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**ADOPTION: A DIFFERENT ROAD TO MOTHERING.**

**ADOPTIVE MOTHERS' EXPERIENCES OF NEGOTIATING AND MAINTAINING THE  
MOTHERING ROLE AT SIGNIFICANT POINTS ACROSS THE ADOPTION LIFE CYCLE**

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(S. GAIR)

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(S. GAIR)

30/8/96

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## ABSTRACT

Adoptive mothers are important, yet often hidden members of the adoption circle. They are also a unique group of mothers. The research presented in this thesis involved the participation of fifty adoptive mothers. Presented in their own terms are their experiences as they traverse a different road to mothering and as they experience the many similarities to, and many differences from other women engaged in the role of mother. Significant points across the adoption life cycle were examined. In order to gather rich and meaningful data on a range of adoptive mothers' experiences and emotions, two semi-structured in-depth interviews were conducted with the participants. To extend and complement the qualitative data on the range of experiences and emotions experienced in adoptive motherhood, including the early post adoption mothering period, three objective measures were introduced. These were the Social Readjustment Scale (Holmes and Rahe Life Event Scale), the Edinburgh Postnatal Depression Scale, and the Interview Schedule for Social Interaction. What was envisaged was a presentation of adoption from the little researched perspective of adoptive mothers; a united voice presenting a different perspective on adoption and on mothering. However the wide ranging, unique, individual, complex and dynamic nature of the experiences of adoptive mothers in Queensland presents both identifiable similarities, and an unexpectedly rich diversity of experience. The findings from this research, and the conclusions drawn, have important implications for social work practice in the area of adoption and for adoption policy, service delivery and future research. In particular, the contribution made to the theoretical social work knowledge base with reference to adoption practice is of importance.

Additionally, the experiences of adoptive mothers revealed in this study suggest that this research can also offer insight for informed social work practice with many mothers in this society.

# **PART I**

## **INTRODUCTION**

### **CHAPTER ONE**

Adoption, the concept of child nurturing and rearing by those other than the child's biological parents, is historically well established, and appears to be sanctioned in many, if not most cultures (Benet 1976, Humphrey 1969, Herbert 1984, Iwanek 1989, O'Shaughnessy 1988, Tizard 1977, Triseliotis 1973). Initially a very flexible practice, family groups often cared for their own, this being considered part of maintaining the extended family by offering alternatives and support to parents, and providing a more effective upbringing and more effective training for children. Further, informal adoption provided the means by which families and communities could fulfil obligations and build alliances (Iwanek 1989, Tizard 1977, Cole and Donley 1990). Historically, in many societies adopted children (and adults) also were desirable for additional labour, and for political requirements, ancestral worship, and other religious customs (Bailey 1985, Iwanek 1989, Kellmer-Pringle 1967, Tizard 1977).

In some societies a child was the child of the group, community or caste belonging to, and the responsibility of, that community. Parents did not have sole authority over decision making concerning the child, and removal of the child from the extended family or the community would have been considered unacceptable in those societies (Ban 1989, Boss 1992, O'Connor 1990, Sommerlad 1977). With the coming of the Industrial Revolution, extended family systems began breaking down, giving way to and being fuelled by, more individualistic values. At the turn of the 20th century legal codes were beginning to be considered necessary to govern the process of adults other than those to whom a child was born providing alternate permanent care.

Adoption is most often defined as the acquisition by an individual, through a regulated transfer process, of a new set of kinship ties which supersede the old ones either wholly or in part. It is a social process, where a child (or adult) transfers or is transferred away from one set of kin relations and is received into another, and it is a process which is sanctioned by the relevant customs or laws (Barker 1987, MacDonald 1980, Winick 1989). In

many contemporary adoption instances, babies and children many of whom are biologically unrelated to their prospective parents, are welcomed into new families through a legal and social process rather than through the process of birth (Kaye 1990). Adoption has most often been presented as a lifelong and intergenerational process, through which adopted children become children of adoption and the new parents become adoptive parents (Boss and Edwards 1992, Kadushin 1980, Rowe 1982, Silverstein and Kaplan 1990, Small 1987).

Open and closed adoption are also referred to in the literature. Closed adoption refers to that process of adoption which largely evolved in western society during a period between the 1930's and the 1980's to mean the permanent sealing of adoption records and complete transposition of adoptive parents into the role of parents as if the child was born to them. Closed adoption was, during the mid to late years of the twentieth century, the adoption process most often practised in modern western cultures (Baran and Pannor 1990). Although there appears to be no universally accepted definition of open adoption, this involves, to varying degrees, communication and consultation between adoptive parents and birth parents. All parties to the adoption retain rights to information concerning that adoption, and original birth certificates are available to the adoptee. However, legal and child rearing rights are transferred to the adoptive parents (Adamec and Pierce 1991, Bagley, Young and Scully 1993, Baran and Pannor 1990, Boss and Edwards 1992, New South Wales Law Reform Commission 1994). Open and closed adoption may exist on a continuum rather than exist as discrete categories.

A well argued and socially accepted western society view of adoption is that adoption was most often a means of serving the needs of several marginal groups. These were the needs of children (orphans and foundlings), the needs of unfortunate, yet undeserving single mothers, and the needs of infertile, childless couples (Iwanek 1989, Rosenberg 1992, Shurlee Swain 1992). From all appearances there existed a complementary solution to the less than desirable conditions of illegitimacy and infertility.

In the past, for single mothers experiencing the "social crisis" of an unplanned pregnancy (Midford 1991,1), adoption was seen to provide one of very few options. For these women who would otherwise bear the brunt of society's moral condemnation, and face discrimination, disapproval, and ostracism of themselves and their illegitimate babies, adoption was seen to

be the perfect answer (Bailey 1985, Inglis 1984, Slaytor 1986, Summers 1975, West 1991). For orphans, foundlings, and illegitimate babies in need of new families, securing caring couples or families to provide permanent new homes came to be seen during the twentieth century as most appropriate. It also relieved the State of the burden of care (Shurlee Swain 1992, Burns, Goodnow, Chisholm and Murray 1979).

For those experiencing infertility problems (a large proportion of prospective adoptive parents in western society) adoption became an easy alternative. Although a societal belief existed that genetic inheritance of immoral qualities and "bad blood" was a possibility, nevertheless adoption offered renewed hope (Herbert 1984,88). Adoption for these couples offered a socially acceptable solution to securing a much desired family, and to securing the validated social role of parent. Through the process of adoption many couples were able to satisfy emotional needs to build or extend a family, whilst also securing heirs.

A broader view of adoption may be that modern adoption is the result of a socially constructed "supply and demand", a situation resulting from many factors (O'Shaughnessy 1988,232). Traditionally adoption could be said to have been an accepted, formal or informal method of introducing a alternate social placement for the child. However, it is apparent that the rigidly applied social sanctioning of some western society behaviours may have contributed to the supply of and the demand for babies for adoption which developed during this century.

Probable contributing factors to the supply of children for adoption in the first half of this century were western societies' rigid religious and societal attitudes. Such attitudes may have been permissive enough to covertly accept extra-marital sexual activity, and this may have been a gendered acceptance (acceptable behaviour for males but not females), nevertheless anything other than conception and parenthood within marriage was strictly abhorred and illegitimacy was taboo (these previously rigid social attitudes have undergone radical changes in the last 20 years). A breakdown of the extended kinship system in many cultures resulted in a vast decrease in the availability of support for single mothers, this support being previously available from the family kinship group. This also contributed to the available supply of babies for adoption (O'Neill 1991, O'Shaughnessy 1988).

Facilitating the construction of the demand for babies were several other evolving societal taboos. These included an often Christianity-based abhorrence of any deviation from monogamous relationships, thereby eliminating the polygamous relationship option often practised in non-western cultures. Further, an attitude in western society which revered fertility, reproduction, and the system of heirs and inheritance prevailed (O'Shaughnessy 1988). These beliefs, seemingly fuelled by developing attitudes of exclusive materialism rather than a more inclusive collectivism, contributed significantly to the increasing demand for babies in the first half of this century.

However, perhaps a most influential factor in the demand for babies was the development of a narrowly defined, socially constructed role of motherhood in modern western society. This ideology dictated that no other valid role really existed for childless married women although childless women "have nonetheless been expected to serve their time for society as missionaries, nuns, teachers (and) maiden aunts" (Rich 1976,252) Childless women were also expected to take up the caring role in the collective care of children and in care for the elderly in the community.

It appears that in many non-western cultures infertile members were rejected (particularly women) and fertility was celebrated, however adoption was practiced with fertile and infertile couples (Ban 1989, Kitzinger 1992). In western cultures adoption appeared to offer one of few available, acceptable, sanctioned strategies for overcoming infertility and for taking up the role of mothering children. For fertile married women it was at times an encouraged and even bountiful method of increasing family size.

### **The Evolution of Adoption Legislation and Adoption Practice**

In Australia the first official adoption policies were introduced in Western Australia with the Adoption of Children Act of 1896, and by the late 1920's most states and territories had established adoption legislation (Hartman and Laird 1990, Inglis 1984, Iwanek 1989). In Queensland the Life Protection Act was amended in 1921 to make provision for the adoption of children under ten years of age. In 1935, following other states, and after an exhaustive study of similar acts in all English speaking countries, the new Adoption of Children Act of Queensland was introduced. As a result of

requests to establish uniform adoption laws throughout Australia, Queensland introduced the Adoption of Children's Act 1964.

In the 1960's the adoption process world-wide was brought to the attention of psychologists, psychiatrists, and social welfare workers, when research at the time pointed to a high rate of adopted children entering the mental health services (Brodzinsky and Schechter 1990, Humphrey and Ousted 1963, Kadushin and Seidl 1971, Kadushin 1980, Schechter 1960, Shaw 1984). Slowly, transformation to adoption practice began as a result of those studies, but also as a result of other emerging, popular psychological theories. Recommendations were made for less emphasis to be placed on the perfect matching of a suitable baby to prospective adoptive parents, and instead, greater emphasis was placed on the more careful selection of adoptive parents. Paramount was to be the welfare of the child (Brodzinsky and Schechter 1990, Picton and Boss 1981).

What may have also greatly influenced the more careful selection of applicants was the reduced availability of non-relative babies for general adoption. These changes mostly have been attributed to changing societal attitudes and values toward illegitimacy in recent decades, the acceptance of single-parent families, the availability of contraception, and the sanctioning of termination of pregnancy under certain conditions (Small 1987, Triseliotis 1989, West 1991). Additionally, of major significance in Australia were better welfare support services, and the introduction in 1973 of income maintenance for single supporting parents. According to Zabar and Angus (1995), since the peak years of 1971-72 there has been a 92% reduction in babies available in Australia for adoption.

More recent changes to adoption legislation and policy in many countries, particularly the unsealing of closed adoption records to make available information on original family kinship ties, have been attributed in part to the results of the early studies indicating larger numbers of adopted persons using mental health services (Brodzinsky and Schechter 1990). Also making important contributions to these changes was research in the 1970's which recognised the self-identity crises faced by many adoptees, and pioneering work documenting the traumatic, and long-lasting grief of many relinquishing mothers (Inglis 1984, Shawyer 1979, Sorosky, Baran and Pannor 1984, Triseliotis 1973, Winkler and Van Keppel 1984)

Currently legislative changes in all Australian states have resulted in the rejection of the previously mandatory "clean break" approach, permitting,

under varying conditions, the disclosure of identifying information and the obtaining of original birth certificates. At least one state, Victoria, now offers and encourages a more open system for future adoptions. Other states, including Queensland, offer conditional, limited communication between the birth parents and the adoptive parents during the first twelve months after the adoption order has been finalised.

It is, however, erroneous to regard such an apparent reversal of previous clean break policy as a radical move away from acceptable, international, historical adoption practice. Indeed, at least for some adoptees, there have always been legal avenues for securing original copies of birth certificates, for example in Finland, Holland, Israel, and Scotland (Iwanek 1989).

In Queensland, although recent legislative changes (Adoption of Children Act Amendment Act Qld 1990, and 1991) have made it possible for adult adoptees and birth parents to obtain identifying information (or place an objection to the release of information and contact), the process of legal adoption still remains a process of permanent, non-negotiable substitute care for children. In the case of general baby adoption by non-relative adoptive parents (the focus of this thesis) the child is relinquished for adoption by the biological parents who give up all parental rights and obligations. The child, and the accompanying parental rights and obligations, are accepted by the new adoptive parents.

### **Taking up the Mothering Role for a Lifetime**

In the role of new legal and social parents, the adoptive parents are totally responsible for performing the major socially constructed role of parenting, and all that it entails. As with most new parents, adoptive parents strive to nurture the new family member, and they are similarly faced "with the rather daunting task of transforming helpless, unsocial, and self-centred infants into more or less self-supporting, sophisticated and responsible members of the community" (Herbert 1984,88, Small 1987, Rowe 1982).

For many adoptive mothers, most often the primary care givers, the arrival of the new baby also enables them to finally lay claim to the mothering role. Previously perceiving themselves to be shunned by a society that has no place for the childless, they may now enter and claim entitlement to the world of motherhood, and enjoy the genesis of their own family. At last qualified, though perhaps with less than fully endorsed membership

(Kadushin 1980), they can experience the joys, pains, rich rewards and wonderful fulfilment that motherhood has so long promised. For adoptive mothers the fantasy now becomes the reality, and the impossible possible, as they joyfully embrace their new maternal role.

However it has been well argued that the reality of motherhood, often shrouded in mystery and allure, is sometimes less than the wondrous, deep and rewarding experience most new mothers have come to expect. Some believe that women are beguiled into expecting unrealistically high emotional, and psychological rewards from mothering as a result of many factors. These include the completeness of their internalisation of the modern mothering ideology, the media-assisted social construction of motherhood, and an encouraged conspiracy of silence surrounding mothering in this society. Further, as a result of the trend towards small families with closely-spaced siblings, women may fail to experience and therefore fail to comprehend the realities of the work of child care. Additionally, as a result of many of these factors, many women may have an ill-conceived understanding of the limited extent to which western society offers appropriate support to new mothers.

It is acknowledged that for new mothers, the awe, the happiness and excitement, and the wonderful feelings of triumph and pride, often do exist. What may also exist after the arrival of any new baby, are many overwhelming, unexpected, and confusing thoughts and feelings as new mothers attempt, often with little social support or experience, to care for their baby. Such thoughts and feelings include those of anxiety, inadequacy, exhaustion, and disillusionment, and also may include feelings of anger, fear, guilt, loneliness, isolation and even depression (Brodzinsky and Schechter 1990, Dix 1987, Cox 1986, Gruen 1990, Handford 1985, Oakley 1984, Phillips 1985, Mercer 1975, Summers 1975, Welburn 1980). For some new mothers the reality of motherhood seems a far cry from the ideology.

For adoptive mothers, a somewhat hidden group of mothers, there may be many unrecognised, shared similarities to all mothers. These include the joy, the excitement and happiness of becoming a mother, and may also include a sense of pride, relief and satisfaction in achieving the long awaited, coveted, goal of motherhood, and in bringing home a new baby to join the family. Perhaps also included in these shared similarities are unrealistically high expectations the mother holds of herself as mother, and

those high expectations of mothers held by significant others and the society in general. Further, for some women, there are totally unexpected and unwelcome thoughts and feelings, as these mothers, perhaps with little social support, travel the idealised road to motherhood.

For many adoptive mothers, there may exist unique differences from other mothers both preceding and following the adoption. These include the discovery of an infertile marriage, for some, multiple miscarriages or the death of an infant, personal infertility, the disempowering nature of the whole adoption process, and the unbearably long waiting time (currently 6 to 10 years in Queensland). Differences also include the often unheralded arrival of their baby, anxieties concerned with raising a baby biologically unrelated to them, and perhaps the confusing feelings of having many obstacles yet to traverse, rather than the expected resolution of all past difficulties and differences (Brodzinsky and Schechter 1990, Kirk 1964, Silverstein and Kaplan 1990). For many there is a time of adjustment after the adoption of a child, this also including adoption of a child into an already existing family.

Still, after the initial, sometimes major adjustments, many adoptive mothers may look forward to both weathering the difficulties, and enjoying the rewards experienced throughout the lifelong years of mothering. However for some adoptive mothers, adoptive motherhood status may prove to be less than completely accepted by the community, or by their extended families. It may also prove to be more demanding, exhausting, and worthwhile in the early years, and more challenging, anxiety-producing and rewarding in the later years than they had foreseen.

Adoptive mothers have been expected, most often without support from professional workers, to cope with their situation of infertility, the loss of their biological role, the loss of their idealised natural child, and the loss of their unique future genealogy. They must cope with the frequently recurring reminders of their lifelong infertile status which was not "cured" by adoption (Aitken 1983,18). Further, they have been expected to cope with the gain of an instant addition to the family, with the uncertain timing of the child's arrival often precluding adequate preparation (Frank and Rowe 1990).

Many professionals have argued that after the adoption order has been made, there are few differences in parenting. Confusingly, for adoptive parents, prior to the adoption professionals are emphatic that adopting a child is very different to having one's own child. Nevertheless, the

expectations of professional adoption workers are that adoptive parents will cope competently yet unsupported with their own unique developmental tasks, and those of their adopted children across the adoption life cycle (Rosenberg 1992). Similarly it is assumed they will cope with and easily accommodate any repercussions from changes to the policy and practice of adoption.

At certain times in the recent past, and this may be particular to some countries and states, adoptive parents were often instructed to embrace the "clean break", "raise as if born to you" and "least said soonest healed" approach to adoption (Iwanek 1989, Rosenberg 1992, Slaytor 1986,15). Goodacre found that most adoptive parents "put themselves more or less unreservedly into the hands of their agency", and accepted the dictum of the time (1966,64,65). According to Boss and Edwards (1992,26) a section in the adoption Act in every Australian State and Territory gave similar instruction (and this is still so in some Australian states including Queensland). These were:

The adopted child becomes the child of the adopter(s), and the adopter or adopters become the parent or parents of the child as if the child had been born to the adopter or adopters in lawful wedlock.

The adopted child ceases to be a child of any other person who was parent (whether natural or adoptive) of the child before the making of the adoption order, and any such person ceases to be a parent of the child (Boss 1992, 26, ACA (Qld) 1964-1991 s. 28).

It may be that in the past adoptive parents did not always pass on accurate information to their adopted child about the child's origins (Iwanek 1989, Triseliotis 1973). However it appears that in many instances, as a consequence of the secrecy provisions, and the Children's Services Departments' policies and practice, adoptive parents were often themselves "starved of information" (Boss and Edwards 1992,19).

Little information was given to adoptive parents, indeed little information was gathered by Children's Services Departments, this evidenced in the "paucity of information" available to some adoptees when they apply for information about their origins (Triseliotis 1973,40). Additionally it has been suggested that adoptive parents were given filtered, "relevant" personal information about the child who was to become a part of their family (Goodacre 1966,67). Concerning unpleasant information, some agencies

"were not keen to pass on such information", this supposedly in the adoptive parents' best interests (Triseliotis 1973,40). Glazer (1990) suggests information was given to adoptive parents which was deemed to be "what they wanted to hear" although the truthfulness of such information could be questioned (Glazer 1990,108).

Some agencies had a policy that for "all intents and purposes, the child's natural parents are dead, and there was little point in delving into the past" (Goodacre 1966,65); adoptive parents now replaced the natural parents. Adoptive parents were encouraged to just go home and love the baby as their own (Iwanek 1989). Seemingly adoptive parents were guilty of no more than accepting official recommendations, these recommendations appearing to many adoptive parents to fit well with their emotional needs, and with community understanding of adoption at the time.

Recently, legislative changes in many countries, and in some Australian states have heralded a very different, more open approach to adoption. Legislatively speaking, motherhood may now appear to be less exclusive, and less lifelong than was previously promised to adoptive mothers by professionals, and by the society.

