fertility concerns, I am aware of the many ways families are formed today. For example, some families are formed via the assistance of a surrogate mother or of a sperm or egg donor. It is vital that parents-to-be are aware of the ethical considerations when forming a family via these means. In other words, that they have considered implications to their future children and questions surrounding their identities and how future parents might best answer those questions regarding their children's origins.

Study Limitations and Recommendations for Future Research

As a researcher, I address a few limitations to this research study. First, constructs of adoptee identity have not been clearly defined and operationalized. I argue that this is due to a lack of standardized measures for researchers to employ among adult adoptees. Baden and Wiley (2007) stated that "the adoption literature has not reached a consensus on adoption's impact on identity. Although most of the adoption literature assumes identity to be more complex for adoptees, the empirical literature has been slow to systematically address these assumptions" (p. 872). Despite the lack of clarity surrounding the construct of adoptee identity, I obtained some findings that can act as a starting point for future research to replicate this study with a larger sample size, in order to contribute to the information gaps in the literature.

Second, "methodological limitations in several studies include the overuse of retrospective reporting, biased sampling procedures (convenience samples, no random sampling), lack of appropriate and matched control groups and limited geographical regions" (Baden & Wiley, 2007, p. 892). Given the limited research in the area of adult adoptees, I employed a convenience sampling design to contribute some findings that future research could build on. In my estimate, there might be concerns examining only adult adoptees and not

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comparing them to non-adoptees, as with how most adoption researchers have approached their methodologies in the past. Interestingly, Passmore (2007) reported that when examining the data of the two comparison groups, adoptees versus non-adoptees, "it became clear that we were losing a lot of information by simply comparing the groups" (p. 1). Further, she noted that it was "clear that adoptees were not a homogenous group. For example, some have had very favourable adoption, search, and reunion experiences; some have had very unfavourable adoption, search, and reunion experiences; and there is every shade in between" (p. 2). For this reason, I examined differences relative to emerging themes between those who are searching and those who have reunited with their birth families, relative to their self-concepts of parenthood.

With the small sample size obtained ($n = 3$) and only female participants (versus having a mixture of female and male participants), I do not assume that these results are generalizable to a larger population of adult adoptees. However, to my knowledge, this is one of the first studies that links adoptive environments to an attachment framework and how it impacts adult adoptees' identities and self-concepts as parents, and I also looked at the effects of adoption has on the next generation of adult adoptees parenting their own biological children. In other words, how adoption loss and identity issues can also impact adult adoptees' children.

Recommendations for Future Research

Baden and Wiley (2007) stated that currently there have been no adoption studies that are evidence-based relative to a treatment/intervention model for adopted adults. By "understanding the elements of the self, in context as it is related to adoptive identity development, provides one method for understanding the complex challenges facing adoptees in adulthood" (Fall, Roaten, & Eberts, 2012, p. 443).

In addition, Pinkerton (2010) suggested that "adoptees' voices have traditionally not been heard, whether it be in the enforcement of laws to protect the identity of biological parents, in quantitative research studies or in an everyday social context. There appears to be a certain taboo about speaking openly about adoption" (p. 41). Often society assumes that adoption is a joyful event and that there are no implications to the child. It is often the 'elephant in the room,' involving grief, loss, anger, and confusion in adoption stories, and the general population has difficulty acknowledging and discussing, these emotions are not brought into light, given the lack of research. As an adult adoptee and the researcher of this study, my hopes is that my work

provided ideas that could motivate other researchers to explore further this study's topics, on a larger scale, and gain grounds for generalization – better than I am able to provide. In addition, male adult adoptees need to have their voices heard.

Strengths of the Research Study

Although the sample size obtained in this study will not permit me to generalize the results to a larger population of adult adoptees, the generated results does link an untapped area among adult adoptees that have not been examined to date. This study is the first to offer insights into the world of an adult adoptee that connects intergenerational effects adoption has on adoptive parents, adult adoptees, and to adoptees' own biological children from a closed adoption era perspective. As noted earlier, Post (2000) found that adult individuals, who were adopted as infants, provide an intriguing picture of the impact of early separation from their mothers, the conflict between the biological and adopted environmental inheritances, and the struggle to form a coherent sense of self. In addition, Horowitz (2011) offered that adoption research studies have focused solely on the needs of adoptees, biological, and adoptive parents during childhood and adolescence, with less emphasis on the developmental challenges adoptees can experience in their adult years. There are gaps of information in the literature on how adoptees approach becoming parents as well as how adoptees parent. That is, how adoptees recognize themselves in their own children whether they are adopted or not and how they bond with their biological children.

