
Perspectives on Open Adoption

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In the opening article of this journal issue, Sokoloff describes the origin of the statutory requirements that adoption be confidential and that the original birth certificate and adoption records be sealed. As he points out, the early laws, beginning with the Minnesota Act of 1917, were designed to shield adoption procedures from public scrutiny, so as to provide privacy for both the birthparents and the adoptive parents, and to remove the stigma of illegitimacy from the child. The intent of these original statutes was not to create anonymity between birthparents and adoptive parents or to keep secret from adopted children any information about their past. During the ensuing 30-year period, ideas about who should be protected and from whom changed. By the early 1950s virtually every state had amended its adoption statutes to create complete anonymity for the birthparents. Even in private adoptions where the law permitted the birthmother to choose the adoptive family, rarely did she meet the adoptive parents face to face or maintain any contact with her birthchild. In effect, both public and private systems for adoption were tightly closed.

This article offers our perspective about secrecy in adoption. We believe that confidentiality and anonymity are harmful and that adoptions should be open. This perspective was developed during more than 40 years of practice as psychotherapists and researchers. We have counseled thousands of birthparents, adoptees, and adoptive parents, following many of them over decades. As we developed our practice, it became evident that little attention had been paid to the psychological needs of adult adoptees and that no studies had been done to examine the feelings and attitudes of birthparents years after they had relinquished their children for adoption. Beginning in 1974 we, with Arthur Sorosky, began to report our observations that some

of the psychological problems observed in adolescent and adult adoptees, birthparents, and adoptive parents appeared to be related directly to the secrecy, anonymity, and sealed records aspects of adoption.¹⁻⁴ These observations were later expanded in our book, *The Adoption Triangle*.⁵ This article briefly reviews some of our clinical observations.

Psychological and Emotional Effects of the Closed System

Our decades of experience in counseling individuals affected by adoption suggest that requiring anonymity between

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birthparents and adoptive parents and sealing all information about the birthparents from the adopted child has damaging effects on all three parties. These damaging effects are discussed below.

Effects on the Birthparents

Relinquishment of a newborn child may be profoundly damaging to birthparents and cause lifelong pain and suffering. Even when relinquishment is a carefully considered and chosen option, birthmothers—and often birthfathers—may suffer from a heightened sense of worthlessness after giving away a child. They may feel guilty about their actions. These birthparents may believe that their off-

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spring will not understand the reasons for relinquishment and that these offspring will blame and hate their birthparents for rejecting and abandoning them. The birthparents may want their children to know that they continue to care about them and, in turn, may wish to learn about the kind of people their children have become. No matter how many children they may have subsequently, birthparents may still desire knowledge and contact with the one they gave up.

In traditional closed adoptions, such knowledge and contact is not possible. Birthparents do not know who adopted their child, where he or she lives, or even whether the child is alive or dead. Even in so-called open placements where all parties know the identity of all other parties, birthparents often have no ongoing contact with the child. In these instances, birthparents may feel powerless. They have no knowledge of what is happening to their child and no opportunity to let the adoptive family know of significant events in their own lives.

Effects on the Adoptees

Adopted children also frequently suffer from the secrecy imposed in closed adoptions, particularly during adolescence when they often experience greater iden-

tity conflicts than members of the non-adopted population.⁷ The process of developing an individual identity is more complicated for adoptees because they live with the knowledge that an essential part of their personal history remains on the other side of the adoption barrier. In closed adoptions, any desire on the part of an adopted child to learn more about the birthparents is blocked, often leading to fantasies and distortions. Easily escalated, these may develop into more serious problems. In our studies, we described these adoption-related identity conflicts as resulting in “identity lacunae,” which can lead to feelings of shame, embarrassment, and low self-esteem.⁷ In addition, adoptees may experience a deep fear of loss and separation. Many adopted children feel that they were given away because there was something wrong with them from the beginning.

We observed that, in late adolescence, negative feelings and questions about being adopted increased. In young adulthood, plans for marriage may create an urgent desire for specific background information, particularly about family history. For adopted adult women, pregnancy and the birth of a child may raise fears of possible unknown hereditary problems. Becoming a parent may also trigger intense feelings in the adoptee toward his or her own birthmother. These feelings may include not only empathy for her difficult emotional situation, but also anger and disbelief that she could have given up her own child. The feelings frequently create a need in adoptees to search for birthparents and the hope for a reunion to bring together the broken connections from the past. Such a search, if undertaken, often is prolonged, painful, and fruitless.

Effects on the Adoptive Parents

Finally, closed adoption can also have negative psychological and emotional effects on the adoptive parents. With no knowledge of or contact with the birthparents, adoptive parents may find it difficult to think and talk about birthparents as real people. They may be unable to answer truthfully their adoptive children’s inevitable questions about why they were given up, what their birthparents were like, and what happened to these parents in later life. The ghosts of the birthparents, inherent in the closed system, are ever present, and may lead to the fear that these parents will reclaim the child and that the child will

love these parents more than the adoptive parents.