Again unsupported, and with little access to the informed knowledge of contemporary researchers and policy makers, adoptive mothers are expected to accept and indeed wholeheartedly embrace this new legal approach to adoption.

In Queensland the once espoused permanent "clean break" theory no longer applies (ACA Act Amendment Act 1990,1991). New legislation which is applicable retrospectively, means previously closed adoptions are so no longer. For quite a number of adoptees, this may mark the end of "genealogical bewilderment" and self-identities lost in limbo (Triseliotis 1973). For many relinquishing mothers (and fathers), these changes may enable a welcome reconnection with a lost child (Shawyer 1979). However, according to Boss and Edwards (1992), while previous legislation appeared to favour adoptive parents, it may be that recent legislative changes mean "the least accommodated party in the adoption triangle now is the adoptive parent" (Boss and Edwards 1992,26).

For the adoptive mothers, who had extended their family through adoption, or who had pursued one of the few legally, and socially sanctioned alternatives to infertility and childlessness previously available, these

retrospective legislative changes may, or may not have initially triggered fears and may subsequently have engendered feelings of protectiveness, indignation, uncertainty, anxiety, confusion, anger or grief. While some adoptive mothers may not be fearful over the opening of previously closed records, for others such changes may have meant a reopening of the painful wound of infertility, and prompt a revisiting of the emptiness of childlessness. They may have given rise to perceived fears of invasion of their child's and the family's privacy, and may induce fears of loss of their unique mother to child relationship with their son or daughter. The changes may have even induced fears of the possibility of the breakdown of their non-biological family, and may trigger thoughts of wonderment at their now seemingly transitory or even illusionary permission of entry to the status of motherhood and to all its intergenerational obligations and rewards.

### **The Research in Context**

The overall aim of the research was to reveal the experiences of adoptive mothers as they mother their adoptive children across the life cycle. Whilst there has been well recognised research in the area of adoption, such research has focused only on certain key areas. In the 1960's and 1970's research was mostly conducted to see how adopted children fared, as a response to a perceived rising incidence of adoptees using mental health services (Humphrey and Ousted 1963, Kirk 1964, Schechter 1960, Shaw 1984), and to the number of adoption disruptions occurring (Kornitzer 1968, Kadushin and Seidl 1971). This research concentrated mainly on gaining follow-up information on the children's adjustment, and progress (Bohman 1970, Jaffee and Fanshel 1970, Kadushin 1980).

Whilst some knowledge existed from the adoptee's perspective (Kirk 1964, Sants 1964, McWinnie 1967) knowledge in this area of adoption expanded when, in 1973, Triseliotis undertook pioneering research with adult adoptees in Scotland who sought information about their origins. He concluded that adoptees may suffer from an incomplete sense of self, often resulting in identity questioning, when information about their genealogical origins is incomplete or unavailable (Triseliotis 1973). Findings from Raynor (1980) further established the point of view of those growing up adopted.

It was not until more recently that the plight of the less visible relinquishing mothers was revealed, and the enduring nature of grief many of them suffered recognised. This was a result of several research projects conducted, including a study in 1978 by Sorosky, Baran and Pannor, of birth parents. Such revelations were enhanced by further illuminating writing and research in this area (Inglis 1984, MacIntyre 1977, Shawyer 1979, Winkler and Van Keppel 1984).

However, it seems that inquiry into the lived experiences of adoptive parents has not attracted the same degree of interest as has research with other members of the adoption circle. Literature does exist on how to raise adopted children (Benet 1976, Kadushin 1980, Melina 1989, Powell 1995, Smith 1984,), yet it is unclear how such literature has developed, when little research knowledge appears available on the experiences of this third party to adoption. Indeed Hapgood (1984,68) comments that in considering the term "knowledge base" with regard to any form of professional practice, it is important to distinguish between the knowledge gained from research, and knowledge held by skilled practitioners. Whilst not denying there is a wealth of worker expertise in adoption agencies, Hapgood's review "suggests that social workers engaged in adoption practice operate within a very restricted knowledge base", as documented, evaluated or validated through research (Hapgood 1984,78).

Research findings are available in relation to adoptive parents' contribution to adoption breakdown, the potential impact of infertility, their attitudes to the differences between natural and adoptive parenting, and their attitudes to the search for birth families (Humphrey 1969, Kirk 1964,1984, Hoopes 1990, McWinnie 1967, Midford 1993, Triseliotis 1973)). However the lived experiences of adoptive parents across the adoption lifecycle seems little explored in the literature. This is particularly so for adoptive mothers' experiences of the adoption process and of the adoptive mothering role in Australia, although a notable exception, making significant contribution to the international literature in the area of adoptive mothering concerning the bonding process between mothers and their adopted children, is research undertaken by Smith and Sherwen (1988). The otherwise apparent oversight of inquiry into gaining vital knowledge concerning the adoptive parent's story, particularly adoptive mothers' experiences and their role in adoption, is evidenced tellingly by an Australian practical guide to adoption by Snow (1983) who writes:

"In attempting to create a complete and accurate picture of the three sides of the adoption story, contributions were sought from people whose lives have been affected by adoption or whose professional work has brought them in touch with people affected by adoption. This group includes social workers, a child psychiatrist, a solicitor, natural parents and adult adoptees" (1983,12).

While this is a very useful guide to adoption legislation and practice in Australia, any representation of a third perspective of adoption appears conspicuous by its absence in the above statement, and the "complete and accurate" picture is still incomplete.

The study on which this thesis is based seeks to contribute to the picture by exploring how some women experience their role in adoption, when their's is the role of mothering an adopted child from early infancy. The research seeks to document, and to contribute to an understanding of the mothering experiences of adoptive mothers in light of the experiences of all mothers in this society. How adoptive mothers negotiate the often idealised road to motherhood, and how they experience significant transitions in the adoptive mothering role across the adoption lifecycle is explored and documented.

Some may question the importance of research which documents the experiences of a reducing, minority group of mothers. In Queensland from the peak years in adoption (1968-1972) up until 1994 almost twenty thousand adoption orders were made, with approximately half this number made up of non-relative baby adoptions. Many of these adoptees and their adoptive families may now be facing issues surrounding contact with birth families (Clare 1991). Further, while numbers of babies available for adoption continue to fall, in the last five years approximately five hundred non-relative adoption orders have been made in Queensland (Zabar and Angus 1995). These are not insignificant numbers of adoptive mothers.

Whilst it is acknowledged that adoptive fathers' experiences should in no way be diminished, their story could not be accommodated into this research on adoptive motherhood (although several brief comments from an adoptive father present during the interviews with the adoptive mother, have been included). With reference to documenting and understanding the experiences of women, du Bois (1983) maintains that:

"The language and the theories we have to work with still lack the very concepts by which the reality of women's lives can be named, described and understood. Our work needs to generate words and concepts that refer to, that spring from, that are firmly and richly grounded in the actual experiences of women. This

demands methods of inquiry that open up our seeing and thinking, and our conceptual framework, to new perceptions that actually derive from women's experiences" (du Bois 1983 p110).

Further Bernard (1973,787), writes that:

"A great deal of research focuses on men with no reference at all to women, but when research is focussed on women it is almost always with reference to men. If comparisons are not made, the research is often viewed as incomplete".

This study, offering a unique perspective on mothering through the words of adoptive mothers, is considered to be not incomplete. It is fully acknowledged that the perspective offered in this thesis, and any knowledge gained during this research process, is the result of research documenting the important experiences of adoptive mothers, and not those of adoptive parents. Further acknowledged is that future research incorporating the experiences of adoptive fathers could shed further, valuable light on the experience of parenting adopted children. However, in this thesis terms such as mothering, motherhood and mothers are not replaced by more gender neutral terms such as parenting, parenthood, and parents (Rubin and Babbie 1989).

With particular reference to social work research, Rubin and Babbie (1989) assert that the aim of this type of research is primarily to provide the practical knowledge needed to aid social workers accomplish the humanistic goals of social work practice. This they state, often involves the seeking of information and knowledge to improve the lives of others, and the exploration and examination of topics which are relatively new and unstudied.

Adhering to these established social work research principles, which seek to provide new knowledge for improved practice, the research described in this thesis aims to document the previously little researched, lived experiences of adoptive mothers across the adoption lifecycle. It is envisaged that such research will provide data on the reality of adoption for adoptive mothers, this in turn making a valuable contribution to the knowledge base of adoption practice.

In particular an examination of two significant periods in the adoption lifecycle is undertaken. These are the early post adoption mothering period, and a later period involving mothering in the teenage years and the period leading up to and following the availability to their children of non-

identifying and identifying information concerning the adopted children's origins.

Whilst the former is a valuable look at the lived experiences of a group of adoptive mothers mothering babies and young children, and the latter provides important documentation of their (adoptive mothers') experiences of the young adult years of their children, many of the experiences are also offered in light of recent major legislative changes in Queensland (ACA Act Amendment Act 1990,1991). The research is therefore set in the context of a changing face of adoption, capturing a unique picture in the evolution of adoption practice in Queensland.

Methodologically, a longitudinal study may have well suited this documentation of the experiences of adoptive mothers across the adoption life cycle. Unfortunately this was not possible given the research timetable limitations. However the methodology used does allow in part for a quasi-longitudinal perspective, this gained by incorporating adoptive mothers mothering at distinct stages across the adoption life cycle.

This is not to disregard the apparent weaknesses of such a quasi-longitudinal methodology, rather, between-group differences are openly acknowledged as valuable assets in more accurately capturing these adoptive mothers' experiences. These include differences (and similarities) in generational views concerning mothering and the formation of a family through adoption, differences in adoption eligibility criteria (for example infertility, or the 'one other child only' criteria), waiting times, procedures and processes, differences in adoptive mothers' ages, beliefs and expectations, and the changing social climate and changing community attitudes concerning the practice of adoption. Any differing between-group attitudes to changing adoption philosophy, legislation, policies and practice are also considered, as are the overall influence of dominant psychological theories on adoption practice. Such differences could be considered a severe limitation if a comparative study of these two groups was the primary aim of the study, however in this instance it is considered that the diversity of experience has enhanced the ability of the study to document and present to the reader a wide range of unique experiences of adoptive mothers across the adoption life cycle.

The study involved the documentation of information from fifty mothers of adopted children, at least one of whom was a non-relative baby or infant at the time of adoption, and whose adoption resulted in a total transference of

parental responsibilities and rights to the adoptive parents. All of the women in this study are Caucasian, they adopted between the years 1958-1994, and all of the women except two adopted all of their children as babies under twelve months. The vast majority of women adopted under Queensland legislation (90%), and all are living permanently in urban or rural centres throughout Queensland.

Adoptive mothers, still mothering babies and infants in the early years of the adoption life cycle, were sought in order to examine, in particular but not exclusively, the early post adoption period. This portion of the research documents the range of experiences of adoptive mothers prior to, and following the arrival of the new baby, and it explores many issues which may be confronted early in the adoption life cycle, and prior to the school years.

Adoptive mothers mothering in later stages of the adoption lifecycle were also sought, in order to explore, in particular but not exclusively, the later school and teenage years and the teenager-to-adult transition years of their children. In this part of the research the adoptive mothers' feelings and concerns associated with the availability of non identifying and identifying information were documented, and the prospect of, or the experience of, their child's search and reunion with the birth mother and family of origin, discussed. With both groups the research examined the process of the transition to first time motherhood for most of the adoptive mothers, while for other adoptive mothers it was an examination of the inclusion of an adopted baby into an already existing family.

The research also focuses on mothering. Highlighted are the enormous pressures and expectations inherent in this society's image of women as fertile beings, and as mothers. What is further highlighted is the unique, rewarding yet constant demands of the mothering role, and indeed the sometimes overwhelming and potentially health threatening demands of the mothering role in this society.

The research used predominantly qualitative research methods and is guided by feminist research principles in the documentation of the experiences of adoptive mothers in their own terms. Several standardised scales were introduced into the interviews. Such methods serve to further illuminate a range of thoughts, feelings, experiences and needs of adoptive mothers. It is considered that this research can benefit adoptive mothers by making available valuable information concerning their unique situation,

this having the potential to act as an empowering and educational process for these mothers, as they gain insight into, and affirmation and validation of, their own positive and negative experiences across the adoption life cycle.

### **This Researcher**

During the research process described in this thesis, I have adhered to the ethics and values of social work practice and research, and at all times appreciated and respected the worth, dignity, and ultimate rights of individual participants (Royse 1991, AASW Code of Ethics 1989). As researcher, I also acknowledge the ethical responsibilities inherent in research guided by feminist principles, which calls for the location of myself in the research.

My fascination with the area of adoption arose initially from my personal experience of, and interest in, women's lived experience of new motherhood. I was also very interested in the construction of the mothering role in this society. Earlier, as a young woman very enthusiastic to mother, I had coped with the many monthly disappointments, and with the growing evidence that my fertility could no longer be assumed. I had impatiently waited to mother through examinations, surgery, and several courses of fertility drugs. I had briefly considered that adoption or fostering may be my mothering future but then quickly discarded these thoughts, not wanting to acknowledge such a nightmare as irreversible infertility. For me, permanent infertility was not my destiny, and I became the mother of two biological children.

It was as a new mother of my first child that I then personally experienced the shock and sadness, after so eagerly awaiting motherhood, of feeling less than adequately equipped with "maternal instinct". I also experienced guilt, anger, confusion, and distress at my lived reality, which was so different from my expectations of "maternal bliss". Other women offered their thoughts. These were that perhaps my disappointing and traumatic experience of the birthing process, including six hours labour followed by emergency Caesarean section, was to blame (although I was lucky I "had experienced it the easy way in the end"). Also considered relevant to my emotional turmoil were the compounding difficulties of trying to adjust to the new motherhood routine alone (as a requirement of his employment, my

husband went away for six weeks just two days after my son and I arrived home from the hospital), and, of my hormones. Perhaps I should just be happy with a healthy baby, I remember thinking at the time. I was grateful for the few helpful friends I had, including one mother of one biological and two adopted children who did not appear to differentiate between her mothering experiences.

I felt disillusioned and weary of the hard work of the new job of mothering and resentful of the apparent silence surrounding anything less than perfect, joyful or even exceptional mothering (as illustrated in the popular literature coverage of amazing new mothers in extreme circumstances who appear to be joyfully fulfilled). I wondered if many mothers had similar experiences to mine, of the emotional highs and lows of mothering a young baby. I further wondered if this was regardless of birthing experiences and the reported great hormonal upheavals but, rather, was possibly influenced by other factors.

Several years after the birth of my second child I decided to undertake social welfare studies as a mature-age student. During my undergraduate degree the concept of postnatal depression was presented to us alongside many other medical and psychological conditions, in a subject called Psychopathology. Suddenly memories flooded back, of my early mothering experiences of exhaustion and confusion, and of the feelings of distress, anger, and guilt. I also recalled my musing at the time over the possible influence of factors other than biological and hormonal impacting on new mothers' lives. This revisiting of these experiences encouraged me to gain further knowledge in the whole area of maternal conditions in the post partum period.

Subsequently I undertook, as a partial requirement of a social work honours program, a research project with a group of mothers I had decided may be able to make a contribution to knowledge concerning motherhood; a group of adoptive mothers. I was curious to see if these women were a group of mothers who had, in the early post adoption period, had similar needs and experiences to those of other new mothers. With such a sample the experiences of new motherhood could be considered without the complex influences of the birthing process and the accompanying physiological changes.

This proved to be a small but fascinating exploration into the mothering lives of a group of women in North Queensland who had adopted children.

It generated data which suggested evidence of many differences but also many similarities of experience for adoptive and non-adoptive mothers, including the joys and satisfaction, but also including the stresses of mothering, in the early post adoption period. In addition it drew my attention to other legal, social, emotional, psychological, political, and also social work practice issues in adoption which were impacting on the lives of adoptive mothers and their children across the adoption life cycle, and which were in need of further research (Gair 1992).

The honours study opened up the world of adoption for me, and provided an opportunity for me to develop my present fascination with the whole area of adoption. The honours study also provided an opportunity for me, through semi-structured interviews, to enter the mothering world of other women, to listen and to learn as women recalled and told their stories, and the opportunity sometimes to share my own different yet similar experiences. It appeared to me that these women had received few opportunities to tell their stories, or to have their experiences affirmed. Interestingly, upon reflection, this process in turn, somehow provided reassurance and validation of my own experiences as a new mother.

It also appeared to me that the findings of the honours study provided support for my personal "theory", that there exists many insufficiently recognised major environmental factors which inhibit or enhance the transition to motherhood and the satisfactory undertaking of the role of mother. I felt impelled to continue my research interests in the area of mothering, and in addition, to expand current knowledge concerning the issues that were important in the lives of adoptive mothers as identified by the women in the honours research. When the opportunity arose in 1993 I took up the challenge to continue research in this area, and I began work on this doctoral thesis.

### **The Presentation of This Research**

O'Shaughnessy (1994) writes that methodologically and epistemologically "Adoption needs to be approached in an historically respectful, discourse critical and socially connected way" (1994,8). This is the approach I have taken during this adoption research and in its presentation. The thesis is presented in five parts incorporating twelve chapters and using Norman Denzin's Interpretive Interaction model of the process of research. Denzin's

(1989) model consists of six steps (In this thesis, steps one and two are in the reverse order to that presented by Denzin 1989).

Part One consists of the Introduction. Part Two is Deconstruction, comprising chapters Two, Three, Four and Five. Denzin (1989,51-54) identifies "Deconstruction" as the critical analysis of prior conceptions of the phenomenon available in the existing theoretical and research literature. In Chapters Two, Three, Four and Five the literature is critically examined, including an historical, contemporary, research and theoretical review of adoption and an examination of the mothering literature.

Part Three, Framing The Research, consists of Chapters Six and Seven. Here Denzin's steps "Framing the Research Question", "Capture" and "Bracketing" are incorporated. Denzin (1989,48-51) describes the step "Framing the research question" as including the conceptualisation of the phenomenon to be studied and involving the taking of steps towards the formulation of the methodology, in order to ask *how* the phenomenon is experienced. "Capturing" the phenomenon includes locating the subject matter within the natural world and obtaining multiple instances of it, and "Bracketing" (data analysis) is where the data is reduced to its essential elements, cutting it loose from the natural world, so that its essential structures and features may be uncovered. In this thesis, in Chapter Six the research methodology is introduced and justified in detail. The data analysis process is also described in detail in this chapter.

According to Denzin, "Framing the research question" also includes researchers locating their personal history within the research process, and the researchers "working outwards from their own biographies" (1989,49). Chapter Seven locates the researcher and her biography within the subject matter, and discusses the subjective experience of the researcher during the research process. The next steps in Denzin's model are those of Construction of the phenomenon, and Contextualisation (1989,58-62).

According to Denzin "Construction" moves from "Bracketing" (data analysis) to reassemble the phenomenon back into a coherent whole. In Construction, Part Four of this thesis consisting of Chapters Eight, Nine, Ten and Eleven, women's words which were bracketed in the analysis of the qualitative and quantitative data, are further examined and presented in detail. Analysis continues during this stage as new constructions from the data emerge and are developed.

"Contextualisation", Denzin describes, begins with the essential themes disclosed in "Bracketing" and "Construction", and seeks to relocate the phenomenon back in the natural social world. Contextualisation, Part Five of this thesis, consists of the final chapter, Chapter Twelve, where the overall conclusions are presented, and recommendations are made for adoption practice, policy and research contexts. Incorporated into Chapter Twelve is a theoretical contribution to the knowledge base informing adoption practice. Contextualisation will continue further with the placement of the findings of this thesis, through publications, into both the adoption and adoptive mothering literature, and the broader literature on mothering.