Clinical and Educational Implications

As a certified attachment, adoption, and foster care psychotherapist who has assisted many children in care or adopted within the closed and/or open adoption era, it is my hope that more mental health professionals become aware of how adoption can impact families of this generation or the next one. Therapists' own sensitivities determine what they encourage their clients to talk about, or alternatively not address. As a clinical psychotherapist specializing in the area of adoption, foster care, and attachment, I have noticed how some adoptees are left with some unanswered questions from previous years of therapy regarding other presenting concerns (e.g. marital issues, self-esteem). Some many have struggled forming a therapeutic rapport with other therapists. This statement is not to place blame on the adoptee or the therapist, but this

rapport intrigues me, as an adoptee and as a therapist in this field. I offer some suggestions in positioning myself (e.g. a therapist, an educator, etc) in a therapeutic alliance or rapport with an adult adoptee; and the following are issues that I feel are important to bring up:

(1) Being mindful that forming a therapeutic rapport, for some adult adoptees, may be difficult given they have had more than one significant attachment figure in their lives. Trust and acceptance may take some time to develop.

(2) Ethically speaking, as with any area that is unknown, therapists have the duty to realize their own comfort levels and/or areas of competencies. Having the willingness to explore and research what they do not know or seek outside consultation is important.

(3) Being aware that adoption may not be an easy topic to discuss for adult adoptees because it may remind them of their own losses and feelings of abandonment.

(4) To assume that every adoptee is at their own rate/level of processing their emotions.

(5) Therapists have to be aware of their own sensitivities. For example, that adoption is not always a positive event as the media portrays. That there are losses involved, and discussing those losses or "the elephant in the room" is important and healthy way to assist an adoptee to express and process with their own emotions. In other words, to assist them in growing and reaching their fullest potentials in life (i.e. being a parent if perhaps they are in counselling for parenting issues).

From the qualitative themes that came up in this study, some suggestions for teachers/educators are:

(1) To be aware of their own biases and opinions regarding adoption. For example, not all children who have been adopted come from homes where they have been abused and/or neglected by their biological parents;

(2) For those working with adolescents, the teen years can be difficult for some adoptees, given identity issues surface during this period in their lives. Not to assume that it is just adolescent concerns, that adoptees have an additional layer they are working through.

(3) Relative to lesson planning or teaching genetics in health class, to consider that there may be adoptee sin the classroom who do not know their biological origins. For example, completing one's family tree may be a source of pain for adoptees.

I have found that adoption is a major life transition that has often been overlooked in educational settings, training programs, and counsellors' treatment plans. In the end, adoption is a significant experience that touches upon universal human themes of identity, abandonment, sexuality, parenthood, rivalry, and belonging. These experiences last a lifetime for many adult adoptees and simply cannot be reduced to a single life event that adoptees should repress and move on from. In the end, adult adoptees are resilient and they can learn and grow by integrating what they know from both their biological and adoptive origins!

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Appendix A: Infant and Adult Attachment Styles and Their Classifications within the Literature