The Movement Toward Open Adoption

Having observed and documented these psychological and emotional effects during the 1970s, we became convinced that secrecy and anonymity were undesirable within the adoption system and recommended reform through opening of sealed records for adult adoptees.^{3,8} We also sought ways of possibly preventing some of the psychological problems we had observed. This led us, in 1975, to advocate open adoption placement of infants and children,⁹ an idea regarded by many as new and radical. In fact, open adoption had existed throughout history. Closed adoption was begun in this country, in this century, and soon became the standard of adoption practice. While originally we recommended open adoption only as an option to be carefully chosen in special cases, in 1984 we recommended that open adoption become standard practice.¹⁰

In the discussion that follows, we present our definition of open adoption, address some of the major objections to it, indicate the potential benefits of open adoptive placements, and finally propose what we consider to be appropriate long-term responsibilities of birthparents, adoptive parents, and adoptees.

Definition of Open Adoption

An open adoption is one in which the birthparent(s) at least meet the adoptive parents and may even participate in selecting them. In contrast to closed adoption, open adoption includes the exchange of identifying information and the making of agreements regarding future contact and communication. The frequency and extent of this contact and communication will vary and may need to be renegotiated at different times in the lives of the individuals involved, depending upon their needs and desires and the quality of the relationship that evolves. At present, after the adoption is finalized, the adoptive family is recognized as having the final authority to determine the nature and extent of ongoing contact.

Misconceptions About Open Adoption

As open adoption became more common in the 1970s and 1980s, several popular misconceptions were challenged. They deserve further scrutiny.

■ *Couples will not adopt children unless they can be guaranteed anonymity and secrecy.* Such guarantees, we now know, were never ironclad. The adoptees' reform movement spawned a nationwide network of search groups that often successfully located birthparents and nullified guarantees of secrecy and anonymity given by adoption agencies to these parents. Furthermore,

experience in adoption during the past decade, when fewer newborns were available, has clearly demonstrated that couples, eager to parent children, are willing to adopt under a variety of circumstances. Although once only healthy babies were considered adoptable, now children with disabilities, from mixed racial backgrounds, and in sibling groups are being welcomed by families. (See the article by

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Rosenthal in this journal issue.) It was our belief that couples would accept open placement if adoption agencies made it standard practice. At present open adoption is accepted by many adoptive parents, and this practice appears to be increasing, particularly in independent adoptions.

■ *Birthmothers want and need anonymity to move forward in their lives and put the experience of pregnancy and relinquishment behind them.* This misconception was fostered by maternity homes and adoption agencies. It was sustained, in part, because some adoption social workers found it difficult to deal with the continuing pathos and misery of the birthmothers in the post-relinquishment period. Our studies of birthmothers in the 1970s indicated that, when they contacted agencies regarding their relinquished children, they often were made to feel emotionally unstable and at fault for carrying this experience with them. Apparently few caseworkers took the time or made an effort to question birthmothers about their inner feelings although many birthmothers were eager to be interviewed and to have their feelings heard.⁶ These observations were contrary to the belief that birthmothers had emotionally resolved giving up a child, recovered from the trauma, and wished to remain hidden. These birthmothers had not been advised or counseled about the possibility that they might have lifelong anxiety and distress. Even those birthmothers who had not revealed their past to husband and children indicated that, if it were possible to protect themselves, they would want to know and meet their offspring. Not to know whether their chil-

dren were alive or dead was a continuing source of sadness for some.

■ *Adoptees will be confused by contact with their birthparents and may become emotionally disturbed as a result of being aware of and dealing with two mothers during their developmental years.* Our experience has led us to conclude that closed adoptions did not protect adoptees from emotional disturbances. On the contrary, it is our belief, based on years of work with adoptees of all ages, that some of them are particularly vulnerable because of feelings of loss and abandonment, exacerbated by the secrecy and anonymity of closed adoptions.⁵ However, because open adoption placement is still comparatively new, we cannot state conclusively what effects it has on adoptees. Long-term studies on the adjustment of adoptees to open adoption are few in number and vary in quality. (See the article by Berry in this journal issue.) At present it must be stated that the results are inconclusive, and it is evident that much additional research on this important aspect of open adoption remains to be done. Berry states, however, that "professionals generally agree that the child is least confused about loyalties to either parent when the open relationship between the adoptive and biological parents is clear and positive."

Benefits of Open Adoptive Placements

There are several important benefits to open adoptive placements. First, the birthparents assume more responsibility for the decision to relinquish, and as full participants in the placement and entrusting of the child to a known family, they are better able to cope with feelings of loss, mourning, and grief. If contact with their birthchild is permitted, they are able to further ameliorate these feelings.