## **PART II**

# **DECONSTRUCTION**

### Literature Review

#### **Introduction**

According to Denzin (1989,51) a

"deconstructive reading of a phenomenon involves a critical analysis of how it has been presented, studied, and analysed in the existing research and theoretical literature".

He suggests that such a deconstruction lays bare prior conceptions of the phenomenon in question, and includes how the phenomenon has previously been defined, and observed, a critical examination of the underlying theoretical models used in prior studies, and a presentation of the preconceptions and biases that surround existing understanding.

According to O'Shaughnessy (1994) adoption discourse has been characteristically "non-comparative, ahistorical, universalist-atomist (assuming the realities of adoption are universally homogeneous), atheoretical, acritical and unimaginative" (1994,31). This literature review presentation incorporates an examination of historical developments in adoption, previous local and overseas research, and alternate cultural practices in adoption including adoption in Aboriginal and Torres Strait Islander cultures. It further includes an examination of comparative adoption legislation, practices and developments in Britain and America, and examines how these changes impacted on Australian adoption practice. A theoretical overview is also presented. Additionally, this presentation introduces a different, broader perspective on adoption by illuminating the role taken up by adoptive mothers.

Part II consists of four chapters. In Chapter Two the historical context of adoption is retraced through the literature, and international, and national adoption practice and social work practice is located within this historical context overview. Incorporated into this review is an examination of previous and present Queensland adoption legislation.

In Chapter Three a research context is developed with an examination of international early and more recent adoption research.

In Chapter Four a number of theories are presented, to offer guidance towards an understanding of previous and present directions in adoption.

This is followed in Chapter five by a review of the literature concerned with historical and contemporary mothering, and with the range of emotions experienced by mothers in this society in the period following the arrival of a new infant. The theoretical underpinnings of current knowledge concerning postpartum mothering experiences are examined, and relevance of this knowledge to the experience of adoptive mothering is postulated.

In this review of the relevant literature, an overall understanding of the differing perspectives of those key persons located in the adoption process is sought, but in particular, the primary focus is on exploring current knowledge of adoptive mothers raising adopted children, and this is maintained throughout the literature review.

The review highlights the limited information and knowledge acquisition available through the adoption or the mothering literature concerning the lived experiences of women mothering adopted children.

## CHAPTER TWO

### ADOPTION: AN HISTORICAL CONTEXT

#### **Introduction**

In this chapter the international evolution of adoption is detailed through an examination of literature describing British, American and Australian adoption history, and including cross-cultural and customary adoptions. Initial adoption legislation in Australia was developed ahead of British legislation and parallel to many American and Canadian states. However early and ongoing development in adoption legislation, policies and practice in Australia were influenced by British law and by the development of international discourses and laws on adoption. Australian adoption laws to varying degrees reflect past and present international trends and they are examined in this context.

#### **Ancient History of Adoption**

The Hammurabic Code of Babylon (2285 BC.) is the first known recorded code used to direct adoption practice (Iwanek 1989, Adamec and Pierce 1991). Adoption in one form or another has featured as a social institution in most societies, from the Hindu Laws of Manu, written around 200 BC., to Greek mythology where Hercules was adopted by Hera and where "the gods viewed it as a bond as close as true birth" (McWinnie 1967,1). In the legend of Oedipus, the ill-fated King of Thebes was found as a child on a mountain-side. He was welcomed by Polybus, King of Corinth, who adopted him as his own. Hebrew history has Moses adopted by Pharaoh's daughter, and the ancient Romans practiced adoption, including Julius Caesar who continued his dynasty by adopting his nephew Octavian, who became Caesar Augustus (Adamec and Pierce 1991). According to Iwanek (1989,1) in many primitive societies adoption was practiced regularly

"as a means of strengthening the extended family and society as a whole by weakening the exclusive bond between parents and their children.

Cooperation and goodwill were promoted by dividing parental functions"

Adoptions were predominantly open transactions where family obligations and family tensions were relieved, and parental responsibilities, tasks and obligations were divided, or superseded (Benet 1976, Iwanek 1989).

According to Cole and Donley (1990) adoptions were also used as "a peacekeeping device", to build alliances between families and clans, and were even a legitimised form of "hostage taking" (1990,274).

In Egypt, Ancient Greece, Ancient Rome and in India and China, adoption primarily served the needs of adults. In many societies men with legitimate heirs were prohibited from formally adopting, as were women in some instances, however informal adoption also occurred. (McWinnie 1967, O'Shaughnessy 1989, Tizard 1977 Herbert 1984). In most cases, after consideration of kinship structures, the adoption of any male or female child was acceptable, although adoption normally involved the acquisition of sons. Adoption of adults was also common, and this process was labelled "adrogation" in ancient Roman times, however if a child became a legal heir through a similar process it was called adoption (Adamec and Pierce 1991, xviii). Such adoptees were not only secured as heirs, but also for religious rituals, such as to administer post-death rites, the performance of which, in some situations, could only be undertaken by a son. For some religions, adoption was not acceptable, for example some Islamic cultures have interpreted the Koran as banning adoption, however more informal alternate care of children still occurred (Adamec and Pierce 1991, Iwanek 1989). Under Roman Law for a child born out of wedlock "no sense of shame or inferiority was associated with his status" (McWinnie 1967,2).

In other early societies, inheritance claims were only through blood lines and no claims could be made by the adopted person (Baran and Pannor 1990), however adoptees were secured for other reasons, including to carry on a father's craft, to support childless adults in old age, or for political purposes (O'Shaughnessy 1989). In some societies female children were adopted as priestesses to serve to legitimise rulers in influential spheres (O'Shaughnessy 1989,52,53). O'Shaughnessy (1989) writes that in most ancient societies, particularly in Rome, the process of arranging adoption, was a "public act" (1989,52,53) that took place in the public domain. It involved legal process but also involved the community in many instances. Public concern about the welfare of the adoptee "was explicit in the adoption laws and processes" (1989,54). O'Shaughnessy writes that "both adoptees and adopters were, in a sense public entities; or at least entities in which the state had a public interest" (1989,55). Further O'Shaughnessy (1989) states that there was investigation of the circumstances surrounding the arrangements thus indicating that at least in the case of some ancient

societies, the interests of the child were considered, although the situation did appear open to abuse (McWinnie 1967).

It also appears that the adoptions retained a public face, with the community continuing to be interested in the new family, and the family maintaining social interactions. This public face of adoption may have survived the transition to early, more formalised modern adoption in some societies more than others, and also in some respects, for example state agencies undertaking the assessment of applicants. However in other respects adoption became a much more private process, for example in the sealing of adoption records and the dictation of the "raise as if born to you" philosophy. Most adoptions in ancient societies probably involved "upward mobility" for the adoptee, however in ancient societies adoptions often did not involve the total severing of the original ties between parent and child.

### **International Moves Toward Formalising Adoption in Legislation**

The state of Massachusetts (USA) was the first to legalise adoption, this occurring in 1851. In 1881 New Zealand became the first country in the British Empire to legalise adoption. Other countries slowly followed suit, including Sweden where adoption legislation was introduced in 1917, although adopted children did not become full family members until 1959. In England adoption legislation was introduced in 1926 (although related laws in Britain existed, for example the Poor Law Adoption Act of 1889, and the Custody of Children Act of 1891, these primarily established to transfer parental rights to the state), and was introduced in Scotland in 1930, and in Ireland in 1952. Modern adoption laws came into being much later in some countries, for example Israel established adoption legislation in 1960, and in West Germany adoption legislation was not established until 1977 (Adamec and Pierce 1991, O'Shaughnessy 1994).

### **Developments in Britain**

"In Tudor and Shakespearian England bastardy was more or less accepted" (McWinnie 1967,2) or at least, was not viewed as a social problem. However during the Puritan regime, with its strict adherence to a moral code, a social stigma began clearly to be attached to illegitimacy. The illegitimate child was to become viewed as socially inferior (McWinnie 1967). Howe, Sawbridge and Hinings (1992,6) citing Pinchbeck (1954),

similarly assert that medieval Britain "did not regard illegitimate children as a problem" although the child was not eligible for inheritance rights. They add that this climate of acceptance changed under the impact of capitalism, and, where previously extra family members were considered potential assets in the domestic economy, they became unpaid liabilities under industrial capitalism. Rearing children subsequently became a burden falling heavily onto parents.

The Elizabethan Poor Law was introduced in 1597 to formally provide for poor people in England. However, acting under the assumption that poor parents were irresponsible, and eager to abandon their children, the Poor Laws placed "severe and humiliating restrictions on parents" for the next three hundred years in an attempt to reduce such abandonment (Iwanek 1989,1). Wilson (1990) argues that the large number of foundlings, common in towns and especially in London, testify not to parental irresponsibility or indifference, but rather to the desperate plight of parents and of unmarried mothers.

Parents who were unable to adequately care for themselves and their child were taken to the workhouses. Children over three did not stay with their parents, but were placed in institutions. A similar fate awaited single mothers and their babies, this being considered rightly justified as single mothers were considered sinful, compulsive, unstable, and immoral, and they deserved to suffer the consequences of their actions. A strong belief held during this period was that giving protective care to the illegitimate child would condone or even encourage the immorality of the mother (Tizard 1977).

Of interest on this point are the writings of Seglow, Kellmer-Pringle and Wedge (1972,172) that while adoption was used by working class families informally (by incorporating the child into the mother's family) and formally, "as a way of dealing with the problem of illegitimacy", it is only since the second world war that adoption became popular with the middle class. Such comments highlight the time at which acceptance of adoption as a means of creating a family appeared to extend to middle class families, but also inadvertently appear to suggest that prior to this time illegitimacy was not a problem faced by the middle class. This suggestion is not supported by research undertaken in 1971 by Crellin, Kellmer-Pringle and West (cited in Jacka 1973,17) who found that there was no difference in social

background and upbringing between mothers having respectively a legitimate or illegitimate baby.

According to Iwanek (1989,1) during the years of the Poor Laws, having an ex-nuptial child even "carried a criminal sentence". Of note, severe penalties, and the associated moral condemnation seemingly applied only to the mother. This is well illustrated by MacFarlane:

"Every lewd women which shall have any bastard which may be chargeable to the parish, the justice of the peace shall commit such woman to the house of correction, to be punished and set on work, during the term of one whole year" (Burn, The statute of 7 James, cap. 4., 1610, cited in MacFarlane 1980, 73).

It was during the nineteenth century that the "horrifying practice of baby farming existed in Britain, where unwed mothers were forced to give up their babies, who were then sent to baby farming houses"; houses offering care for payment (Adamec and Pierce 1991,xix-xx, McWinnie 1967). Survival of the babies, grossly neglected in such houses, was rare, and insurance policies on the children's lives gave recompense to baby farmers for the losses. The passing of the first Life Protection Act of 1872 appeared to do little to protect infants, however the passing of the Births and Deaths Registration Act of 1874, and a further Life Protection Act in 1897, incorporated into the "amending Children Act, 1908, or the Children's Charter" (McWinnie 1967,5), contributed to the gradual eradication of baby farming. In 1925 the Tomlin Committee recommended there be formal community acknowledgment of adoption, in spite of reservations that the

"problem of the unwanted child was a serious problem which the introduction of legal adoption might not do much to solve .... the people wishing to get rid of children are far more numerous than those wishing to receive them." (McWinnie 1967,9).

At the same time this committee "deprecated the policy of complete secrecy" which was being advocated by some societies. It was considered this ill-conceived policy was partly based on a fear of interference from "the natural parent", and partly on a belief that

"if the eyes can be closed to the facts, the facts themselves will cease to exist, so that will be an advantage to an illegitimate child" (McWinnie 1967,10).

The Tomlin committee's report preceded the Adoption of Children Act 1926, and the Adoption of Children (Scotland Act) of 1930 (McWinnie 1967, Walby 1995). These Acts were similar except for one important exception;

in the Scottish Act information which gave the connection between the Adoption Register and the original birth entry was available to the adopted person once they reached the age of seventeen (McWinnie 1967).

Under these Acts an adoption order could not be made for a child without the consent of a parent or guardian. However, a court could dispense with any such consent, if the child was considered to have been abandoned, or neglected, or if the mother or person liable to contribute to the child's support was unable or unwilling to do so, and, if it was "for the welfare of the infant" (McWinnie 1967,11). These Acts allowed for the child to be as a "child born to the adopter in lawful wedlock" with the exception that inheritance rights were not transferred, but continued with the "natural or biological parents" (McWinnie 1967,11).

Under the Poor Laws the plight of unmarried mothers had become extreme, as the extended family supports reduced, and the severity of social and legal sanctions against illegitimacy increased. According to Howe, Sawbridge and Hinings (1992) the impossible situation for unwed mothers was responsible for a great increase in infanticide, in spite of the fact that this act was punishable by the death penalty. The Poor Laws operated for over 300 years in Britain. The passing of the Adoption of Children Act of 1926 and the Adoption of Children (Scotland) Act 1930 allowed for development of regulated care of children unable to be cared for by their own parents. Adoptions were arranged by children's departments, voluntary agencies, and by others including doctors, matrons, ministers and lawyers, and by "advertising in the public press" (McWinnie 1967,34).

From the mid 1850's emigration of children under a scheme of indenture was available as another alternative for children in need of care, these children greatly outnumbering families available to care for them in Britain. Under this scheme Canada, United States of America (USA), New Zealand, Zimbabwe and Australia received boatloads of British children. These orphans, children of parents deemed "unfit" and ex-nuptial children available for adoption (with or without parental consent), were often placed in homes such as Dr Barnardo's (the founder of this international child care plan), or less frequently, they were adopted, most often to be used as household and property labour in childless homes. This expelling of Britain's children, "over the Golden Bridge - from slums to the Fair Land of hopes and promises", lasted up until the 1960's (Wagner 1979,237, Humphreys 1994 ).

Adamec and Pierce (1991) pinpoint the passing of Child Labour Laws in some countries, as the turning point in the international practice of adoption of children for labour. Up until this time anyone applying to adopt a child was welcomed by the adoption societies, where it was assumed that a desire for parenthood was enough to guarantee the welfare of the child (McWinnie 1967). According to Katz (as cited in Adamec and Pierce 1991, xxvii) in the 1930's, in conjunction with the emergence of new child psychological theories, a "seismic shift" in the perceived value of children occurred, this heralding the rise of a new era of adoption where loving couples willing to parent were actively sought and secured for parentless and homeless babies and children.

According to Howe, Sawbridge and Hinings (1992,3) "in the United Kingdom at least half a million women have given up a child for adoption". Condemned for immoral conduct, these birth mothers received little compassion for their predicament, little acknowledgment of their experience of giving birth, and little support for their grief. Yet according to Howe, Sawbridge and Hinings (1992,150):

"The devastating psychological impact of such a damning social reaction to an inherently natural and worthy achievement is not something from which most women easily recover".

It appears that the 1926 British Act produced much needed care for children. In the following years the needs of willing prospective adopters were also well accommodated, however those whose needs were left unmet at the time were the birth mothers. It was assumed that the birth mother would not require, and nor was she really entitled to, any information concerning the child. The break was to be permanent and clean, this the best for all concerned. The label of illegitimacy was legally cleaned from the slate (although such an erasing from the attitudes of the general society was not necessarily evident). The clean break also allowed "the birth mother to make a fresh start" after recognising her immoral, wicked or unbalanced behaviours (Howe, Sawbridge and Hining 1992,11). Still prevailing from the 1880's was the view that an unmarried mother could not regain her social status if she kept her baby (McWinnie 1967). The passing of the 1948 Children's Act, the Adoption of Children Act of 1949, the Adoption Act of 1950, and of 1958 all impacted on adoption practice in Britain.

The forgotten single mothers still faced extreme difficulties and dilemmas in Britain in the 1950's, 60's and 70's, during which times a socially constructed "catch 22" situation appeared to prevail (Howe, Sawbridge and Hinings 1992,14). To regain community respect, and to redeem themselves enough to be viewed forthwith as appropriately selfish yet selfless, mentally stable, mature, caring mothers, they must give up their child for adoption, and silently suffer the loss. Conversely they could receive further condemnation, compounding after the birth, and be viewed as unstable, inept, immoral, immature, selfish mothers, by keeping the child (Howe, Sawbridge and Hinings 1992). However co-existing on this moral tightrope, was the strong moral code of motherly conduct that dictates that a mother should never, under any circumstances abandon her child. Curiously, this particular moral code appears to have received scant consideration or reinforcement from professionals during this period of time, as birth mothers' made decisions about the future for themselves and their child. Perhaps only afterwards did birth mothers realise the full lifelong implications of placing a child for adoption, and the full lifelong implications of falling foul of this social and moral injunction (Howe 1992).

Howe, Sawbridge and Hinings (1992) write that permanent closed adoption still prevailed in Britain into the 1970's, with the 1972 Houghton Report defining adoption as:

the complete severance of the legal relationship between parents and child and the establishment of a new one between the child and his adoptive parents" (Howe, Sawbridge and Hinings 1992,11).

The Houghton report did recognise the importance of telling the children about their origins for proper development of a sense of identity, and this report preceded the Children's Act of 1976 (Picton and Bieske-Vos 1980, Walby 1995).

In England and Wales, in the year of 1968, adoption orders for babies adopted by non-relatives reached 16,164, an all time high. In 1984, as a result of many factors including the changing social climate surrounding illegitimacy, greater community tolerance of single motherhood, and income maintenance for single parents, this figure had reduced to 4,189 of which only 435 were babies (Howe, Sawbridge and Hinings 1992). In 1975 in England and Wales the proclaimed Children's Act gave adopted people the right to obtain their original birth certificate upon reaching the age of eighteen. No reciprocal right for birth parents to gain access to

information was established at that time. Legislation likely to be introduced in 1996 in Britain is expected to maintain adoption as a permanent alternate placement with severance of previous relationships when adoption is considered to be in the best interests of the child.

In Britain in the nineties, according to Howe, Sawbridge and Hinings (1992), relatively few babies are given up for adoption by young women in their teens. However there are an increasing number of women who lose their children through the law courts, after judgement that the children are suffering harm in the care of their parents. Often contested, court orders allow the children to be "removed compulsorily and 'freed' for adoption" (Howe, Sawbridge and Hinings 1992,153, Ryan 1994). While legislation appears to advocate for co-operative rather than adversarial approaches, and rights for natural parents, it appears that in practice some aspects of the mistakes of past adoption practice in Britain, concerning bad or mad birth mothers who were expected to simply fade from view, continue to be repeated (Ryan 1994).

### **Developments in America**

In the United States informal adoption was practiced long before the passing of the first formal adoption law in Massachusetts in 1851. One such informal practice was the "placing out" of a child, and other informal arrangements were made, for example "a godchild" assuming family member status (Adamec and Pierce 1991,xx,xxi). The "placing out" (foster) provisions were mostly for white children, with few provisions for "black orphans" (Adamec and Pierce 1991,xxvii). Whilst the Colonial Orphan Asylum for black children was established in New York in 1836, black children were most often cared for, through desire or of necessity, by extended families (Adamec and Pierce 1991).

During the 1800's in America almshouses existed, as they did in Britain, for unwed mothers and people in poverty. Those individuals in either or both of these groups often were treated with equal disdain. However almshouses were not seen as an ideal solution and these institutions were condemned by the end of the nineteenth century. Other less than acceptable practices surrounding parents in poverty included the selling of both adults and children.

Homelessness for children reached disturbing proportions around the mid 1800's and solutions included placement of children in orphanages, and a scheme founded by Charles Brace called the "orphan train movement" (Adamec and Pierce 1991,xxiv, Cole and Donley 1990,275). This involved sending children on trains (with or without parental consent) from the cities where they were "an economic drain on public coffers" to distant rural areas where they would be an economic asset to farming families. At each station children would alight from the train and "were put up on platforms for all to see", this considered by some to be the source of the phrase "put up for adoption" (Adamec and Pierce 1991,xxv). If the children were "chosen", often being secured purely for their labour, they lived and worked with the new family (Adamec and Pierce 1991,xxv). The reality of community acceptance of these children does not appear explicit in the professional literature, although a negative view is illustrated in the fiction literature, as evidenced in this conversation from the classic novel Anne of Green Gables:

"We're getting a little boy from an orphan asylum in Nova Scotia and he's coming on the train tonight'.