*Infant Attachment Styles	**Adult Attachment Styles
Secure (B) – An infant explores a room and toys with interest in pre-separation phrases. Then shows signs of missing the parent during separation, often crying by the second separation. Evident preference of parent over stranger. Greets parent actively, usually initiating physical contact. Typically some contact maintaining by second reunion with parent, but then settles and returns to play.	**Secure/autonomous (F)** – Persons are able to maintain balance between self-reliance and reliance on others with whom they are attached. Able to maintain their autonomy while successfully maintaining continuous relationships with partners and friends.
Avoidant (A) – Infant fails to cry on separation from parent. He/she actively avoids/ignores parent on reunion (i.e., by moving away or leaning out of arms when picked up). Little or no proximity or contact seeking, no distress, and no anger results. Response to parent appears unemotional, as child focuses on toys or environment throughout experience.	**Dismissive (Ds)** – Persons tend to diminish importance of attachment relationships in their lives while focusing on protecting independence and personal control. Tend to de-emphasize emotions while stressing thoughts and reasoning abilities in making life choices and managing stress.
Resistant or ambivalent (C) – Infant may be wary or distressed even prior to separation from parent, with little exploration. Preoccupied with parent throughout experience, may seem angry or passive. Fails to settle and take comfort in parent upon reunion, and usually continues to focus on parent and cries. Infant fails to return to exploration of environment after reunion.	**Preoccupied (E)** – Persons tend to overemphasize importance of relationships in life while de-emphasizing importance of personal independence. Dwell on past relationships consistently without being able to reduce the influence of those relationships on present ones.
Disorganized/disoriented (D) – The infant displays disorganized behaviours in the parent's presence, suggesting a temporary collapse of behavioural strategies (e.g., infant may freeze with a trance-like expression/state, placing hands in air, may rise at parent's entrance, then fall prone and huddled on the floor (i.e., fetal position); or may cling while crying hard and leaning away with gaze averted.	**Unresolved/disorganized (U/d)** – Pattern emerges when a situation within a current relationship reminds persons of a similar, stressful event in past relationships. Association with past relationship is one of disorganized, dysregulating effect on persons' functioning in current relationship. Persons notice sudden emergence of acute, disruptive, and disorganizing behaviors periodically in important relationships. Persons will ordinarily otherwise fit Ds, E, or F categories.

Source: *Siegel, D. J. (1999). *The developing mind: Toward a neurobiology of interpersonal experience.* New York, NY: Guilford Publications, Inc.

** Hughes, D. A. (2013). *8 keys to building your best relationships.* New York, NY: W.W. Norton & Company, Inc.

Appendix B: Seven Core Adoption Issues

	Adopted Person	Birth Parent	Adoptive Parent
Issues			
Loss	Fears abandonment; Loss of biological, genetic, & cultural history; Issues of holding on & letting go	Ruminates about lost child; Initial loss merges with other life events; Leads to social isolation; Relationship losses	Infertility equates with loss of self and immortality; Issues of entitlement lead to fear of loss of child and overprotection
Rejection	Can only be "chosen" if first rejected; Issues of self-esteem; Anticipates rejection	Rejects self as irresponsible & unworthy because she permitted the adoption; Turns these feelings against self as deserving of rejection; Comes to expect & cause rejection	Feeling of being ostracized because of procreation difficulties
Guilt/Shame	Feels deserving of misfortune; Ashamed of being different; Anger	Party to guilty secret; Shame & guilt for placing child; Feeling of being judged by others	Ashamed of infertility; May believe childlessness is a curse/punishment
Grief	Grief overlooked in childhood or blocked by adult leading to depression and acting out; May grieve lack of "fit" in adoptive family	Grief acceptable for only a short period; Grief may be delayed 10 or 15 years; Lacks rituals for mourning; Sense of shame blocks grief work	Must grieve loss of "fantasy" child; Unresolved grief may block attachment to adopted child; May experience adopted child's grief as rejection
Identity	Deficits in information about birth parents, may impede integration of identity; May seek identity in early pregnancies or extreme behaviors in order to create a sense of belonging	Child as part of identity goes on without knowledge; Diminished sense of self & self-worth; May interfere with future parental desires	Experiences a diminished sense of continuity of self; "Role Handicap"—I am a parent / I am not a parent
Intimacy/Relationships	Fears getting close and risking re-enactment of earlier losses; Bonding issues may lower capacity for intimacy	Difficulty resolving issues with other birth parent may interfere with future relationships; Intimacy may equate with loss	Unresolved grief over losses may lead to intimacy and marital problems; May avoid closeness with adopted child to avoid loss
Control	Adoption alters life course; Aware of not being a party to initial adoption decisions, in which adults made life-altering choices	Relinquishment seen as an out-of-control, disjunctive event; Interrupts drive for self-actualization	Adoption experiences lead to "learned helplessness" where sense of mastery is linked to procreation; Lack of initiative