Next, adoptees' feelings of rejection by the birthparents also can be greatly diminished. A realistic understanding of the problems that led to adoptive placement permits acceptance of the situation. The continuing link with the birthparent dispels the notion that the children were abandoned and forgotten. In open adoption the need for search and reunion is eliminated. Important background information—including genetic and medical histories—is readily available.

Finally, for adoptive parents, knowing the birthparents of their children can prevent the fears and fantasies that might

otherwise have a negative effect on their relationships with their adopted children. Knowing the birthparents will enable adoptive parents to provide their children with background information based on first-hand knowledge and direct contacts.

Lifelong Responsibilities of Birthparents, Adoptive Parents, and Adoptees

The Birthparents

Relinquishment should not end the role of a birthparent. Birthmothers are responsible not only for providing careful and continuous nurturing before birth, but also for supplying ongoing emotional support to the adoptee following relinquishment. We know, from years of experience in counseling and psychotherapy of adoptees, that feelings of initial rejection and abandonment may cause emotional and psychological problems. Being told by an adoptive parent that one was given up out of love may be a poor palliative for children who feel that anyone who loved them would not have deserted them. Birthparents have a responsibility to let the children they relinquished know that they continue to care about them and are concerned about their well-being.

Birthparents can show this support for a child in many ways. A card, gift, letter, telephone call, or photograph each year on the child's birthday can demonstrate that the child's special day is important to the birthparent. Remembrances of this kind indicate that the child is not ignored, forgotten, or unloved.

Birthparents may feel that continued contact with their child and the adoptive family is painful and brings back difficult memories; however, birthparents need to understand how important they are to the well-being of their child. Other responsibilities and obligations include providing ongoing medical and social information and being available to both child and adoptive parents as needed.

Adoptive Parents

Adoptive parents share in this obligation to help in the adjustment of the adoptee. Acknowledging that adoption is different from having a child born into the family is an important step toward being successful parents. Adoptive parents must accept the dual identity in their adopted child's life and recognize the continuing importance

of the birthparents' contribution to their child's self-concept. Adoptive parents must realize that, no matter how compelling and understandable the facts surrounding the adoption are, the adoptive child may still feel rejected and unworthy. Adoptive parents must work in partnership with birthparents to provide the child with a healthy identity and self-image. To achieve this goal, the birthparents and adoptive parents must each respect the other's role in the child's life and feel comfortable with and trusting of one another. Prospective parents should not adopt unless they feel able to deal with all of the complexities inherent in this kind of parenting. Finally, adoptive parents have a continuing responsibility to share vital information about the child, such as

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descriptions of serious medical problems and news about a death in the family, with birthparents. Adoptive parents also should help maintain contact between the adopted child and siblings and other significant relatives.

Adoptees

In some ways, adoptees are the victims in the adoption triangle. Others made decisions for and about them. They had no role in being conceived, born, relinquished, and placed for adoption. However, as they move out of their childhood into maturity, they should assert certain rights and assume certain responsibilities. Adoptees who are growing up with knowledge of two sets of parents should be encouraged to gain knowledge about adoption and to explore ways of understanding their dual identity and its impact on them. Adoption is one aspect of their being which needs to be woven into the fabric of their lives.

Conclusion

In conclusion, our decades of experience lead us to believe that open adoption is the best approach. It minimizes emotional and psychological harm, and it allows all

parties to meet their continuing responsibilities to each other.

There is, however, more to be done. More research on the effects of open adoption is needed. Also, we must be vigilant to potential abuses. Scanning want-ad columns in newspapers across the country or the Yellow Pages of phone books in any of the major cities reveals the extent to which adoption has become a business and the degree to which open adoption can be used to expand that business. Under the heading Adoption Services appear such statements as, "You can choose your child's parents." The possibility of open adoption is frequently used to encourage relinquishment, particularly with young teenagers who are led to believe that they will have all the benefits of knowing their babies with none of the risks or responsibilities. Deceit of this kind unfairly encourages relinquishment and offers promises that often are not kept after the adoption occurs.

Thus, the central question today is not whether adoption shall be open or closed. Adoptive placements of older children are generally recognized as being open, and most infant adoptions now begin as open. Independent adoptions are predominantly open, and many agencies offer open adoption as an option. Rather, the challenge, in our view, is to ensure that open adoption continues to evolve in the best way possible. Every effort must be made to prevent abuse. The respective roles of birthparents, adoptive parents, and extended family in promoting the success of open adoption deserve careful consideration. However, in the final analysis, it is the adoptee whose well-being is central. Carefully designed, long-term studies are needed to investigate the impact of open adoption on adoptees more thoroughly and to generate recommendations for change and improvement.

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