'Are you in earnest Marilla?' she (Mrs Rachael) demanded when voice had returned to her.

'Yes of course' said Marilla. .... At first Matthew suggested getting a Barnardo boy. But I said a flat 'no' to that. They may be all right - I'm not saying they're not - but no London street Arabs for me I said. Give me a native born at least. There'll be a risk, no matter what we get. But I'll feel easier in my mind, and sleep sounder at nights if we get a born Canadian'.

'Well Marilla I'll just tell you plain that I think you're doing a mighty foolish thing - a risky thing, that's what. You don't know what you're getting, you're bringing a strange child into your house and home... Why it was only last week I read in the paper how a man and his wife up west of the Island took a boy out of an orphan asylum and he set fire to the house at night - set it *on purpose* Marilla, - and nearly burnt them to a crisp in their beds. And I know another case.....'"(Montgomery 1994,14-16).

In fiction at least, children from Barnardo's and other similar institutions appear less than acceptable in the eyes of some community members.

After the passing of the first American legislation many adoptions remained informal, with foster parents seeing little benefit in formal adoption. Much

remained the same, poverty was rampant in the early 1930's, unmarried mothers' "routinely advertised" for homes for their children, and children were still being bought and sold by unscrupulous persons (Adamec and Pierce 1991). Formal assessment of families receiving children was not common, nor was confidentiality, concerning parties to adoption or foster arrangements, an issue.

Slowly other American states passed adoption laws, and new legal requirements dictated that adoptive parents be assessed before placement of a child. The subsequent sealing of birth certificates in the 1930's in some states was seen to provide a variety of safeguards. These included freedom from the stigma of illegitimacy for the adopted child (this definitely seen as in their best interests), and the provision of anonymity and freedom from disgrace for the unwed mother. These changes in adoption practice occurred in a social climate that supported the ideology of people being allowed to escape from their past and make a "fresh start" (Melina and Roszia 1993,4). Additionally the sealing of records was thought to assist adoptive parents in conscientiously undertaking their role, to "stress that the adoptive family would completely assume the parental rights and obligations in relation to the child" (Adamec and Pierce 1991,xxvii), and to protect the adoptive family from intrusion from uninvolved persons including "reporters nosing around for news" (Baran and Pannor 1990,320). It had also been asserted that some protection from unscrupulous birth relatives of the child was needed. However some believe that what began as an effort to "to free innocent children from the stigma of illegitimacy" and protect the privacy of all parties involved, became a rigid process providing a primary safeguard for adoptive families but with far reaching and at times devastating implications for birth mothers and adopted persons (Baran and Pannor 1990,320, Bagley, Young and Scully 1993).

In the 1950's adoption began to receive a greater acceptance from the general American society, families opened their doors to the many babies available and infant adoptions flourished between the 1950's and the mid 1970's. During this time, a strong social disapproval of single mothers prevailed and Adamec and Pierce report that "unwed mothers were urged or pressured to choose adoption over single parenthood" (1991,xxvii).

In the early 1970's a major reversal in societal attitudes towards illegitimacy and single mothers occurred as a result of many factors including civil rights legislation, a general increase in the society's living standards, the feminist

movement, income maintenance for single parents and the penetration of mass media into American homes. All contributed to changes in the collective perception of the problem of illegitimacy. In conjunction with new abortion laws and the availability of oral contraception, these major attitudinal changes meant that the number of babies available for adoption began to decline. However contrary to the slowly declining number of babies available, American couples were finally now embracing adoption as a very acceptable alternative method of family building. This increased demand for babies was explained in part as due to a huge blow out of baby boomer adults who had delayed child bearing and who were subsequently facing infertility problems for a variety of reasons (Adamec and Pierce 1991, Bagley 1993).

As a result, according to Adamec and Pierce (1991,xxx)

"affluent baby boomers, dismayed by long waiting lists to adopt healthy infants have been motivated by a combination of altruism and impatience to adopt thousands of babies born abroad".

Overseas adoption in America was to become a popular, available alternative in the 1970's.

In the 1970's there were also growing concerns for older children, and special needs children, not necessarily seen previously as available or acceptable for adoption. Many suffered the distress of multiple foster placements and institutional neglect. The instability of multiple foster care placements came to be viewed as detrimental for children, and a permanency plan of returning the child to their original families, or being permanently placed, was seen as most desirable (Goldstein, Freud, Solnit 1973, Maluccio, Fein, and Olmstead 1986).

Acting as a disincentive to foster families approached to provide permanent care through adoption for foster children, was a monthly payment made to foster parents. This was not available to most adoptive families (nor to the natural parents judged guilty of failing to adequately care for children in the face of poverty). Many foster families could ill afford to give up this income supplement (Tizard 1977).

Adoption in America in the 1970's still operated as a process where the birth mother permanently relinquished total rights as parent of the child, and adoptive parents assumed those rights. However advocates for the basic human rights of adoptees and birth parents to information, and emerging

research revealing the normality and in some instances necessity of having access to such information and the enduring grief associated with loss, provided knowledge which heralded greater legislative openness in adoption (Sorosky, Baran and Pannor 1984, Baran and Pannor 1990). In the 1980's and 1990's many adoption agencies are encouraging post adoption communication between adoptive and birth mothers, are giving birth mothers' more control in the pre-adoption period including the right to choose the adoptive parents after reading non-identifying "resumes", and are encouraging ongoing communication and contact between the adoptive and birth families (Melina and Roszia 1993,8, Baran and Pannor 1990).

### **The (White) Australian Picture**

In Australia the first adoption legislation was introduced in the colony of Western Australia with the Adoption of Children Act of 1896, and by the late 1920's most Australian states and territories had introduced adoption legislation. These included the Child Welfare Act in New South Wales in 1923, the Adoption of Children Act in Victoria in 1928, and the Adoption of Children Act in Tasmania in 1920. In South Australia the first Adoption Act was proclaimed in 1926. The Australian Capital Territory introduced legislation in the 1930's, while in the Northern Territory, although they followed the early directions in vogue in adoption, the first appearance of specific legislation was the Adoption of Children Ordinance of 1949. In Queensland adoption legislation was formalised in 1921, although the Infant Life Protection Act of 1905 had provided for the adoption of illegitimate children under the age of ten (Boss and Edwards 1992, Hartman and Laird 1990, Inglis 1984, Iwanek 1989).

The first Australian adoption legislation, in Western Australia in 1896, was primarily to legalise rights of inheritance. These rights were not legally recognised previously, although specific arrangements could be stipulated under a benefactor's will. The Act did not make mention of ex-nuptial children. This was amended 20 years later, whereupon Western Australia's amended Act "became a model" for the legislation which was developed in other Australian states (Shurlee Swain 1992,2). According to Boss and Edwards (1992,26) a section in every Australian State's or Territory's Act (and still existing in some Australian states' Act including Queensland), gave similar instruction. These were that the adopted child would become

the child of the adopter(s), and the adopter or adopters would become the parent or parents of the child as if the child had been born to them in lawful wedlock. The adopted child would cease to be the child of any other person (Boss and Edwards 1992, 26, ACA (Qld) 1964-1991 s. 28).

According to Shurlee Swain (1992), while informal arrangements had been in operation in the colonies since white settlement, formal arrangements were met with mixed success. She continues that although child welfare agencies and women's organisations had welcomed the legislation, the community needed much more encouragement. She writes that

"it took much longer to convince the population at large to accept the new measure. Because of the scandal associated with informal adoptions of the past, the concern, in an eugenically minded age, about the quality of illegitimate babies, and the lingering desire to punish rather than relieve the single mother, it was only when the ex-nuptial birth rate began to rise during and after the second world war that adoption achieved the status its advocates had envisaged some 20 years before" (1992,3).

Shurlee Swain (1992) writes that in the colonial period the "legal status of illegitimate children was invidious", and that in Victoria, at least, it was the Matrimonial Causes Amendment Act of 1883 that gave single mothers the same custody rights as the father of legitimate children (1992,3). She states that up until then, as observed by Jaggs "anyone who got possession of it (the baby) could keep it" (cited in Shurlee Swain 1992,3).

According to Burns, Goodnow, Chisholm and Murray (1979) in the early 1800's orphanages began appearing in Sydney, New South Wales. These were to accommodate the abandoned offspring of poor, often unmarried convict mothers, and itinerant fathers. Such abandonment was common in Australia's white settlement history, due to many factors including the convict experience, the inequality of the sex ratio, the Gold Rushes, and the Great Depressions of the 1890's and 1930's (Burns, Goodnow, Chisholm and Murray 1979). These orphan institutions aimed to provide for and protect abandoned children, and provide them with skills for work and survival. Graduates of such institutions were considered better off than their British counterparts from orphanages and workhouses. In 1881 the establishment of the State Children's Relief Act paved the way for the introduction of a boarding out or foster care system in New South Wales. Arrangements included the payment of a boarding supplement although circumstance of informal "adoption" existed where no payment was made

(Horsburgh 1977,24). All placements were subject to "rigorous and frequent supervision", in theory at least, although a discrepancy between the claimed thoroughness of investigation and the staff availability has been since noted (Horsburgh 1977).

The early recognition of the need for destitute adults and children to be provided for, had seen the establishment, in Victoria in the 1840's, of the Wesleyan Strangers' Friend society and the St James Visiting Society, and, in 1853, The Melbourne Orphanage Asylum. However by the turn of the century, institutional care was recognised as being potentially detrimental, and this system gave way to a boarding-out system in private homes, with encouragement of increased informal adoptions. Shurlee Swain (1992,4) asserts that in the late 1800's informal adoptions were thriving, and that

"Midwives or in some cases the mothers themselves would place an advertisement in the Public Notices column of the daily paper noting whether a payment or premium was available ..... adoptive parents had simply to present themselves to be able to take the baby away".

Other alternatives to institutional care or boarding-out were also being examined, including cottage-style dwellings, a compromise between institutions and boarding out, that had been established by Dr Barnardo in London in 1876. Such alternatives were considered necessary for children unsuitable for boarding-out (Jaggs 1991, Horsburgh 1977). O'Shaughnessy (1994) writes that most English-speaking societies were also making extensive use of wardship.

The migration of "orphans" under the Dr Barnardo scheme, supported by Oxford scholar Kingsley Fairbridge and by voluntary organisations including the Salvation Army and the Catholic Church, began operation in the late 1880's (Moore 1990, Coldrey 1993, Lane 1990). Research into the circumstances surrounding the transportation of British orphans to Australia has since revealed that in fact few were orphans and most were transported without parental permission (Humphreys 1994). According to Moore (1990) under this plan the first group of children arrived in Western Australia in 1883, although most children arrived between the years 1921-1965. Moore estimates that over three thousand children were "bundled on a ship and sent half way around the world" to Australia before the program ended in the late 1960's (Moore 1990,18), however according to Humphreys "the number was closer to 10,000" children (Humphreys 1994, 261). After the

cessation of this now highly criticised practice, Barnardo's maintained and developed professional child care services in Australia.

In Western Australia in 1894 the Christian Brothers arrived in Perth from Ireland to establish what was to be called "the Scheme", a collective of children's orphanages (Coldrey 1993,5). These orphanages housed and educated orphans and children placed in care, including British child migrants, this education encompassing secondary schooling and rural training. Placement of children with families often occurred in the form of resident apprenticeships after the completion of their schooling (Coldrey 1993). In Hobart, Queen's Orphan School was one of Tasmanian's few institutions admitting and schooling children whose parents could not support them (Burns, Goodnow, Chisholm and Murray 1979).

According to Spence (1907) in South Australia a situation of overwhelming numbers of children needing care heralded the introduction of the boarding-out system. Clark (1907,14,15) uses extracts from a letter she wrote to the Adelaide "Register" in March 1866 to illustrate how her comments "gave rise to the Boarding-Out Society" (1907,14). In her letter she asserts that in the late 1860's in Australia "pauperism" was on the increase, and further the letter stated

"if pauperism is hereditary surely it is the greatest mistake to bring up young children in the midst of it. It is said that the authorities propose to spend two or three thousand pounds in additional buildings for the Destitute Asylum. Would it not be possible to spend this additional money in a better way? It would surely be less expensive, as well as more healthful, to bring up the children in the country" (1907,14,15).

With news of the system of boarding-out operating in Britain, and under the guiding hands of Clark, the first boarding-out (foster) placements were made in 1872 in South Australia. Children were paid for "at such a rate that working people would be glad to have them" (1907,35). At the time, Clark writes there was a "profound distrust" of this new system (1907,19), with people querying why families would "take the waifs of society into their homes except for profit", impossible to make on the fee received (1907,38). Clark recalls there was by no means a popular demand at first. She writes that at this time there was also "genuine adoption" where under these arrangements, proper education was given by those who could afford to give it, and the children were "protected from overwork" (1907,35). Clark states that news had arrived of a system of "free homes' in the United

States, of which she writes "illustrations published in the reports showed beautiful homes, well dressed children riding on ponies and playing with expensive toys" (1907,36). She indicates that this did not necessarily appear to be the class offering free homes in Britain and Australia, and in South Australia it was families with whom the child had been boarded-out for many years and for whom "real affection had been proved" (1907,36).

Of the children boarded-out under the South Australian scheme, Clark reports several died very young, and some were returned, although official Lady Visitors, often hailed as a friend and helper, were testifying that overall the system appeared to produce children "whose dull faces brightened" and whose languid limbs grew alert after a few weeks of ordinary life" (1907,38). Spence (1907) admits to knowledge of baby-farming existing in other parts of the world but she asserts it did not exist in South Australia.

Whilst little evidence of large-scale baby farming existed in Australia in the early twentieth century, the Victorian court case of Mrs Mary Ann McCarter raised some suspicions of unscrupulous smaller scale baby farming operations. Already a mother of eight and living apart from her husband she responded to a placed advertisement for available babies and collected a six week old, who died within three weeks of collection. The court suspected the woman was involved in baby farming (Shurlee Swain 1992,5). The association of baby farming with informal adoption brought the whole practice of boarding-out and informal adoption into some disrepute.

According to Spence (1907) the Destitute Asylum in South Australia was a refuge for both mothers and illegitimate babies. The Asylum assisted young single mothers with mothering skills, and helped with finding employment where single mothers could take their babies, this indicative of some compassion for single mothers in Australia at this time. This was also the practice of some refuges and maternity homes in Victoria, where the mother and child were cared for in the first year of the child's life and a relationship between the mother and the child was facilitated, before the child was weaned (although wet nurses were available) and the mother sought employment to support herself and her child. However these babies were subsequently at risk of neglect under boarding-out and foster arrangements (Shurlee Swain 1992).

As a response to the growing negative picture of baby boarding-out and informal adoption in Australia, and also a recognised need for children

other than babies to be adequately cared for, it was considered that more formal adoption practices were needed. This would mean an end to the inappropriate practices of the past, and could also reinforce the growing notion that children needed to be placed "not as hired servants but as part of the family" (Shurlee Swain 1992,8).

Moves to safeguard children, particularly abandoned or neglected children or those considered to be needing rescue from immoral circumstances began, and these took the form of wardship, this preceding legal adoption. O'Shaughnessy notes that wardship, like contemporary western legal adoption involved the "natal parents' legal abandonment or relinquishment of parental rights to the state" (1994,70). Between the late 1800's and the 1960's in Australia thousands of children, disproportionately Aboriginal children, were made wards of the state. For Aboriginal families the concept of adoption was very different to that of white Australians. For Aboriginal families the forced removal of children, stolen in the name of the misguided assimilation, caused gross individual, familial, and societal trauma (O'Connor 1990).

Adoption legislation from the 1920's up until the early 1950's in some western countries did not dictate complete severance from the birth family. However the developing thrust was toward legislation which dictated more complete severance of original family ties, as had been passed in the United States. By the mid 1960's "clean break" adoption legislation had been enacted in a number of countries, including Australia, which would legally encompass the provision of a good (and to the state, inexpensive) family environment for many children of the "proletariat", and would completely hide illegitimacy (O'Shaughnessy 1994,69). Smith writes that on the point of contact from "natural parents", with particular reference to early foster care practice in Australia, the neglect of natural parents is noteworthy (Smith 1963). Similarly, in formalising adoption it was considered that the "wicked" and immoral natal parents would be banished in order to best protect the custody of adoptive parents and facilitate the complete assimilation of the child into the adoptive family (O'Shaughnessy 1994,69-71).

Currently legislative changes in many Australian states have resulted in the rejection of the previously mandatory "clean break" approach, permitting, under varying conditions, the disclosure of identifying information to adopted persons and birth parents. Victoria, in 1984, became the first

Australian state to enact adoption information legislation and by 1994 all states and territories had enacted such legislation. At least one state, Victoria, now offers and encourages a more open system for future adoptions where contact is maintained between adoptive and birth parents. In other Australian states, including Queensland, conditional, limited communication between birth parents and the adoptive parents is facilitated by adoption workers during the first twelve months after the adoption order has been finalised (McDonald and Slaytor 1995).

In the 19th and early 20th centuries in Australia alternate placements for children were authorised primarily by charity workers, volunteers, health professionals and state employees, however by the 1960's professional social work would begin to establish a "prominent position" in adoption practice. Social workers layed claim to greater professional experience and expertise in adoption, as compared with expertise available from other professionals in such areas as medicine or law. This was claimed particularly with regard to assessing suitable applicants, and in "counselling" single mothers (O'Shaughnessy 1994,114,115, Benet 1976).

### **Professionalism and Morality - A Social Work Context**

"How expert in fact are the social workers, and how much of their expertise is - as some of their clients would charge - simply prejudice dressed up as fact? ..... social work practice simply codifies the prejudices of the community" (Benet 1976,203).

It is relevant to pursue further at this point the issue of professional adoption practice as linked with the counselling of single mothers, and with professional attitudes toward birth mothers and the corresponding professional attitudes to adoption and adoptive parents.

In America, Britain and Australia the social work profession grew up in the post war years, although a much earlier philanthropic response from the emerging middle classes, to the developing capitalist economy and the resultant new social problems, had contributed to its evolution from the nineteenth century (Davis and Brook 1985). Social work philosophy by the post war era was heavily influenced by the "popular Freudianism" of the period (Benet 1976,204).

In the aftermath of the second world war two prominent problems facing social workers were identified. These were the disadvantaged family, and

the "precocious overdeveloped, highly sexed adolescent girl" (Davis and Brook 1985,19). In America the involvement of social workers in the area of adoption was a response to a specific need, according to Benet this being that "white out-of-wedlock births in the United States had doubled between 1943 and 1960 to reach 82,000 births". Benet believes that social workers were trained to assume that unmarried "neurotic girls" chose illegitimate pregnancy, which was heavily stigmatised, to act out feelings about their own mother (Benet 1976,205). Yet Benet argues that the large numbers of babies being left at hospitals "was evidence of a social and economic problem rather than a psychiatric one" (Benet 1976,206).

According to O'Shaughnessy social work and adoption discourse generally represents social workers as "neutral, knowledgeable providers of a service for parentless children, childless parents and child-burdened natal mothers" (1994,22). However O'Shaughnessy disagrees, commenting that social workers "often have been aligned with the status quo in adoption", and they have seen the "interests of natural mothers as subordinate and contradictory to the interests of their children" (1994,6,22). He further charges that social workers' "counselling" of natural mothers has often involved "pressuring them to make a sacrifice for their children" although this has rarely been admitted (1994,22).