<u>Adapted from Source</u>: Silverstein, D. N., & Kaplan, S. (1982). Seven core issues in adoption. Retrieved on March 19, 2014 from http://www.adoptionsupport.org/res/7core.php

Appendix C

Qualitative Interview Questions

Section A: Background/Demographic Information

Name: **Age (including Date of Birth):**

Gender: **Marital Status (single, common in-law, married):**

Occupation: **Education:**

Age when adopted:

Foster care (Yes/No and how long?):

<center>******</center>

Section B: Interview Guide

(1) What comes to mind when you hear the word "adoption"?

(2) How has your adoption impacted your life? If you think it has not, why is that?

(3) How old were you when you were told that you were adopted by your adoptive parents? Did you harbor any resentment about being given up for adoption? What effect have those feelings had on your life?

(4) How would you describe your adoptive mother in five words? And adoptive father in five words?

(5) How were your origins celebrated? In what ways? If your origins were not celebrated, how was adoption discussed in your home?

(6) Are you currently searching for or have you reunited with your birth family? If no, what prevents you from searching? If reunited, how did you feel the bond was with your birth family (i.e. was it an instant bond, awkward at first)?

(6a) What are your feelings, in relation to your adoptive parents, when you searched for and/or met your birth parents? (if applicable)

(6b) In your opinion, what is the most difficult aspect of an adoption reunion? (if applicable)

(6c) How has your adoption reunion affected your relationships with your adoptive parents, siblings, cousins, etc? (if applicable)

(7) What comes to mind when you think about "parenthood"?

(8) Do you have children? If yes, how many? Adopted or biological?

(9) How do you think your adoption experience has impacted your views on parenthood?

(10) In your opinion, how do you think your adoption experience has affected your identity as a parent?

(11) How do you think your childhood experiences, within your adoptive family, have shaped your perspective in wanting to become a parent?

Questions for Second Interview:

1. After reviewing the interview and your responses, is there anything that you would like to modify (e.g. add, change, or delete) to this transcript?

2. Have any other new ideas surfaced since the last time we met?

Appendix D

Parental Bonding Instrument: Mother Form

This questionnaire lists various attitudes and behaviours of parents. As you remember your **MOTHER** in your first 16 years, place a checkmark in the most appropriate box next to each question. This pertains to your adoptive mother.

	Very Like	Moderately like	Moderately unlike	Very unlike
1. Spoke to me in a warm and friendly voice.				
2. Did not help me as much as I needed.				
3. Let me do those things I liked doing.				
4. Seemed emotionally cold to me.				
5. Appeared to understand my problems and worries.				
6. Was affectionate to me.				
7. Liked me to make my own decisions.				
8. Did not want me to grow up.				
9.Tried to control everything I did.				
10. Invaded my privacy.				
11. Enjoyed talking things over with me.				
12. Frequently smiled at me.				
13. Tended to baby me.				
14. Did not seem to understand what I needed or wanted.				
15. Let me decide things for myself.				
16. Made me feel I wasn't wanted.				
17. Could make me feel better when I was quiet.				
18. Did not talk with me very much.				
19. Tried to make me feel dependent on her.				
20. Felt I could not look after myself unless she was around.				
21. Gave me as much freedom as I wanted.				
22. Let me go out as often as I wanted.				
23. Was overprotective of me.				
24. Did not praise me.				

25. Let me dress in any way I pleased.				

Parental Bonding Instrument: Father Form

This questionnaire lists various attitudes and behaviours of parents. As you remember your **FATHER** in your first 16 years, place a checkmark in the most appropriate box next to each question. This pertains to your adoptive father.

	Very Like	Moderately like	Moderately unlike	Very unlike
1. Spoke to me in a warm and friendly voice.				
2. Did not help me as much as I needed.				
3. Let me do those things I liked doing.				
4. Seemed emotionally cold to me.				
5. Appeared to understand my problems and worries.				
6. Was affectionate to me.				
7. Liked me to make my own decisions.				
8. Did not want me to grow up.				
9.Tried to control everything I did.				
10. Invaded my privacy.				
11. Enjoyed talking things over with me.				
12. Frequently smiled at me.				
13. Tended to baby me.				
14. Did not seem to understand what I needed or wanted.				
15. Let me decide things for myself.				
16. Made me feel I wasn't wanted.				
17. Could make me feel better when I was quiet.				
18. Did not talk with me very much.				
19. Tried to make me feel dependent on him.				
20. Felt I could not look after myself unless he was around.				
21. Gave me as much freedom as I wanted.				
22. Let me go out as often as I wanted.				
23. Was overprotective of me.				

24. Did not praise me.				
25. Let me dress in any way I pleased.				

Source: Parker, G., Tupling, H., & Brown, L. B. (1979). A parental bonding instrument. *British Journal of Medical Psychology, 52*, 1-10.

Parenting Sense of Competence Scale

Rate the extent to which you agree or disagree with each of the following statements below:

	Strongly Disagree 1	Somewhat Disagree 2	Disagree 3	Agree 4	Somewhat Agree 5	Strongly Agree 6
1. The problems of taking care of a child are easy to solve once you know how your actions affect your child, an understanding I have acquired.						
2. Even though being a parent could be rewarding, I am frustrated now while my child is at his/ her present age.						
3. I go to bed the same way I wake up in the morning, feeling I have not accomplished a whole lot.						
4. I do not know why it is, but sometimes when I'm supposed to be in control, I feel more like the one being manipulated.						
5. My mother/father was better prepared to be a good mother/father than I am.						
6. I would make a fine model for a new mother/father to follow in order to learn what she/he would need to know in order to be a good parent.						
7. Being a parent is manageable, and any problems are easily solved.						
8. A difficult problem in being a parent is not knowing whether you're doing a good job or a bad one.						
9. Sometimes I feel like I'm not getting anything done.						
10. I meet by own personal expectations for expertise in caring for my child.						
11. If anyone can find the answer to what is troubling my child, I am the one.						
12. My talents and interests are in other areas, not being a parent.						
13. Considering how long I've been a mother/father, I feel thoroughly familiar with this role.						
14. If being a mother/father of a child were only more interesting, I would be motivated to do a better job as a parent.						
15. I honestly believe I have all the skills necessary to be a good mother/father to my child.						
16. Being a parent makes me tense and anxious.						
17. Being a good mother/father is a reward in itself.						

Source: Johnston, C., & Mash, E. J. (1989). A measure of parenting satisfaction and efficacy. *Journal of Clinical Child Psychology, 18*, 167-175.

Appendix F

Experiences in Close Relationships – Revised

The statements below concern how you feel in emotionally intimate relationships. Interested in how you *generally* experience relationships, not just in what is happening in a current relationship. Respond to each statement by checking the box to indicate how much you agree or disagree with the statement.

	Strongly Disagree 1	Disagree 2	Somewhat Disagree 3	Neither Agree/Disagree 4	Somewhat Agree 5	Agree 6	Strongly Agree 7
1. I'm afraid that I will lose my partner's love.							
2. I do not often worry about being abandoned.							
3. My partner only seems to notice me when I'm angry.							
4. I often worry that my partner will not want to stay with me.							
5. I don't feel comfortable opening up to romantic partners.							
6. My partner really understands me and my needs.							
7. I feel comfortable sharing my private thoughts and feelings with my partner.							
8. I tell my partner just about everything.							
9. It makes me mad that I don't get the affection and support, I need from my partner.							
10. I feel comfortable depending on romantic partners.							
11. I worry a lot about my relationships.							

12. I'm afraid that once a romantic partner gets to know me, he or she won't like who I really am.						
13. I rarely worry about my partner leaving me.						
14. It's easy for me to be affectionate with my partner.						
15. I get uncomfortable when a romantic partner wants to be very close.						
16. It helps to turn to my romantic partner in times of need.						
17. I prefer not to show a partner how I feel deep down.						
18. It's not difficult for me to get close to my partner.						
19. I often worry that my partner doesn't really love me.						
20. My romantic partner makes me doubt myself.						
21. When my partner is out of sight, I worry that he or she might become interested in someone else.						
22. I am nervous when partners get too close to me.						
23. I find it difficult to allow myself to depend on romantic partners.						
24. I usually discuss my problems and concerns with my partner.						
25. I worry that romantic partners won't care about me as much as I care about them.						