Observing social workers in that light, it is intriguing to reflect on the words of Tizard, that

"the fundamental assumption underlying much social work practice is that the natural mother, or at least the biological family, both would and should look after their child. That assumptions of this kind are made by social workers are not surprising, since society as a whole share these attitudes. It is considered heartless if not immoral to give away or abort a child, however difficult one's situation" (1977,238).

and further comments from Benet:

"The crowning criticism of social workers was that they did not believe in adoption at all...Even when they did believe in adoption, they definitely thought it was second best (1976,207).

Further, Benet quotes from a 1957 American textbook titled Child Placement through Clinically Orientated Casework, by Esther Glickman:

'The separation of the child from the parent is perhaps the most tragic occurrence in a child's life" (Benet 1976,207),

while Bowlby writes that

"workers of all kinds have too often been influenced by punitive and sentimental attitudes towards the errant mother. At one time the punitive attitude took the form of removing the baby from his mother as a punishment for her sins. Nowadays this punitive attitude seems to lead in the opposite direction and to insist that she should take responsibility" (1952,100).

Contributing to this contradictory perspective in the literature are observations by McWinnie (1967). She states that in the 1900's welfare reports described unmarried mothers as "unruly" (1967,5), and in the 1920's "adoption workers themselves had the same moralistic attitude towards illegitimacy" as the general community. McWinnie writes that by the 1930's there was a change in attitude, with less emphasis on the erasing of sins of birth mothers, and more emphasis on good qualities to be developed. But McWinnie observes that

"the policy, however, of most moral welfare organisations is still to have a bias towards encouraging an unmarried mother to keep her child rather than insist on an attempt at an objective appraisal of each case and each situation" (1967,5).

The impropriety, heartlessness and immorality of giving away a child are very clear in the above statements, as are the suggestions that the birth mother should shoulder her own burdens. These comments also clearly identify a social work perspective which did not always support the separation of children from their mothers. This picture, therefore, begs the question why, if such worker attitudes prevailed, were many birth mothers encouraged to do the best thing and give up their children in the late 1950's, 1960's and 1970's?

This picture is confusing, and perhaps provides some evidence that adoption may have shifted after the 1950's to become a "service for childless couples" (Brodzinsky and Schechter 1990, Tizard 1977,7), with this situation existing up until as recently as the late 1970's. Yet this picture also appears to be out of alignment with the progressive social movement at other levels during this period, with emerging recognition of the rights of birth mothers.

One suggestion to explain this situation is that rather than universal social work values, perspectives and practice in the adoption arena, what existed were widely varying views and practices. Supporting this notion of varying rather than uniform social work values and practices, McWinnie (1967)

reveals that during this period many adoption agencies in Britain had services based on philanthropic or religious ideals, and nowhere in Britain, either from published material or from discussion, was it possible to find a universally coherent policy in adoption placement. She adds that

"Differing adoption agencies, all voluntary organisations, pursue somewhat differing policies. The policy of different children's officers can be equally divergent" (1967,25,26).

In discussing the evolution of professionals' attitudes toward the placement of children for adoption, Howe, Sawbridge and Hinings (1992) point out that

"the literature reflects the gradual changing attitudes not only of society but also of professionals toward unmarried pregnancies and single parenthood" (1992,107).

However some of the writing above appears to suggest that rather than the literature reflecting a gradual uniform changing of professional attitudes, it reflects that historically there were significant differences in social work practice with unmarried mothers in different areas and countries, and significant swings in adoption ideology. These incorporate shifts from some workers and some agencies showing compassion for unmarried mothers (early 1900's), to single mothers being seen as unruly and immorally bearing illegitimate, unwanted children (1920's and 1930's), shifting to workers believing in the 1950's that a child should remain with its mother (albeit perhaps in some cases as the mother facing her responsibilities rather than claiming her human rights). This appears to have progressed to a practice of welcoming adoptive parents, and the promotion of adoption as a rewarding way to build one's family, although there was evidence that the policy in some organisations was "still to have a bias toward encouraging an unmarried mother to keep her child" (McWinnie 1967,5).

O'Shaughnessy's (1994) comments appear to support the notion of distinct shifts in adoption practice to some extent, with his comment that between "the 1930's and the 1960's the attempt was made to transform the adoptee socially and legally into the natural child of the adopters" (1994,4).

Of the 1970's Benet (1976) writes that in some agencies

"social workers identified with their 'better' couples and wanted very much to find children good enough for them" (1976,206).

Benet continues that some "agencies have been most heavily criticised for their manipulation of supply and demand" (1976,206). According to Howe, Sawbridge and Hinings (1992), in the West adoption was also seen by some workers as the "rescue of a child from a disadvantaged and even harmful parent" (1992,20). The existence of attitudes in social work practice of deserving (good) and undeserving (bad) mothers may also be evident in the above comments. Melina and Roszia write that confidential adoption benefited the growing field of social work, where workers gained "emotional rewards" for acting as "providers of children to families"(1993,5).

Evidence exists that there was some recognition of this shift toward the adopters and, in response, emphasis was placed on serving the best interest of the child. Statements such as that by British Health Minister Bottomley (cited in Campion 1995,52), reinforced the point that "no adult has a right to a child but every child has a right to a stable and happy home". This child-centred ideology now underpinned agency policy and practice. Interestingly, evidence of the "best interests of the child" ideology appeared in legislation in Australia in the 1960's, yet did not appear to inform practice at that time.

By the mid 1970's professional awareness was also growing of the experiences, dilemmas, and losses of birth mothers, and the need of some adoptees to access information concerning their birth mothers and birth families. Yet the full implications of lifelong severance from their child's world, difficult for some birth mothers to have conceptualised at the time of their child's birth, only since the mid 1980's has received international professional recognition.

In the nineties in Britain this shift may appear complete, with evidence of a swing back to supporting a mother's rights to raise her child where at all possible, apparent in this comment from Howe, Sawbridge and Hinings (1992,151), concerning unmarried mothers and future adoption practice:

"Money and a house, community support and friendly help could be given as a matter of course forestalling the need for the mother even to contemplate giving up her baby. If the mother cannot look after the child herself - she is too young or unwell - then the baby could be looked after or adopted by other parents, but not exclusively and not anonymously" (1992,151).

However most recently Bond (1996,16) charges that "prospective changes to adoption law may be more concerned with the adopters than the children they adopt". She adds that while

"Four discussion papers published between 1990 and 1992 considered a broad spectrum of practice .... many feel the new legislation will amount to little more than a charter for prospective adopters "(1996,16),

this indicating the endorsement by at least some professionals of another significant shift in attitudes.

Perhaps what was not admitted readily in the past, nor debated to a desirable degree in the present, is the complex, ambiguous and contrary nature of community (and social work) theories, beliefs and values surrounding adoption. Not the least of these are attitudes of the morality or immorality of single mothers, rights and responsibilities of good versus bad mothers, and the belief in, or the rejection of the primacy of the mother/child bond and blood ties. The above comments from the social work and adoption literature provide some evidence of major shifts in social work policies and practice in the area of adoption in different time periods, and differing practices by different agencies and different workers within these time periods. They also provoke speculation of an apparent arbitrary manipulation of values and beliefs by some of those whose brief it was to provide services (and perhaps also reinforce existing moral order). These practices often may have been influenced by discordant social values and discordant social and psychological theories. All such influences may require greater ongoing, open, honest and informed debate, with regards to international adoption practices, and with differing adoption practice across Australian states.

### **The Evolution of Queensland Legislation**

In Queensland the Orphanages Act of 1879 whilst not directly dealing with adoption, paved the way for future legislation. This Act provided for trustworthy and respectable adults to be licensed to care, for no payment, for orphaned or neglected children. The child would in most cases take the family name of the adoptive parents, however the government department at the time still maintained supervision of the child until the child reached the age of 16 (later changing to 18) years of age (Boss and Edwards 1992).

Influencing the protection and care of Aboriginal children was The Aboriginal Protection and Restriction of the Sale of Opium Act 1897).

According to Spence the head of the Queensland Children's Department was the Inspector of Orphanages, of which there were eight in Queensland. Queensland at this time did not appear to be acting under the policy that "children should be dispersed" (1907,125), unlike South Australia, Victoria and New South Wales, but in keeping with Tasmania and Western Australia. Of the eight orphanages in Queensland, three were Roman Catholic Orphanages which did not allow any boarding-out, and nor was it done from the Townsville Orphanage, although some boarding-out did occur from the other institutions (Spence 1907). However by the 1930's there were approximately equal numbers of Queensland children in foster care as were in orphanages, this considered admirably comparable to the international picture (Nock 1963).

Under the Orphanages Act of 1879 a child could be indentured as an apprentice to any trade, calling, or service for a period of up to five years. In these instances the child's name was not legally changed and there was no right of inheritance. Prior to 1921 some arrangements for the permanent care of children were made privately. In some cases, under the Infant Life Protection Act of 1905, contracts for adoption were drawn up by solicitors and notification was given to the Police Department (Department of Family Services and Aboriginal and Islander Affairs (D.F.S.A.I.A.) 1993). Spence (1907) states that it was the Infant Life Protection Act in Queensland which became law on the first of January 1906 which was "most progressive" allowing for the location, and inspection of boarding-out homes and baby farms. These inspections were undertaken by the police, the government body which administered the Act at that time. After 1918 adoptive parents had to notify the Director of the State Children's Department of the adoption. If additional adoptive parents were required "advertisements were sometimes placed in newspapers" (Department of Family Services and Aboriginal and Islander Affairs (D.F.S.A.I.A.) 1993,1).

An amendment in 1921 to the Infant Life Protection Act made provision for the legal adoption of children under ten years of age. This meant that prospective adoptive parents could apply to the Department and the Department would assess their suitability to adopt a child. An agreement of adoption was signed by the Director, and was registered by the Registrar General of Births, Deaths and Marriages. The surname of the child became

legally changed to that of the adoptive parents. Legal rights of inheritance were not conferred by this arrangement (Department of Family Services and Aboriginal and Islander Affairs (D.F.S.A.I.A.) 1993).

In 1935, a more comprehensive act, the Adoption of Children Act was introduced after a detailed study of similar Acts including the British legislation established in 1926 (Boss and Edwards 1992, Iwanek (1989). Adoption was made more an administrative procedure, with the Director, State Children's Department, making the order. The Adoption of Children Act provided for the adoption of a child up to 21 years of age however this was amended in 1974 to 18 years. If the child was over the age of 12, the child's consent was required. The child of adoption was given the same rights as a natural child in terms of name, care, custody and, to some extent, rights of inheritance. The Act required an Adoption Register be kept by the Registrar- General and a marginal note be made against the original entry of birth (Department of Family Services 1993). The principle of secrecy was established by requiring that information regarding adoptions could only be revealed by Supreme Court order. The Adoption of Children Act of 1935 was later amended in 1941 and 1952.

In 1964 the previous 1935 Act was repealed and a new Adoption of Children Act was established, this making a contribution toward uniform adoption laws throughout Australia. Under that Act, the Director (Department of Children's Services) continued to be the sole authority for making adoption orders, and the Department remained the only authorised adoption agency in the state, although private adoption agencies did exist in other Australian states. One exception to the policy of the Director as sole authority was when a child was to be adopted by a relative. This Act provided strict anonymity between unrelated natural parents and adoptive parents where previously each party was given the name of the other. New birth certificates were issued giving no indication of the previous status or identity of the child, the original birth certificate was deemed invalid and cancelled.

Amendments to the act were made in 1967, 1987, 1990, and 1991. In 1987 the practice of giving infertile couples preference was first introduced into the legislation although this reportedly had been in practice since the early 1970's. Infertility is currently a legal prerequisite to adopting in Queensland, although eligibility may vary according to the category of adoption to be undertaken. In 1987 a passive contact register (registration

onto the register is elective and is not actively sought), was also established to enable the reunion of adopted persons and original parents if a matched listing occurred.

In 1990, following moves in other Australian states, legislation in Queensland was passed, to be applied retrospectively, allowing for the opening up of previously closed adoption records (Adoption of Children Act Amendment Act 1990 (ACCA (Qld) 1990). Only an objection to contact could be placed, with no provision for any objection to the disclosure of information. Strong public objection to this amendment was forthcoming from some individuals and groups in Queensland. Subsequently this legislation was amended before being promulgated. From the 1st June 1991 legislation which allowed the disclosure of identifying information was retrospectively applied, with provision that an objection (veto) to disclosure of **information** and **contact** could be placed if the adoption order had been made before June 1991 (Adoption Legislation Amendment Act 1991 (ACCA (Qld) 1991). The passive contact register system was not retained. For all adoption orders made in Queensland after the first of June 1991, identifying information would be available to adopted persons, and to birth parents named on the birth certificate, after the adopted person reached the age of 18 years. There was no provision for objection to disclosure of information or contact for children adopted after the first of June 1991 or for birth parents releasing a child for adoption after this time. This legislation currently applies in Queensland although further retrospective amendments to this legislation may be forthcoming.

Although these recent legislative changes (Adoption of Children Act Amendment Act Qld 1990, and 1991) have made it possible for adult adoptees and birth parents in Queensland to obtain identifying information (or place an objection to the release of information and contact), the process of adoption still remains a process of permanent, non-negotiable substitute care for children. In the case of general baby adoption by non-relative adoptive parents, the child is relinquished for adoption by the biological parent/s who give up all parental rights, and the child, and the accompanying parental rights and obligations, are accepted by the new adoptive parents.

According to the Queensland legislation the child becomes the child of the adopters and ceases to be the child of the birth parents or previous adoptive parents. The adoptive parents become the permanent legal,

psychological and social parents of the child, and are legally required to undertake all legal and social responsibilities and obligations of the parenting role. As legal mothers, adoptive mothers take on all of the legal, psychological and socially prescribed responsibilities, obligations and tasks of the mothering role as if the child was born to them.

The above Queensland policies, a part of white Australia's adoption policies, have evolved under international influences. Although adoption in Australia was formalised prior to the passing of legislation in Britain, practice in Australia nevertheless was influenced heavily by American adoption practice, British practices and the prevailing influences of Australia's British heritage. Nationally the adoption process evolved to become a process where the birth parent(s) gave up the child to an impersonal system and unknown adoptive parents, this widely considered to be in the best interest of the child, and best for all concerned. Until recently this system offered no contact between the giver and the recipients of the child, little recognition of biological heritage, and until very recently, little acknowledgment of the birth mother and birth family. Such a comparatively impersonal adoption system as this western system of permanently severing ties between parents and children, was a legacy of white Australia's British heritage, and subsequently became a devastating part of Australia's white and black history.

### **Aboriginal and Torres Strait Islander Traditional Adoption Practices**

It is well recognised that Australian Aboriginal people and Torres Strait Islanders have traditionally practiced informal adoption however, it would be erroneous to assume a common definition of adoption, family and kinship existed between white Australians and these groups (MacDonald 1994). In a recent report it is stated that:

"since time immemorial, children have been given by one family group to another family group in accordance with the traditions and the customs practiced within the respective societies and kinship groups of the Torres Strait Islanders and the Aboriginals" (Workshop Report of the Conference Traditional Adoption, Permanent Care, Customary Law 1990).

This report further states that:

"the act of giving children from one to another obviously includes a profound love, genuine trust and respect which is mutual, not just of the giver and of the receiver but wholly includes the child who is given with as much importance" (1990,1).

Further it states that the child does not come from a "pool of adoptable children" and

"that brothers, sisters and friends were involved in the adoption of children because of the fact that they trusted the other persons with their life, ...which was the life of their children" (1990,10).

O'Connor (1990) writes that in Aboriginal and Torres Strait Islander communities, responsibility for children was shared through the kinship system and the community, and that children, from an early age, knew their place in the kinship system and their responsibilities. In such communities, performance of parental and other responsibilities is important, and failure to perform parental duties may result in such acknowledgments being given to non-biological parents who had "actively taken the role of mother or father" (O'Connor 1990,7). According to Ban (1988), for Torres Strait Islanders traditional adoption practice was flexible and varied, recognising the advantages of maintaining fluid open boundaries between permanent and more temporary changes to parental rights. This is markedly different to the rigidity, uniformity and permanency of much modern western adoption practice in more recent times.

Ban further states that a significant difference between white western society adoption practices and traditional Torres Strait Islander practices can be identified in the 'relinquishing" of the child (Ban 1988, 1994,12). He asserts that little has been written about traditional Torres Strait Islander society adoption transactions, where it is both a personal and a social transaction that takes place between the families concerned. Ban (1988) continues that in these instances the child is given "as a gift" to another family, and this establishes a sense of obligation of the receiver toward the giver, which serves to "enhance the relationship between the two families who were able share an event (a person's life) in common" (Ban 1988,72).

Interestingly, Ban cites and comments on some of the findings of Beckett (n.d.) and MacDonald (1980), that traditional Torres Strait Islander adoption is an expression of continued good relations "but not a guarantee of them", and that "a sense of fragility exists in adoption agreements" where a quarrel can have deleterious effects on the adoption (1994,10).

MacDonald (1980) confirms in her research that traditional adoption most often stabilises the social order and allows for relations of greater depth, and of dependency and commitment between families. She further suggests that adoption is semantically addressed through predetermined kinship terms to acknowledge the desired transference of relationships, and cites the statement of Kitaoji (1976) that among Australian Aborigines "an adopted child may re-categorise his real mother by calling her auntie, sis, or by her nickname" (MacDonald 1980,13).

However, somewhat in contradiction to other information concerning traditional Torres Strait Islander adoption, Ban states that traditionally in Torres Strait Islander communities, attempts are made to protect the child from the knowledge of his or her adoption and, although as the child becomes older he or she generally finds out the identity of his or her parents, the telling of the adoption is "considered socially inappropriate and the transgressor receives social disapproval" (1994,11). Therefore it seems difficult to clarify from some of the literature, the intricacies, propriety, and boundaries inherent in the relationships of obligation and commitment that exists after the gift of a child is given in an adoption between Torres Strait Islander families. It may be that different practices exist in different clans or groups within this culture.

With reference to Aboriginal people, a culturally inappropriate system was forced upon Australian Aboriginal people under the guise of "protection", with the introduction of "The Aboriginals Protection and Restriction of the Sale of Opium Act 1897, Section 31 (6), which provides "for the care, custody, and education of the children of Aboriginals". According to Queensland Aboriginal and Torres Strait Islander Child Care Agencies (ACCA 1986,10),

"this blatant piece of legislation gave authorities the power to remove Aboriginal children from their parents, (and) these children were institutionalised, or put to work at homesteads and cattle stations".

Many thousands of Aboriginal children were made "wards of the state" in Australia between the 1880's and 1960's, the Act providing a legal authorisation for the forced removal of Aboriginal children from their families and their placement in white families or institutions (O'Shaughnessy 1994,70, Sommerlad 1977). In the name of assimilation this removal of children from the parents, their communities and from the source of their Aboriginal identity proved to be a tragic travesty of the best

interests of the child. It could be considered that the influence of the 300 year reign of the Britain's Poor Law was evident in such paternalistic, damaging actions toward indigenous Australian children by white Australians.

In 1976, at the first Australian national conference on Adoption, recommendations presented by the Aboriginal and Islander task group included: the immediate establishment of an Aboriginal and Torres Strait Islander adoption and fostering agency, that these agencies be controlled and staffed by people from these communities, that all Aboriginal and Torres Strait Islander children for placement be referred to such agencies, and that all adopted or fostered Aboriginal or Torres Strait Islander children had the right to know the name and locality of their biological parents (ACCA 1986,14,15).