26. I find that my partner(s) don't want to get as close as I would like.						
27. I often wish that my partner's feelings for me were as strong as my feelings for him or her.						
28. Sometimes romantic partners change their feelings about me for no apparent reason.						
29. When I show my feelings for romantic partners, I'm afraid they will not feel the same about me.						
30. My desire to be very close sometimes scares people away.						
31. I worry that I won't measure up to other people.						
32. I am very comfortable being close to romantic partners.						
33. I find it easy to depend on romantic partners.						
34. I prefer not to be too close to romantic partners.						
35. I talk things over with my partner.						
36. I find it relatively easy to get close to my partner.						

Source: Farley, R. C., Waller, N. G., & Brennan, K. A. (2000). An item response theory analysis of self-report measures of adult attachment. *Journal of Personality and Social Psychology, 78*(2), 350-365.

ARE YOU AN ADULT ADOPTEE AND PARENTING YOUR OWN CHILD?

I, Christine Gatzke, am a graduate student in Educational Psychology and Special Education at the University of Saskatchewan. I am seeking individuals to participate in a research study entitled *Adult Adoptees' Experiences: Their Self-Concepts of Parenthood.* Participants must be adult adoptees who meet the following criteria:

> ➢ Are **19+ years** or older
> ➢ **Adopted** within the closed adoption era (excluding semi-open and open adoptions) within Canada
> ➢ Are a **parent** (either biologically or through adoption)
> ➢ Not currently in a state of crisis;
> ➢ Willing to discuss both your childhood experiences as an adoptee and **views towards parenthood**
> ➢ Able to commit approximately **3 to 4 hours** of your time to participate in the following:
>> ✓ one 60 minute interview to discuss ethics, consent forms, and answer some interview questions
>> ✓ one 30 to 45 minute for self-report questionnaires
>> ✓ one 45 to 60 minute follow-up interview to go through themes

If you are interested in participating in this study, please contact Christine Gatzke at:

adoptees.and.parenthood@usask.ca

This study has been reviewed by, and received approval through, the University of Saskatchewan Behavioural Research Ethics Board (**BEH# 14-377**) on October 31, 2014. Each participant will receive a **$20 honorarium** at the end of the follow-up interview, as a token of appreciation for your participation.

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Selection Criteria Questions Guide (via phone)

Researcher: My name is Christine Gatzke and I want to thank you for your interest in the research project. First, I want to confirm that you meet the selection criteria for the study. If you do, we can set up a date and time for our first interview where we will discuss ethics, consent, and I will have some interview questions for you. If there is a chance that you don't meet the study's criteria to participate that is completely fine. If you are unable to participate, I thank you for your time and I will let you know how you can obtain the research findings of this study.

R: I am now going to ask you a few questions regarding the study's criteria to confirm your eligibility to participate in this study.

R: Are you 19+ years or older?

R: Were you adopted within the closed adoption era (you had no contact with your birth family or identifying information)?

R: Are you a parent (either to your own biological child or through adoption)?

R: Are you willing and able to discuss both your childhood experiences as an adoptee and views towards parenthood?

R: Are there any things happening in your life at the moment that may make it difficult for you to discuss this topic?) (e.g. Do you feel that you can discuss and reflect on this personal topic? What is your support system currently like?

R: Lastly, are you able to commit to approximately 3-4 hours of your time in order to participate in this study? That is (list what's involved):

- ✓ one 60 minute interview to discuss ethics, consent forms, and answer some questions

- ✓ one 30 to 45 minute for the self-report questionnaires

- ✓ one 45 to 60 minute follow-up interview to go through themes that come up from the transcript.

R: Great! I have no more questions for you and what I would like to do is to set an appointment up with you for the first interview (we will discuss the consent form, ethics, and I will have some interview questions regarding your experiences). Offer choice of location to participant (e.g. University of Saskatchewan, Room 1219, 901 1st Avenue North, office no. 25, or a skype meeting).

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Adult Adoptees' Experiences: Their Self-Concepts of Parenthood

You are invited to take part in a research study entitled *Adult Adoptees' Experiences: Their Self-Concepts of Parenthood.* Please read this form carefully, and feel free to ask any questions you have about the study.

Researcher: Christine Gatzke, M.Ed (Counselling), (M.Ed. – Psychology Candidate), CCC, CPAC/ARC, Department of Educational Psychology and Special Education (email: adoptees.and.parenthood@usask.ca)

Supervisor: Dr. Tim Claypool, Department of Educational Psychology and Special Education, University of Saskatchewan (email: tim.claypool@usask.ca, phone: 306-966-6931)

Purpose: The purpose of this study is to explore how adult adoptees view parenthood through the lens of their own upbringings within Canada. This focus will assist those in educational and health care professions to better understand the developmental perspectives and specific needs of adult adopted persons and the effects on the next generation within Canadian families. At this point, you will take part in one audio-recorded interview that will be approximately 60 minutes in length. Also, you will complete three self-report questionnaires that will take no more than 30 to 45 minutes. The follow-up interview will take no more than 45 to 60 minutes and is designed to go through themes generated from the first interview. These two interviews and questionnaires will take place over a 1 to 2 month time period.

Procedure:
        Currently, you have already emailed me expressing interest to participate in this research study, and we have spoken over the phone to discuss if you are eligible to participate in the study. As stated, you are eligible to participate in this research study.

        This first meeting will take approximately 60 minutes where we will discuss ethics, consent form, and I will invite you to respond to some interview questions regarding your experiences as an adult adoptee. These questions are more open-ended, meaning that the questions will enable you to share your experiences as an adoptee. After the first interview, you will be provided with an opportunity to add, change or delete any information you shared with me, before signing a data release form. At this point as well, we will schedule our final and second interview meeting.

        The next phase of this research study, involves your response to three self-report questionnaires. Each are designed to address how you attached to your adoptive parents through your experiences as an adoptee, your sense of self as a parent, and lastly, your attachment style. This portion should take you no more than 30 to 45 minutes to complete.

The second and final meeting will take approximately 45 to 60 minutes. At this point I will have transcribed and have developed some themes for our interview. The purpose of this second and final interview will be for you to verify my interpretation of the themes generated. You will be given the opportunity to review the full transcript from our first interview, however if you wish to add, change or delete any information shared with me and we can make those changes accordingly.

For your convenience, all interviews will be scheduled based on your availability and will be held either in the Education Building (Room #1219) at the University of Saskatchewan or at 901-1st Avenue North, Office no. 25 (choice will be yours based on convenience of location and accessibility). The interviews will be audio-taped and transcribed. Data generated from these interviews will be used for my (Christine Gatzke's) thesis. No personal identifying information will be used within my thesis. For example, to ensure your identity is protected, all data (including quotations), within my thesis, will be summarized when reporting any findings.

Potential Risks: Risks associated with this research study are minimal. However, you could experience some discomfort when discussing how your experiences as an adult adoptee influence your views towards parenthood. You do have rights as a participant in this research study. For example, you have the right to determine what we discuss, refuse to answer certain questions, and you can request that the audio recorder to be turned off at any point during the interviews. In addition, you have the right to end our interviews or to withdraw your participation from the study at any time. If you experience any emotional discomfort resulting from your participation in this study, here is a list of organizations you can visit or call:

Saskatoon Crisis Intervention Service
Phone: 306-933-6200

The Saskatoon Crisis Intervention Service is a 24-hour, 7 days-a-week telephone counselling service for persons who are experiencing a crisis within their lives. On-call counsellors can visits persons within their homes if required. There is <u>no</u> fee for these services.

Adoption Support Centre of Saskatchewan
527 Main Street Unit 1A, Saskatoon, SK, S7N 0C2
Phone: 306-665-7272

The Adoption Support Centre of Saskatchewan provides services to individuals all across Saskatchewan. This service provides many supports (information, para-professional counselling, and referral services) for those within the adoption community. Fees are assessed on an ability to pay based on a sliding scale.