Currently policies concerning the adoption of children from Aboriginal or Islander backgrounds differ across states. The Adoption of Children Act 1964-1991 (Qld) does not provide legally for the restricted placement of Aboriginal or Torres Strait Islander children in only culturally-matched families. Decisions are made at the discretion of the Director of the Department of Families, Youth and Community Care. However a policy statement exists which allows that people of Aboriginal and Islander descent should be dealt with in a specific way. This statement recognises that, unless it is considered that prospective appropriate adopters are unavailable, or that the welfare of the child would not be best served by doing so, Aboriginal and Islander children should be maintained within their family and community environment "so as to maintain their cultural integrity" (Zabar and Angus 1995). Such moves in Australia follow American and international trends for same-culture placements for indigenous children wherever possible. In the past, such placements were difficult, in part due to the failure of these community and family members to meet the stringent and culturally bias application criteria for potential adoptive parents (Bagley, Young and Scully 1993).

Concerning Torres Strait Islander adoption Ban (1994) explains that for many years under the Adoption of Children Act 1964 Torres Strait Islander customary adoptions were legalised via "rubber stamping" (Ban 1994,13), however pressure concerning these arrangements began mounting in the 1970's. Blanket approval was becoming a concern, and seen by some as contravening the Act. Discrepancies in the way the Act was being

administered finally appeared untenable and in 1985 the then Department of Family Services made a policy decision that it would no longer legalise these adoptions, stating that Islander adoption was not adoption as defined in the Act.

For the past eight years Torres Strait Islanders have been requesting recognition of customary adoption. A recent report requests that Islanders "themselves are able to define the many variations and changing nature of their traditional child care customs", and further it states that they require the legal system to recognise their own definitions and give authority to those definitions (Ban 1994,29). This report found that customary adoptions maintain the social order and the obligation of the customs, however such adoptions need legal recognition.

In the latest adoption statistics released concerning adoption in Australia, thirteen Aboriginal and Torres Strait Islander (ATSI) children were adopted in 1993-94, of whom seven were adopted by Aboriginal or Torres Strait Islander (ATSI) people. In Queensland in 1993-94 five ATSI children were adopted, one by relatives and four by non-relatives (Zabar and Angus 1995,13,27). These placements have been all culturally appropriate placements.

Cross-cultural adoption within Australia between Aboriginal and Torres Strait Islander families, and white families, is now regarded as not in the best interests of the child. This is applicable in the vast majority of cases, although cross-cultural adoption within these groups still does occur in Australia.

### **International, Cross-cultural Adoption**

Participating in the research described in this thesis were seven adoptive mothers with adopted children from a different cultural background to their own. Therefore an examination of the literature pertaining to cross-cultural adoption is justified.

English (1990) writes that much of the literature on "interracial and/or intercountry" adoption discusses the appropriateness or inappropriateness of such adoptions, and the implications on the identity of the adopted children (English 1990,vii). Concerning interracial adoption, the literature reflects concern that the needs of the child are often overlooked and that native minorities are disadvantaged when the adoption is by dominant

cultures (1990,viii). Where interracial/intercountry adoption occurs the literature appears more optimistic, although English cautions that more critical views originating from the country of origin (of the child) do not find their way into mainstream international literature.

Terms such as international, intercountry, trans-racial and cross-cultural adoption are terms which often appear to be used interchangeably in the literature. The term inter-country adoption is often used to describe an adoption which involves cross-cultural exchange between countries involving white couples and non-white children, although it seems that inter-country adoption has involved adoption across more similar cultural backgrounds, for example early British child migrants. Similarly, cross-cultural adoption often refers to inter-country adoption although such adoption may not necessarily involve inter-country exchange, as with the adoption of Aboriginal children into white families in Australia, and similarly black children into white homes in Britain and the United States. The use of the terms international adoption and cross-cultural adoption are favoured in this thesis.

International adoption has been associated with intense controversy. It has been seen by some as exploitation in which wealthy couples from first World countries unable to adopt in their own country, seek to satisfy their needs by treating Third World countries as a resource able to provide the means to meet such needs. Exploitation, trafficking of babies and sale of children have been considered serious potential problems in international adoption by many researchers, including Triseliotis (1989,25) who writes that:

"Because of the demand, profit-making agencies have set up in some countries whose sole aim is to traffic in third world children ....Trafficking in children has become the modern equivalent of the slave trade and the traffic is in an unmistakable direction from poor to rich countries".

Triseliotis (1989,23) further discusses this link between rich and poor players in adoption, identifying poverty as a factor in the available supply of babies, by stating that:

"there is a close relationship between high levels of poverty and an increasing number of non-marital children being released for adoption, or in some third world countries being sold ... On the other hand an increase in living standards like in many Western or Western-type countries as measured by the GNP seems

to bring about a gradual but steady reduction in non-marital children relinquished for adoption".

Triseliotis (1989,1993) postulates that it is improved living standards in Western countries, along with more liberal attitudes towards single parenthood, abortion and contraception, that have lead to a reduction in the social stigma associated with non-marital births, this evidenced in the mere trickle of babies now available for adoption in the face of increased birth rates of non-marital babies (Triseliotis 1989). Others consider inter-country adoption in terms of a humanitarian act.

Presenting arguments both for and against international adoption Triseliotis (1993) states many would argue that humanitarianism underpins international adoption, especially when children's own families or countries cannot care for them. He considers that proponents of international adoption would see that children's suffering, as a result of war, poverty and abandonment, is a problem of common humanity, in a world where rapid communication systems are creating a 'global village" and a "common human identity" (Triseliotis 1993,130-133). Further, although the proponents of international adoption would recognise that adoption can meet only a fraction of the needs in the supply countries, they view it as immoral to stand by when there are families willing to offer unconditional love and security in other countries. He continues that

"after all it could be further argued that when adoption legislation was introduced in Britain in the 1920's it was also against a background of a recent war and of considerable deprivation and poverty with relinquishing parents having possibly as little choice as relinquishing parents in Third world countries have now. To wait for improved social conditions would be tantamount to sacrificing an existing generation of children who need families now " (Triseliotis 1993,131).

Stonehouse (1992) states that international adoption in Australia began in any organised way in 1975 when large numbers of orphans from Vietnam (after the Vietnamese war) were airlifted to Australia. This, asserts Stonehouse, provides evidence that international adoption in Australia has its origins in humanitarianism.

Triseliotis also presents the opposing viewpoint on international adoption. He states that opponents of international adoption would argue that in a truly ecumenical society free of racism, international adoption would pose no problems. However, they would claim, we do not live in such a society.

Rather than a global village, increasingly boundaries are being drawn, nations wish to assert their cultural identities, and racism is widespread even if adoptive parents do not see barriers due to cultural differences. Triseliotis (1993) further considers that while available research suggests international adoptions work as well as domestic placements (although he queries the methodological and ethical soundness of some of this research) there are concerns about "children's lack of racial and ethnic identity, and about their exposure to racist behaviour" (1993,135). This is likely to be experienced as more rejecting and oppressive in countries with very small black populations . Further fears exist that as adoption becomes more open in the West, the scant information recorded and the unlikelihood of access requests, currently indicative of international child adoption, increases its desirability for some adoptive parents.

Opponents strongly argue that the humanitarian position allows continued exploitation of poorer countries, and ignores the needs of millions of children, and the needs of their countries for international aid. These critics would state that alternatives include adopting a child from a distance, where financial support allows children to remain in their own culture. Such alternatives adhere to the principles of giving respect to "the right of the child to preserve his or her identity through nationality, name and family relations" (The Convention on the Rights of the Child, Article 8).

Yet Humphrey and Humphrey (1993,6) comment that while some may argue against the propriety of international adoption, the realities of the Third World can be harsh, and they question is it

"better to risk a life of misery in the child's country of origin, which may include chronic malnutrition, disease and premature death, or should the opportunity for healthy growth and self-fulfilment be seized, albeit in an alien culture?"

Similarly Brennan argues that whilst many suggest that ideally children should remain "in the culture into which they are born", in order to maintain cultural identity (1993,170), such exponents do not act so much to defend the rights or interests of the child, as they do to defend the culture of the child's natural parents or the extended community. Indeed, the child, according to Brennan is "made to serve the culture involuntarily" (Brennan 1993, 171). Further Brennan (cited in Frith 1994)

"finds it objectionable that people should get all romantic about taking a child from its culture - there is no culture, he says, in institutional life" (Frith 1994, C1).

Frith's article found support in one reader's letter to the editor. This reader agrees that "there is little culture in an institution", and offers support to the perspective of an almost insistence of culture by adding:

"My experience and that of many friends who have adopted from overseas is that a lot of the children have a harder time in adolescence (and give their adoptive parents a harder time) than their Australian peers. I have found that they eventually get past it and become cheerful fully functioning people again. But why there is this unsettled period demands research. One reason I would argue, is that there is such pressure to make the child aware of its "other culture" that we adoptive parents are afraid to impose our own cultural values" (Letters to the Editor, The Canberra Times November 29th, 1994).

Mirroring these thoughts are those of Freeman (1993) who writes

"Brazil is a beautiful country, and when the children are older we will take them to visit it. But it is extremely corrupt and has a great social divide. A rich minority, vast shanty towns, very little birth-control, huge poverty-stricken families, drink and drug problems. Is that culture, I don't think so." (Freeman 1993,54).

However Thurnham (1993,140) recalls the "gross errors of judgement" revealed concerning the best interests of children sent to Australia and other countries under the British child migrant scheme. He refers further to the fact that while many are "now desperate to trace their natural families" this has proved to be a difficult task since vital information was not recorded, was withheld, was deliberately falsified, or was lost by the charities concerned (Thurnham 1993,140, Humphreys 1994,311). Thurnham argues that it is not always adequate or realistic that child welfare organisations and adoption agencies "uphold the dogma that transracial placements are inherently undesirable" (1993,145). Nevertheless he believes that intercountry adoption must be firmly based on the principle that it is a temporary solution to a child-care problem which is for the moment insurmountable for the donor country where, in the future, domestic adoption will be established. Some believe that it is legitimate to recognise that, within this context, such a program may benefit couples who are infertile or wish to complete their family (Fogerty, Sanders, and Webster 1989).

According to Zabar and Angus (1995), with reference to the development in Australia of cross-cultural international adoption (excluding British migrant children), from the mid seventies until the mid eighties, there was a

substantial increase in the number of Australian adoption orders pertaining to children born overseas. This predominantly involved children from Asian countries. The processes involved in these adoptions were strictly controlled by the Commonwealth Immigration (Guardian of Children) Act 1946, together with adoption Acts in each state.

The number of international cross-cultural adoptions in Australia increased steadily until 1989-90, but has since been declining. The New South Wales Law Reform Commission (NSWLRC 1994) considers that "inter-country adoption is arguably the most sensitive and complex aspect of adoption in Australia today" (1994,248), further stating that it involves all of the issues relating to domestic adoption together with a range of additional issues. There have been calls for the increased need, domestically, to protect the rights of the child from exploitation through intercountry adoption.

Internationally the rights of the child are protected through the 1989 Convention on the Rights of the Child (ICROC) and, "drawing inspiration" from Article 21 of that convention, the 1993 Hague Convention on International Cooperation and Protection of Children in Respect of Inter-country Adoption (Duncan 1993,9). In each of these conventions the rights of the child, and their rights to cultural origins are said to be paramount, although in each case these rights are qualified. In the case of the ICROC, it states that intercountry adoption may be considered if the child "cannot be placed .... or cared for in the child's country of origin" (Article 21, ICROC, Boss and Edwards 1992,281), while the Hague Convention on International Cooperation and Protection of Children in Respect of Inter-country adoption states that inter-country adoption shall only take place if the competent authorities "have determined, after the possibilities of placement in the child's own country of origin have been given due consideration, that an inter-country adoption is in the child's best interests" (Hague Convention Article 4, Boss and Edwards 1992,286). The ICROC restricts (but does not forbid) contact between prospective adopters and the child's parents, this intended to avoid the birth parents feeling pressured into giving consent. It prohibits the making of "improper financial or other gains in connection with intercountry adoption" (Duncan 1993,11).

In 1993-94 a total of 228 children born overseas were placed in Australia. Only five of these children were placed with relatives, with 22 children from

nine different countries being placed in Queensland (Zabar and Angus 1995,18).

## **Conclusion**

The above review of the literature traces the evolution of British, American and Australian international and domestic adoption, and outlines, to a lesser degree, the role of those involved in its practice. In doing so an attempt is made to place Australian and Queensland adoption practice within its historical, international and moral social work practice context. To gain further understanding of the influences of adoption research on the practice of adoption, a review and critique of previous and more recent Australian and international research on domestic and intercountry adoption is undertaken in the following chapter.

## **CHAPTER THREE**

### **ADOPTION: A RESEARCH CONTEXT**

#### **Introduction**

Informal adoption practice historically existed in many cultures, and adoption legislation grew out of a perceived need by some for more formal administration of adoption. This did not necessarily mean that adoption had the acceptance of all members of the public. According to Shaw (1984), in the 1920's and the 1930's internationally the general public responded cautiously to the new adoption legislation.

Shaw (1984) comments that the task of attracting public interest in formal adoption was not made easier by the dominant popular view at the time that "nature far outweighed nurture in determining an individual's personality and abilities" (1984,113). The professional response to these concerns was to design appropriate tests to attempt to predict a child's potential, in order that adoptive parents could be assured of a "perfect baby" and need not fear "bad blood" (1984,113). Such a response appears in keeping with the dominant ideology of the biological determinants of human behaviour. The validity of these tests were subsequently questioned and their appropriateness queried as the debate over genetic and social factors of development and their implications for adoption progressed, and research interest in the area of adoption increased.

#### **Early Research**

In the early years research interest in adoption focussed on the investigation of how adopted children had progressed. However, a major problem inherent in such investigation was the recruitment of a sample of adopted children. These children were, through adoption, integrated and indistinguishable, indeed invisible, in the community. Most visible were adopted persons who had returned to the public eye.

According to Shaw

"the most visible and - for a researcher accessible - adopted children are those referred to psychiatrists, psychologists, social workers and the courts, and the

1960's saw a considerable volume of research emanating from clinical experience in psychiatric and child guidance settings" (1984,114).

Shaw (1984) states that early researchers and workers, particularly psychodynamically-orientated workers, welcomed adoption's rich field of potential research diversity, from early separation, through the complexities of the oedipal phase, to adolescent identity formation and beyond.

Yet Shaw asserts that their

"emphasis on critically sensitive periods in early life and the generally pessimistic view of the human condition inherent in much psychodynamic thinking predisposed its adherents to regard adoption as a highly problematic enterprise for parents and children alike" (Shaw 1984,114).

Many, although not all studies conducted in the 1960's concluded that adopted children were over represented in referrals for psychiatric assessment and treatment (Humphreys and Ounsted 1963, Kirk 1964, Reece and Levin 1968, Schechter 1960, Simon and Senturia 1966, Toussieng 1962 cited in Kellmer-Pringle 1967)).

In one early study with adoptive families, Raleigh 1953 (cited in Kellmer-Pringle 1967) set out to study the existence of differences between emotionally disturbed adopted children and emotionally disturbed children from natural families, with both groups having been treated at a child guidance clinic. She found few significant differences between the two groups although she suggests that adoptive parents were less consistent with discipline, and that "adoptive mothers were more over-protective, defensive and over-anxious in their attitudes" (Kellmer-Pringle 1967,80). Of interest, concerning the trauma of infertility for adoptive parents, Raleigh states that not all adoptive parents "had special feelings about their inability to have children" (Raleigh, cited in Kellmer-Pringle 1967,80).

However, Schechter (1960) undertook research which implicated adoption. He conducted research by examining clinical case reports on children seen in private practice in 1953. The sample consisted of sixteen adopted children, these children a percentage of a total of 120 children seen during this time. Schechter concluded that difficulties arose because early "telling" coincided with the Oedipal conflict stage and that an adopted child at an immature age cannot cope with the knowledge of their rejection by their original parents. He further reported that the percentage of adopted children seen in private practice equalled 13.3 percent, as compared to the

national average of 0.13 percent; that is, adopted children were one hundred times more likely than non-adopted children to be referred for treatment (Kellmer-Pringle 1967). Such revelations had significant influence on adoption theory at the time.

However contrary to these findings, other researchers including Sweeney 1963 (cited in Kellmer-Pringle 1967), Bohman 1970, and Hoopes, Sherman, Lawder, Andrews and Lower 1970, found no very significant differences between adopted and non-adopted children's symptoms or behaviours, and they were critical of Schechter's claims. In particular Shaw (1984) draws attention to a flaw in methods in the work of Schechter (1960) which was that in

"lacking basic demographic data on which to draw he took as his baseline for comparison the number of adoption applications filed during the period in question, which would give a fair picture of the incidence of applications, but no indication of the prevalence, or cumulative total, of adopted children living in the area at the time" (Shaw 1984,114).

These contrary findings of little significant differences between adopted and non-adopted children support much earlier research by Theis (1924), who found that adopted children (many of these were fostered children), as adults, were able to take full advantage of opportunities, and that seventy five percent of participants were considered capable, law-abiding and of good moral standing. Theis found that what was most important for the "ultimate outcome", was the relationship between the child and the foster/adoptive parents (McWinnie 1967,37, Raynor 1980,6). Other researchers in the 1960's and 1970's found their results on the issue of whether more adopted children attend mental health services were inconclusive (Kirk, Jonassohn and Fish 1966, cited in Jacka 1973). Yet the influence of Schechter's findings prevailed.

Further criticisms of the findings that adopted children are more often referred to psychiatric services existed, with claims that adopted youngsters should not necessarily be stigmatised as a high-risk group, and that biased sampling, and the generalisation from clinic-attending adopted children has led to many erroneous conclusions (Herbert 1984). According to Shaw (1984), because adoption was seen as inherently problematic, teachers, doctors and magistrates were more likely to refer adopted children for professional attention. Compounding this, adoptive parents anxious to succeed as parents, and being older, and also familiar with professional

services after the adoption application process, may be more likely to seek professional help (although a counter-argument on the latter point, could be that some adoptive parents, after their experiences with adoption professionals during the assessment, in fact could be less likely to seek help from professionals).

Further it has been suggested that there may be some anxieties in the family for which help is sought related to the telling or not telling of the adoption and including "genetic anxiety", a term to describe the prevailing tendency to attribute behaviour to an inherited bad "streak" (Shaw 1984,117) or "bad blood" (Herbert 1984,88). Several of the above points query whether attendance at clinics always indicates the maladjustment of adopted persons or adoptive families, or the need for clinical intervention, and challenge the implications of Schechter's claims. However the early research by Schechter implicating the adoption as a major factor in adopted persons presenting to clinics, while attracting criticism for overstating the case, did encourage further important exploratory and evaluative research on how adopted children fared.

During the 1960's interest increased in research which could attempt to measure adoption success, although according to Shaw (1984) and others (Jaffee and Fanshell 1970), such a question:

"lead(s) the investigator into a minefield of value issues. The understandable desire of the interested bystander to know whether adopted children grow up to be bank robbers or bank presidents contains the somewhat dubious assumption that these occupations are mutually exclusive" (Shaw 1984,117).

It appears relevant that in research during the 1950's and 1960's, no single definition of adoption applied, rather step-child, legal guardianship, extended kinship visits, de-facto adoptions and foster child arrangements were frequently confused with adoption (Raynor 1980, 9, Shaw 1984,115, Tizard 1977).

Some of the many studies concerned with the outcome for adopted children drew a much more positive picture, particularly those studies which attempted to project the probable outcome for these children had they remained within the biological family or remained in an institution. Such studies were based on comparative psychological and physiological health and advancement between children adopted and those children who

remained institutionalised, and were also based on "before" and "after placement" data, including changes to intelligence levels (Benet 1976, Skeels 1965, Tizard 1977). However Shaw (1984) suggests that such a rosy picture may, in part, have been painted to counter-balance the impact of the early 1960's clinical studies.

### **How They Fared**

In 1968 in England, in an evaluation study of adoptions, Kornitzer found that 40% of adoptions were considered "a success", 36% were rated as "average" adoptions, 19% were rated as "problems" and 3% were termed "bad" or "failed, all seven in this bad or failed category being girls" (cited in Seglow, Pringle and Wedge (1972,36). Kornitzer offered insight into the practice of secrecy in adoption, warning of the

"far-reaching danger of secrecy and its deleterious effects on adopters and adopted ..... and the infected attitude common among all parties - children, adopting family and members of the public - of expecting trouble and waiting for it to appear" (cited in Jacka 1973).

Overall Kornitzer found that

"In the sense that most of the adoptive situations I found were apparently quite good, and a number of them very good, it did seem that in common terms adoption as practised in this country was a good thing, and that the institution itself had results useful for deprived children, adopters and the community. I did find, however, that there was a considerable element of self-deception and downright mental and emotional dishonesty in many adoption situations - and that this had been strengthened, if not created, by adoption agencies acting in all good faith and by the actual shaping of the laws and regulations, through a too easy acceptance of the need for secrecy in certain directions and without study of the psychological drawbacks of this kind of thinking and of these measures. In this Britain is not alone because the same sort of thing obtains in other countries, which are repeating what seems to me to be the same sort of mistakes." (Kornitzer, cited in Seglow, Pringle and Wedge 1972,36).

Further follow-up research with a "representative group of adopted children" (rather than a clinical sample) was undertaken by Seglow, Pringle and Wedge (1972,14). This significant study sample was drawn from a larger study concerning "virtually every baby born in England, Scotland and Wales during the week 3rd to 9th March 1958" (1972,18). Information

concerning the adopted child's abilities and attainment was secured through official records, and through interviews with teachers and with adoptive parents. Overall few differences were found between adopted and other children in behaviour, and adjustment in school at the age of seven years (Seglow, Kellmer-Pringle and Wedge 1972,18). However adopted children in middle-class homes did show more maladjusted behaviour than those from such homes in the cohort as a whole, and among the adopted children, adopted boys had more maladjusted behaviours than adopted girls, this suggesting that consideration of gender and social class are relevant in assessment. They concluded that the great majority of adoptive families were thought to be satisfactorily meeting the needs of their adopted children. This they viewed as all the more remarkable in view of

"the children's early vulnerability; community attitudes to adoption; the misconceptions regarding the influence of poor hereditary; and the fact that there is certainly room for improvements in adoption practice" (Seglow, Kellmer-Pringle and Wedge 1972,152).

They also highlighted that there were inherent differences and difficulties in adoption, including the fact that often an adoptive mother does not experience a pregnancy with the child nor can the adoptive father share these experiences, the adoptive parents do not have the preparatory period which they would share with each other and with friends and relatives, and adoptive parents are a minority group who have fewer opportunities to share common experiences with other people in similar circumstances. Seglow, Kellmer-Pringle and Wedge (1972) further identify that the illegitimacy of the child is something with which adoptive parents must deal. Of the last point they assert that as long as disapproval of illegitimacy exists in the community in which the adoptive family reside, then neither the adopted child nor the adoptive parents can entirely escape its influence, even if they themselves do not share the prejudice. Continuing, they further claim, (extensively quoting Rowe 1970), that

"because the importance of the blood tie still figures in popular and even legal thinking, (and) while infertility is considered by some to be an almost shameful condition, adoption is seen very much only as a second best. These attitudes are mirrored in the very terms which are used.....we have no adequate words .... available adjectives such as 'biological' and 'natural' have implicit value judgements .... The distinction between 'own' and 'adopted' is in such general

use, even by social workers, that its denigrating, almost insulting connotations passes unnoticed except by those who are wounded by it" (Seglow, Kellmer-Pringle and Wedge 1972,165).

Seglow, Kellmer-Pringle and Wedge (1972) lastly comment that adopted children need to know that they were born to another set of parents. However they found in their study that adoptive parents had limited knowledge of the child's background (although the adoptive parents did not necessarily see that more information was needed). All of the adoptive parents agreed that telling their children of their adoption status was not an easy task. Seglow, Kellmer-Pringle and Wedge conclude that the telling presents a "double-bind" for adoptive parents of, "make the child your own and tell him he isn't" (Seglow, Kellmer-Pringle and Wedge 1972,164), and they comment that for adoptive parents

"telling the child of their adoption status is perceived as setting in motion complex emotion-laden wheels which change the family dynamics and which may create problems for the growing child".

They concluded that it was little wonder that adoptive parents shrank from the task of telling especially as most receive so little professional help.

Kadushin's inquiry (1970) was concerned with the question of how children adopted when older, were progressing. He recruited 91 adoptive families over a ten year period from 1952 until 1962 from a Wisconsin department of welfare. The interviews with adoptive parents focused on whether the adoption was satisfactory or unsatisfactory, and on the problems encountered and the adaptations made. A major assumption made by this researcher was that "parental satisfaction is related to the child's functioning" (1970,409), and a limitation of this study was that only adoptive parents, and not the adopted children or adopted adults, were interviewed. All of the children were white, and mentally and physically normal but had been in the care of the agency because the "relationship between the natural parents and these children was most frequently characterised by physical neglect" (31% of the group were described as "having experienced an emotional relationship that was normally warm and accepting" with the natural parents, Kadushin 1970,408). One of Kadushin's unexpected findings was that there was a generally favourable outcome (74% success rate, 15% unsuccessful, and 11% equivocal) for these adoptions. In his view this could be explained in terms of the change to a home environment which actively attempted to meet the child's needs,

and the increase in the child's self esteem, perhaps linked to a change in status from working to middle class. He subsequently argued that children have varying capacities to deal with traumatic influences which enable many to surmount early developmental inhibitors. He found that further influencing factors were the selection of adoptive parents, and the careful and thorough preparation of children and adoptive parents. This influential research had major implications for adoption practice concerning older children, who previously had been regarded as less than suitable for adoption. A later study conducted by Clarke (1981,28) supports Kadushin's findings, with Clark concluding that:

"Studies of late adopted children, including some who were received by their permanent families very late, also give us cause for cautious optimism. Scientifically these studies, like others from different domains, are of importance in casting very grave doubts on the notion that there exists in early life a critical period for later satisfactory development".

The Swedish evaluative study undertaken by Bohman and his colleagues in 1970 involved the follow-up of a representative group ten years after placement. Adoptive parents, and teachers were interviewed concerning the outcome of the placement, and official records were examined. Results showed that, as with the research findings of American researchers Jaffee and Fanshell (1970), there was no valid evidence of a relationship between time spent in an institution and later emotional adjustment. Nor was there evidence of a relationship between the child's adjustment and adoptive parental age or attitudes to child rearing. Adopted children overall appeared to show an excess of mild emotional disturbances but no excess of marked disturbance. There did appear, however, to be a differential attitude towards boys, who were significantly less well adjusted than adopted girls (as found by Jaffee and Fanshell 1970, and Seglow, Kellmer Pringle and Wedge 1972), and Bohman concluded that this may be connected to the adoption, in particular connected with adoptive parents attitudes or uncertainty about the adoption whole process. Further follow-up genetic research by Bohman and associates found that stable adoptive families can be a powerful protective factor, for children genetically at risk although they state this certainly does not mean they believe that "adoption is always the answer for children and parents with social handicaps" (Bohman and Sigvardsson 1990,106). Overall their longitudinal studies reveal that the

"long term prognosis for adopted children is in no way worse than for children in the general population provided that the adoptive home is psychologically well prepared for the task of rearing non-biological children" (Bohman and Sigvardsson 1990,104).

According to Bagley, Young and Scully (1993) Bohman's research was recognised as pioneering an important link between two types of adoption research, one as a source for comparisons, considering the value of adopted children as a source of discovery because of the inherent "natural experiment" conditions of adoption, while the other, research to assist and benefit those involved in adoption processes (Bagley, Young and Scully 1993,19).

A study in Britain by Tizard assessed children (one third of whom were "mixed race", 1977,18) who had spent the first two to seven years of their childhood in an institution, and who were subsequently adopted, fostered or restored to their birth parents. Whether these arrangements were early or later in the children's lives established the sample groups. Tizard found that adoption appeared to successfully meet children's needs when it was considered alongside other alternatives after the children had experienced institutional care for several years (Tizard admits that what is missing is the testimony of the young children, the seeking of which was considered intrusive to the family). Of the 30 adopted children in her study she found that the twenty four early adopted (adopted between the age of two and four) reached above-average levels of achievement, and those adopted after four years of age tended to have average levels of achievement when compared to other children in the study.

Overall, the adoptive parents judged the adoptions as successful in most instances with only three couples expressing dissatisfaction. Tizard found that most adoptive parents "derived an unusual degree of satisfaction from their children" (1977,213) and indicators pointed to the existence of warm, supportive, close relationships between the children and their adoptive mothers and adoptive fathers. Interestingly, when success was measured using teachers' assessment of acceptable school behaviour, teachers

"described large and significant differences between the behaviour of adopted children and various comparison groups with a much larger proportion of the adopted children (about half) being described as restless, attention seeking, disobedient, irritable, solitary and unpopular children" (1977,216).

Tizard does not appear to further explore any disparity between teachers' assessments and adoptive parents' reports of their children, although perhaps a partial explanation may be found in a further finding by Tizard, that when adoptive parents felt satisfied with the adoption, and felt deeply attached to the child, "behaviour which most parents would have considered very difficult" was readily accommodated (1977,213).

Tizard considers that her findings support an earlier placement where possible, and support Bowlby's notion of the child's early attachment as having "an important effect on his (sic) later social development" (1977,230), but she indicates this may not necessarily be for all children.

In 1980 an Australian study, undertaken by Hockey (1980), was concerned with the adoption outcome of 137 infants who were either at risk of, or affected by an intellectual handicap. It was revealed that one third of the children had a "good or belonging" relationship with the adoptive family and less than one quarter had "failed badly" with the rest coping satisfactorily considering the difficulties inherent in such situations (1980,201). It was found that disruption often could be avoided if information such as family history was available to adoptive parents in order for them to make an informed decision about the adoption. Further it was found that when a disparity existed in intelligence between the biological and the adoptive parents (this considered perhaps attributable to the adoptive parents' middle class rather than working class status) and when a child of borderline intelligence was expected to fit into a family of above average intelligence, problems arose due to different interests and daily pastimes. Importantly, the greatest misfit was when the child's inabilities had not been fully recognised (Hockey 1980).

A very recent American follow up study of adoptees was conducted by Benson, Sharma, and Roehlkepartain (1994). They found little evidence supporting the claims that adopted adolescents are particularly vulnerable to mental health problems. Claiming that up until now there had never been a study undertaken in America with a large representative sample, their survey sought to examine the mental health and service needs of adolescents who were adopted as infants. They surveyed a total of 715 families, including 1,262 adoptive parents, 881 adopted adolescents and 78 of their non-adopted siblings, using scales to measure family functioning, marital satisfaction, adolescent and parent psychological health and family dynamics, and also to examine adoption services. They

found that adoption for most adopted adolescents "was a fact of life that is accepted with relative ease", that adopted adolescents are "as deeply attached to parents as are their non-adopted siblings", and that the adopted family exhibited higher than the national average family stability with low separation and divorce rates. Different from to the findings of Kornitzer (who found evidence that adoption appeared more problematic, and adoption breakdown more common for girls) and those of Jaffee and Fanshel (1970), Bohman and Sigvardsson (1990), and Seglow, Kellmer-Pringle and Wedge (1972) (that it was for boys that adoption was more difficult), in their American sample, Benson, Sharma, and Roehlkepartain (1994) found no significant evidence of gender differences concerning adoption as particularly problematic. Benson, Sharma, and Roehlkepartain (1994) do comment that "like all girls, adopted girls tend to face more struggles with identity and self esteem than boys" (1994,30).

The findings of Benson, Sharma, and Roehlkepartain (1994) further reveal that communication in families concerning adoption requires "a delicate balance" and that "too little or too much communication" about adoption can be detrimental (1994,7). They additionally found a positive relationship between adolescent mental health and:

- a strong emotional attachment between parent and child
- a goodness of fit in which adopted adolescents perceive a good match with parents values, interests and personality, and their world view. Of much less importance was the degree of physical similarity
- the use of positive approaches to the issues unique to adoptive families
- the affirmation of adoption without dwelling on it
- the successful management by parents of factors that can threaten the well being of adopted youth (Benson, Sharma, and Roehlkepartain 1994).

Of interest, their research reveals that trans-racially adopted children "of colour adopted by white parents" (1994,8) do as well on four different measures of psychological health as their white counterparts in same-race families. Overall the keys to success according to Benson, Sharma, and Roehlkepartain (1994) are: early placement (although it appears that all families in this study had adopted early in the child's life, giving little opportunity for adequate exploration of this issue), providing families with

professional support and training, and, as pinpointed in early positive research with regard to adoption, not necessarily judging adoption as "the culprit" at difficult points in the lives of adolescents, but recognising "the constellation of factors" and the "complex interplay of factors" at work (1994,8).

Overall it appears from this review of the evaluative research on how adopted children fared that some adoption failures existed, however research points to many satisfactory adoption outcomes where the developmental progress of adoptees in adoptive families was comparable with that of non-adopted children.

### **An Adoptee's Viewpoint**

In 1959 McWinnie undertook pioneering research in Scotland with fifty eight adult adopted persons, one of the few studies until recent years (with the exception of a study by Theis in 1924) to acknowledge and seek to document the missing point of view of adoptees; what it felt like to grow up being adopted (McWinnie 1967). Of significance, this was one of few studies at the time which did not draw a sample from clinical services, nor were participants recruited after experiencing a breakdown in their adoption placement. McWinnie found several factors which negatively correlated with good adjustment including if adoptive parents or the extended adoptive family held negative attitudes towards illegitimacy, or towards bad blood or biological parents, if an unstable marriage relationship existed between adoptive parents, or if there were difficulties in parent-child communications. One finding, the extent of which was unexpected, was that communication within adoptive families about adoption "was on the whole one-way, from adoptive parents to child" with the child feeling unable to ask for information (McWinnie 1967,264). Contradicting Schechter's warnings of the risks of early telling, McWinnie recommended that telling a child of their adoption status should occur ideally before age five to avoid risk of uncertainty and trauma. She further reported, as did Raynor in later research in 1980, that there was a correlation between searching and the quality of the relationship between adoptive parents and their adopted child. Such a relationship is also discussed by Triseliotis in his 1973 research. However somewhat in contradiction to her comments concerning the quality of relationships between adopted persons searching and their adoptive parents, McWinnie

concluded that overall, while most individuals wanted to have factual information about their biological parents, it was the "adoptive parents whom they viewed as their real parents" (McWinnie 1967,264). McWinnie also found evidence of the stigma of adoption, reporting that the comments of outsiders may frequently be critical and cruel.

McWinnie acknowledges the importance of both parental attitudes and community attitudes in adoption, as does Bohman in later research (1970) although neither Bohman nor McWinnie assert to the same degree as do Seglow, Kellmer-Pringle and Wedge (1972) that community prejudice towards illegitimacy, blood ties and adoption remains an important influential factor, even when parental attitudes do not include such prejudice. Concerning adoption practice, McWinnie advocated for, as have others in more recent research, "critical reappraisal" of the methods and supervision of organisations undertaking adoption work (McWinnie 1967,269, Seglow, Kellmer-Pringle and Wedge 1972, Cole and Donley 1990). McWinnie's work in the area of adopted persons made a very well respected and significant contribution to adoption research and knowledge.

In 1970, building on the work of McWinnie, influential research was undertaken in Scotland by Triseliotis, another internationally renowned contributor to adoption literature. Triseliotis set out to document adopted persons' reasons for searching for information about their origins, including their motivation, needs and objectives for seeking information. According to Triseliotis (1973) the implication of what most adoptees were saying was

"that without knowing about one's origins and genealogy it was difficult if not impossible to understand oneself or one's abilities, potential or characteristics. One's forebears are an extension of oneself and in the case of the adoptee it extends to two sets of genealogies. A sense of security and belonging was seen by them to be built among other things, on this kind of genealogical identification" (Triseliotis 1973,43).

Such a view is supported by Sants (1964) and is also in keeping with the writings of psychological identity development theorists, for example Erikson (1959).

Of significance, Triseliotis found in his sample that "almost half the adoptees in the sample perceived their adoptive home life as being mostly unsatisfactory" (1973,77), which they attributed to poor family relationships. He found that the greater the dissatisfaction, the greater the possibility that

the adoptee would be searching to meet original parents, with many "hoping to establish a relationship" with them (1973,159). Conversely, "the greater the satisfaction with their home life, the greater the possibility they would only be looking for additional background information to fill the gaps or tie loose ends" (1973,77,78). McWinnie (1967) had similarly found that there was a correlation between searching and the quality of the relationship between adoptive parents and their adopted child. Interestingly no such relationship was found in a recent Australian follow up study of those seeking information from a Victorian adoption information service. Phillip Swain (1992), while reporting that some adoption or foster experiences may have been less than ideal, regards as myth that those who search do so because of "some personal or psychological inadequacy, or because of a bad adoption experience" (1992,31). He further reports that very few adoptees search to re-create a family experience but rather search out of curiosity to know their origins.

Of interest is one comment by Triseliotis that "unlike the majority of adoptees who became very curious, especially in adolescence, a very small number said that once told they did not desire more information until their early twenties" (1973,47). This curiosity that they were now experiencing in their twenties was explained by Triseliotis as "belated adolescence" due to the adoptees' sheltered upbringing (1973,47). Such an explanation concerning the curiosity of adoptees may be misleading on two counts to the less than discerning reader. Firstly, since Triseliotis only recruited to his study those adoptees who actively sought information (a "very small number of adopted people", Triseliotis 1973,134), we know nothing of the curiosity of those in their adolescent years nor in their twenties, thirties, forties, and so on. Seemingly it would not be intended that we consider that those older adoptees not searching are yet to experience "belated adolescence". Secondly, this explanation may ignore the individuality and complexity of adoptees' needs, and fail to recognise the myriad of experiences across the lifecycle any of which may inhibit, or may provide the impetus for, adoptees to seek additional information about their past, a point Triseliotis (1973) himself argues in his summary and elsewhere (Triseliotis 1984).

Triseliotis found that in particular those adoptees who were very critical of their adoptive parents, or who felt no sense of belonging, and rather felt a sense of alienation, were firm believers in the "blood tie bond" and "blood is thicker than water" theories (1973,67). However he reports that one

adoptee in his study with such a belief in blood-ties changed his views drastically after meeting his original mother, and was subsequently "certain it is the people that bring you up that matter" (1973,68). An intriguing question may be how "blood" relationships came to be valued by an individual whose own experience was of adoptive relationships. One explanation may be found in the assertion by Seglow, Pringle and Wedge (1972) that prejudice in community attitudes, even when such prejudice is absent in the attitudes of adoptive parents, is an influence which may be difficult to avoid.

Triseliotis (1973) further found, in support of McWinnie's findings, that the telling at an early age was beneficial, and it "gave adoptees a feeling of well being, of being special and of having something to be proud of" even if at the time of the telling understanding was limited (1973,31). Triseliotis argues that even if it is at odds with current expert thinking, being told of their "special" "chosen" status in such terms, made adoptees "feel good" (1973,33).

In 1980 an Australian study sought to establish if legislation in Victoria should be enacted to permit adopted persons access to original records (Picton and Bieske-Vos 1980). A total sample of eighty six included forty eight adoptees, thirty two "relinquishing" parents, three adoptive parents and three relatives. It is not claimed that this sample, secured through a letter reproduced in a Jigsaw newsletter, is a representative sample, nor that these views are representative of anything other than the views of the participants, who had all "expressed a wish to know about their origins" (1980,33). Participants were interviewed where possible (in eleven cases distance prevented an interview and the questionnaires were forwarded by mail). They found that a most consistent theme was that adoptees wanted to know about their personal history and genealogy to complete an identity felt to be incomplete. This could be an expected outcome from such a sample (secured through a search and reunion agency).