Catholic Family Services of Saskatoon
200, 506-25th Street East
Saskatoon, SK, S7K 4A7
Phone: 306-244-7773

Fees are assessed on an ability to pay based on a sliding fee scale. CFS provides services for many Employee and Family Assistance Programs (EAP). Extended Health Benefits (i.e. Blue Cross, Manulife, etc.) may cover the costs for counselling.

Family Service Saskatoon
102, 506-25th Street East
Saskatoon, SK, S7K 4A7
Phone: 306-244-0127

Fees for counselling services are determined based on family income and size of the family. This scale ranges from $10 to $100 and will be determined at intake.

Though both Catholic Family Services of Saskatoon and Family Service Saskatoon listings are for Saskatoon, these organizations are located in most city centres across Canada.

Potential Benefits: There are potential benefits of this study. For example, talking about your experiences as an adult adoptee may be particularly helpful to you. In addition, taking part in this study may assist those in education and health care professions to better understand the developmental perspectives and specific needs of adult adopted persons and the effects on the next generation within Canadian families.

Confidentiality: Your privacy during this process is extremely important. All of your interactions with this study, including information shared with the researcher, are kept strictly confidential (e.g. all information will be kept in a locked filing cabinet, etc). Limitations to confidentiality, where required by law are situations involving: (i) where there are reasonable grounds to believe that there is the intent of imminent harm to yourself or someone else and/or (ii) where there are reasonable grounds that a child is at risk of abuse (e.g. physical, verbal, sexual, etc).   To ensure your anonymity, a pseudonym will be used in reference to you in the research data. In addition, should any quotations be used from my interviews with you, a pseudonym will be used in place of your real name. Thus, no personal identification will be used in my (Christine Gatzke's) thesis. As noted above, you will be given the opportunity to add, change or delete any information shared with me and we can make those changes accordingly. This will be accomplished prior to you signing the data release form.

Should the results be published or presented at conferences, pseudonyms will be used to ensure your privacy and confidentiality.

Storage of Data: At the end of the research study, the results and all materials (e.g. audio recordings and transcripts) will be securely stored (in a locked filing cabinet) by my thesis supervisor, Dr. Tim Claypool, at the University of Saskatchewan for a minimum of five years. When the five years has elapsed and the data is no longer required, all data will be destroyed.

Right to Withdraw: In this research study, your participation is completely voluntary and you can withdraw for any reasons, at any time, without any consequence. The information that is shared will be held in strict confidence and will only be discussed with my supervisor, Dr. Tim Claypool. As noted above, at any time, you have the right to refuse to respond to any questions.

If you choose to withdraw from this research study, all of the collected data (transcripts, audio-taped interviews) will be destroyed. If you choose to withdrawal this will not affect you in any way and from any current services you may be utilizing for your own well-being (e.g. counselling or medical services).

Your right to withdraw data from the study will apply until (*insert date*) at which point all data will be pooled. After this date, it is possible that some form of research dissemination will have already occurred and it may not be possible to withdraw your data.

Questions: If you have any questions concerning this research study, please feel free to ask me any time throughout the study. Also, you do have the option to email me or my supervisor if you have any questions. This research project has been approved on ethical grounds by the University of Saskatchewan Research Ethics Board. Any questions regarding your rights as a participant may be addressed to that committee through the Research Ethics Office ethics.office@usask.ca (306) 966-2975. Out of town participants may call toll free (888) 966-2975.

Consent to Participate: I have read and fully understood the description provided; I have had an opportunity to ask questions and my questions have been answered satisfactorily. I consent to participate in the research project, understanding that I may withdraw my consent at any time. A copy of this Consent Form has been given to me for my records.

_____   _____

Signature of Participant   **Date**

_____   _____

Researcher's Signature   **Date**

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Appendix J: Data/Transcript Release Form

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I,_____, have reviewed the complete transcript of my personal interview in this study, and have been provided with the opportunity to add, change or delete information from the transcript and my quotations as appropriate. I acknowledge that the transcript accurately reflects what I said in my personal interview with Christine Gatzke. I hereby authorize the release of this transcript and my quotations to Christine Gatzke to be used in the manner described in the Consent Form. I have received a copy of this Data/Transcript Release Form for my own records.

_____   _____

Name of Participant   Date

_____   _____

Signature of Participant   Signature of researcher