In contrast to the findings of McWinnie and Triseliotis, but reflecting the later findings of Phillip Swain's Australian research (and a possibility of cultural differences between Scotland and Australia) a relationship was not found to exist between a need to know about origins and the quality of the relationship with the adoptive parents. Nor was a relationship found to exist between searching and the age at which a child was told about their adoption status (or the means by which they were told).

Picton and Bieske-Vos recommend that the legal right of all adoptees on attaining the age of eighteen years is to obtain a copy of their original birth certificate and that adoption agencies should regard adoption as a lifetime process and offer continuing service to all parties to adoption . The authors of this study report, as do many adoption researchers, that there is an urgent need for support for adoptive families particularly after the adoption order has been finalised, and that this support "should include an attempt to present realistically the relinquishing parents' points of view and their possible future aspirations and needs" (1980,75-81). However the contribution made by adoptive parents to this study is not clearly outlined in this report, nor why their's was a minimal contribution (three adoptive parents) when compared with the contribution of adopted persons and birth parents.

Overall from an adoptee's perspective, it appears that the reality for some adoptees was that unsatisfactory adoptive relationships were experienced, and that links may exist between the seeking of information of genealogical origins and such unsatisfactory relationships. However it also appeared that curiosity concerning their genealogical past was not unusual for most adoptees and, further, that it often existed even where poor quality of adoptive relationships was not implicated, this being contrary to the findings of Triseliotis (1973) and McWinnie. A multitude of factors may influence when or if an adoptee acts upon such curiosity. Early knowledge of the adoption, the family's and, in particular, the community's attitudes to adoption issues, and access to information appeared to be important issues for adoptees and their families.

## **Research With Birth Parents**

### **Birth Mothers**

It was not until more recently that the plight of the less visible birth mothers was revealed, and the enduring nature of the grief many of them suffered recognised. This was a result of groundbreaking research by several researchers. In 1978 Sorosky, Baran and Pannor undertook to document the experiences of 38 birth parents (36 mothers and 2 fathers) ranging in age from twenty to sixty two. Communication was also called for from the other parties to adoption. All had relinquished babies during the first six months of the baby's life, and most babies were less than one week old.

The sample was secured through "media publicity" (1984,14). They found that fifty percent of participants said they continued to have feelings of "loss, pain and mourning" (1984,52) over the child they had relinquished (the number of years since the relinquishment ranged from less than one year, to thirty three years). Eighty two percent were interested in a reunion with the child when they reached adulthood and only "five percent said they wished to forget the past" (1984,52). In most instances the birth parents had shared information of the child with their husbands and family. Thirty one percent of the birth parents "expressed feelings of comfort" with the decision they had made. Only five percent were actively searching for the adoptee. Ninety five percent of birth parents were interested in updating the information held in the agency case records. Eighty seven percent of the birth parents described their relationship with their own parents as fair to poor. According to Sorosky, Baran and Pannor one thing that stood out in the examination of reunion cases was the positive benefits the majority of adoptees gained through reunion. It also appears evident that as a result of reunion, the relationships with adoptive families were enhanced even when reunion resulted in ongoing contact between the adoptee and the birth family. For the birth family it was revealed that the experience provided an opportunity to resolve old guilt feelings and to erase years of wondering about the fate of their relinquished child. The authors of this study recommended that there be access to birth records upon request.

Such revelations were followed by further illuminating writing and research with birth mothers including that conducted by Inglis (1984) and by Winkler and Van Keppel (1984).

Inglis (1984) conducted a survey in Western Australia with 300 mothers who had placed a child for adoption. She found that rather than having an easy escape from condemnation for their breach of social, moral and religious codes, these mothers suffered a sense of loss that often increased over time, and that an absence of any avenue to gain information about the child compounded the problem.

Another study in Western Australia was conducted by Winkler and Van Keppel with 213 women who relinquished a first child for adoption when they were young and single. They found that placing a child for adoption was a very stressful life event and the effects of relinquishment for many mothers were negative and long lasting. Indeed, approximately half the women in the study reported feeling an increasing sense of loss over

periods of up to thirty years with the sense of loss being worse at particular, times for example on the child's birthday and on Mother's Day. Further they found that birth mothers, compared to a carefully matched comparison group of women, had significantly more problems of psychological adjustment. The most deleterious factors, which made for difficult adjustment to the relinquishment, were absence of opportunity to talk through feelings about relinquishment, lack of social supports, and the continuing sense of loss about the child. However, it was not the case that all women who had relinquished a child for adoption reported negative adjustment to relinquishment; Winkler and Van Keppel report there "was approximately a normal distribution of outcomes" (1984,1). Many relinquishing mothers in this study made it clear that their sense of loss and their problems of adjustment would be eased by knowledge about what had happened to the child they had placed for adoption. The research findings clearly indicated that to view all relinquishing mothers as women who were able to "put the problem behind them" was an incorrect perception, nor were they callous or heartless in giving their child up, but rather the majority of women in this study spoke of few alternatives (1984,2). This study recommended greater availability of counselling services for relinquishing mothers, increased availability of information concerning the child, and adoption legislative reform to allow for greater openness in adoption and access to original birth certificates for adoptees.

### **Birth Fathers**

Of importance is an American study by Deykin, Patti and Ryan (1988) detailing the experiences of birth fathers. These researchers write that the fathers of children relinquished for adoption have been largely ignored, and they claim that nothing is known about these fathers. The findings of the study bear some similarities to those of studies with birth mothers. Seventy two percent of birth fathers stated that their current feelings about the adoption were negative, and elapsed time since surrender was not found to be associated with these negative feelings. Many birth fathers identified external pressures such as family pressures, pressures from doctors, and the negative attitudes held by some adoption agencies, together with a soured relationship with the birth mother as influencing factors in the decision made to surrender the child. These were also identified as influencing factors in their exclusion from the adoption process. A

significant difference in these findings, when compared to research findings with birth mothers, was with reference to birth fathers' motivation to search for and reunite with the child placed for adoption. While birth mothers' motivation to search has not been related to thoughts of retrieval, it was highly correlated with search activity in birth fathers. This study was undertaken with 125 men who identified themselves as birth fathers, and perhaps of significance, 44% of birth fathers had at some time been married to the birth mother. These latter points perhaps challenge previous notions of the irresponsible, abandoning birth father and illustrate a depth of feeling of birth fathers for their children previously given little recognition.

In summary it appears that until recently little knowledge existed concerning the experiences of birth parents and little recognition was shown for their ongoing sense of mourning for the relinquished child. The necessity for compassion and support for birth mothers and fathers, and the availability of information concerning the adult adoptee was indicated.

### **Adoption Processes and Adoptive Families**

In the late 1950's in Britain research was undertaken by Goodacre to examine adoption processes. Almost three hundred adoption case studies were examined, a study of the policies of all adoption agencies involved was undertaken, and ninety adoptive families were selected for interviews. Goodacre found that a "church-going Christian" couple had a considerable advantage in the application process (Goodacre 1966,29), and that several agencies only accepted childless couples in the best interest of the child and "in fairness" (Goodacre 1966,33). She found that the single most distinguishing factor between government and private agencies was that while a high proportion of adoptive couples who adopted through Children's Departments were working class, a high proportion adopting through registered, non-government agencies were middle or upper class (a partial explanation offered by Goodacre of this situation was that some of the applications through the local authorities concerned children previously fostered). Goodacre further found that recruitment and selection policy was "profoundly influenced" by the manner in which the agency's work had been organised, by "staffing" (staffing numbers, and whether staff were professionally trained) and further by "the amount of delegation, and the area covered" (1966,37). Goodacre revealed that agencies faced with too many applicants used strategies such as deferring applicants for months

without giving them any information, waiting lists were closed, every tenth couple was investigated, and, "unlikely looking couples, as indicated by their style of letters" were "automatically discarded" (1966,39). On the concept of matching Goodacre found few formal policies existed but that while government departments held that few if any children should be ruled as unacceptable for adoption, certain adoption agencies "prided themselves on being highly selective in placing only guaranteed babies from good respectable homes" (1966,61) with matched families. However, confusingly, little background information was available, particularly concerning the natural fathers, and indeed some agencies held that "for all intents and purposes the child's natural parents are dead, so there is little point delving into the past" (Goodacre 1966,65). Goodacre found evidence that at some agencies applicants were given no more information than "the absolute minimum" (1966,67) while most were given "relevant" information. However she found that for adoptive couples, information about the natural parents was useful, and even "prized" by some adoptive parents. Goodacre further found that matching in temperament or physical appearance was mentioned as important ("fair and slim like all of us") but that even when no claim of obvious matching could be made, likenesses in expression or a turn of phrase were claimed by adoptive parents of older adopted children, with "evident satisfaction" (1966,70,71). Goodacre also revealed evidence in adoptive parents' comments of a belief in the influence of the environment ("parents could mould him into their patterns") but that these views existed alongside and at odds with concerns about "inheritable traits" (1966,65). Of significance, Goodacre reports that, when compared to the time spent on the selection of adoptive parents, very little time was spent on preparation for their new role. Goodacre further found that for adoptive mothers in the new role of mother, having to establish themselves and their adopted children in the eyes of their relatives was not without difficulty.

Speaking of the professional relationship between adoption workers and adoptive parents, Goodacre concluded that the pre-placement relationship with the worker did influence the kind of relationship that could be established in the post adoption period of supervision.

An American study undertaken by Jaffee and Fanshell in 1970 involved the interviewing of 100 families gathering data retrospectively from adoptive parents, on the general success of the adoption from their perspective. Findings revealed that boys may adjust less well than girls (contrary to

Kornitzer's findings but similar to those of Bohman 1970 and Seglow, Kellmer-Pringle and Wedge 1972), that the number of pre-adoption placements the child had did not effect the outcome to any degree, that the arrival of a subsequent adopted or natural child was not significant to familial adjustment, and that the presence of children prior to the adoption had a favourable influence. Interestingly they found that the influence of the socio-economic status of the family was less marked than they had expected, with the main difference being that families with higher socio-economic status tended to report more personality problems in the adopted children than did their lower status counterparts. At an organisational level, they formed the view that expert professional knowledge in adoption was needed in order that adoptive families receive support, as evidenced in this comment:

"agencies ought to go beyond their present primary role of acting as 'brokers' i.e. bringing couples and babies together. Rather, we believe they should become experts on adoptive family life" (Jaffee and Fanshel 1970, 315).

In 1964 David Kirk undertook research with adoptive parents. A sociologist and an adoptive parent, Kirk is renowned in Canada and internationally as one of the pioneer researchers in the area of adoptive kinship. He identified important themes in adoptive family relationships, including the concept of role handicaps, and the coping strategies of "acknowledgment of differences (AD)", or "rejection of differences (RD)". Kirk suggested that adoptive parents who are willing to acknowledge differences are more likely to establish satisfying, open relationships with their children. However Kirk believed that those who reject differences will create family communication patterns where children feel uncomfortable or reluctant to ask questions about their origins, and that these patterns create and maintain a barrier to open communication concerning the biological parents. He recommended that acknowledgment of differences was the most desirable strategy while rejection of differences was an undesirable position of denial.

More recent research by Di Giulio (1987), using Kirk's concepts, found acknowledgment of differences was the preferred position and that adoptive parents taking up such a position were more receptive to the opening of sealed records. While David Kirks' model of coping strategies may be restrictive in advocating only one desirable and appropriate coping position for adoptive parents, this research was significant, presenting

research findings which were in direct conflict with adoption practice at the time on issues such as maintaining secrecy in adoption, ignoring differences, and maintaining a "raise as if born to you" family philosophy (Kirk 1964). According to Iwanek (1989) Kirk's contribution to the literature may have instigated a shift from adoption being considered as an event, to adoption being seen more as a lifelong process.

More recent research with 40 adoptive families by Kaye and Warren (Kaye 1990), used Kirk's concepts of the acknowledgment or rejection of differences, although labelling these "high versus low distinguishing" (Kaye 1990,132). They found that, rather than a uni-dimensional high versus low continuum, what they saw was "more subtle and multifaceted than the literature suggests" (1990,132). However they acknowledge that the idea of a uni-dimensional continuum "comes more out of his (Kirk's) discussion and others' oversimplification of it, than out of his data" (Kaye 1990,132).

Further on the topic of differences, recent research undertaken in Norway with adoptees in cross-cultural placements, revealed that Kirk's theory does not really explain the situation when transracial intercountry adoption applies, and that

"only if we add a third dimension "Stressing-the-difference" to the model, thus making the model more complex, can we obtain a deeper understanding of what is happening" (Dalen and Saetersdal 1987,45).

Similarly, research by Brodzinsky and Reeves (Brodzinsky 1990,21) suggested that broadening Kirk's model to incorporate "insistence-of-differences" (ID) provides further understanding. However, of significance, support was not forthcoming from their research for Kirk's finding that "rejection of differences" by adoptive parents was inappropriate on all occasions, rather Brodzinsky reports that

"rejection of differences is not necessarily a detrimental coping pattern. In fact it may well be a beneficial one at least under certain circumstances .... In the initial stages of the family life cycle, when children are still very young, an RD coping pattern may serve the family well by supporting the primary socialisation goals of building family unity, connectedness, and interpersonal trust" (Brodzinsky 1990,21).

A British study by Raynor (1980) examined the experiences of 160 adoptive parents, and the experiences of 105 children of these parents. These adoptees were either directly adopted, or adopted after a foster placement.

With reference to one of the core questions of the research, concerning whether "adopting one's foster child was more or less satisfying or rewarding than adopting a child directly from an adoption agency" (1980,144) there appeared to be few differences between these groups in the ultimate satisfaction of the placement.

Concerning the "telling", Raynor found that telling the child early about the adoption provided the best outcome for the child and the family (as had been recommended by McWinnie), but that adoptive parents frequently had difficulty discussing the adoption with their child. Addressing this, she states "social workers have greatly underestimated the difficulties adopters have in explaining the facts to their children" (1980,148), and that these findings add to the growing chain of evidence calling for a "genuine and profound re-think of adoption agencies' post-placement responsibilities" (1980,154). Raynor emphasises that post adoption services should be an integral part of any agency's adoption service provision.

Raynor also found that age at adoption did not contribute to any particular outcome, and that overall 73% of adoptees (n=105) had good or excellent life adjustment, while 6% had very poor adjustment (had criminal histories or were mentally ill), these percentages seen as not differing greatly from those to be found in the general population.

Raynor's research appears to provide support for the work of Raleigh (1953, cited in Kellmer-Pringle 1967), with Raynor presenting findings of adoptive parents who seemed to her to be anxious, overprotective parents who were often unwilling to discuss adoption, who "had forgotten" information concerning their child's adoption, and who seemed reluctant to let their children go after adolescence (1980,95). However two thirds of adoptive parents assessed their relationship with their child as close, and additional adoptive parents reported that their early relationship with their child had been close until the disruption of the turbulent adolescent years. Three quarters of the adoptees reported a close relationship with one or both parents, with "an abundance of love and caring the dominant recollection of the great majority of adoptees" although Raynor writes that this must be set against a picture where for a minority of adoptees, things had not been so happy (Raynor 1980,106).

Differing from the above parents' experiences, eleven sets of parents (7%) said they had never felt close to their child, while fifteen adoptees (14%) said they had never felt close to either adoptive parent, including several

adoptees who reported abusive environments. With reference to their place within the family group, the vast majority of adoptees reported being treated as if they were a natural child of the family. However some felt more like a foster child, while others had not felt like a natural child, nor had they felt inferior to a natural child, but had in fact been indulged and overprotected by the adoptive parents to a degree that they suspect would not happen to a biological child. Of further interest, and perhaps offering another perspective to Kirk's theory of acknowledgment or rejection of differences, Raynor (1980) believes that perceptions of differences or likenesses may be important. She gives an example of one very quiet adoptee who was not guided or disciplined like the other boisterous children in this active and hearty family. The adoptive parents felt she was so different that , "they could only leave her to develop in her own way", while in contrast the adoptee "felt she could have used some guidance" (Raynor 1980,108). Raynor comments that:

"No doubt adoptive parents find it easier to parent a child who is like them, but probably the children also begin to see likenesses when they are treated as though born to the parents, with the result that these feelings may be built up through interactions" (1980,108).

However Raynor also notes that

"to force a child into the likeness of one who might have been born to the family was markedly unsuccessful and resulted in much unhappiness" (1980,149).

Raynor admits that in "recent years much scorn has been heaped on the concept of matching a child to prospective adopters", and that the impossibility of social workers making an accurate prediction of the child's future personality, appearance, and intellectual capacity was well recognised (Raynor 1980,152). Additionally she recognises the

"successful placement of black children in white families can also be put forward as proof that matching is at best irrelevant, and at worst damaging, in that it appears to collude with people's fantasies and with their unwillingness to accept the inherent differences of adoptive parenthood (1980,152).

However Raynor is confident that

"the findings of this study are unequivocal. Both adoptive parents and their grown-up children have made it clear that a feeling of likeness is part of a feeling of kinship and that a characteristic of less than happy adoptions is a sense of difference and not belonging" (1980,152).

It appears overall that while acknowledgment of differences in adoption is important, it also is of importance that adopted children and adoptive parents feel a sense of likeness and a sense of fitting with one another, and that this should not be underestimated or denied. Further, that appropriate selection and preparation processes and an ongoing supportive relationship between adoptive families and professional workers could be advantageous for adoptees and for improved adoptive family relationships.

### **International Cross-Cultural Research**

Thus far, the literature review has presented adoption in its historical and contemporary research context. However, due to the participation in this research of seven adoptive mothers mothering children from a different cultural background to their own, the review is only complete with an examination of a selection of cross-cultural research studies.

In his review of the international adoption literature English (1990) outlines a Swedish study by Gardell which examined intercountry adoption between 1950 and 1970. The study was concerned with language development, social relationships, identity development, and children's experience of discrimination, particularly at school. That study found overall that children adopted from overseas were well-adjusted at school, and had strong relationships with their adoptive parents after an initially difficult period. Difficulties increased with the age of the child at the time of the adoption. Twenty five percent of the adoptees reported experiencing discrimination, including school yard violence, which they attributed to their differences in cultural origin. Ten years later Dalen and Saetersdal (1987) had similar positive findings to Gardell concerning long-term adjustment and family relationships. However they also found some "shadows in an otherwise rosy picture" (1987,43).

Dalen and Saetersdal describe a "typical transracial adoptee" in the teenage years, as well adjusted, strongly attached to their family although somewhat insecure, uncertain about the future, and afraid and unwilling to take risks (1987,43). They were often found to offer less teenage protest, and to dislike being singled out. They did not deny their adoptive status, but did appear to "underplay it" (1987,43). Similarly a study by Feigelman and Silverman (1989) found transracially adopted children, after six years in the adoptive family, generally faced no more adjustment problems than

their domestically adopted counterparts. Adolescent problems were common in the sample, these attributed in part to placement over the age of five, and opposition from family and friends to the adoption of overseas born children.

Presenting a more critical view Bagley, Young and Scully (1993) report on research undertaken by Bagley and Young on the adjustment of 30 "mixed-race" adopted children in Britain (1993,74). They found that one fifth of adoptive parents had little contact with the black community, held some stereotyped views of black people and were not concerned with conveying to their children any positive feelings about a black identity. Yet these authors stressed that the overall adjustment of the children was good. Similarly Tizard (discussed in detail above) found that adoption presented a second chance for the mixed-race adopted children in her study when considering the alternatives of restoration of the child to a family unable to provide adequately for the child, or institutional or foster care. However she found some adoptive parents were failing to meet the child's needs regarding an adequate ethnic self-concept (Tizard 1977). However, a study by Kim (1977) of Korean children adopted by American couples, including children with physical and intellectual disabilities, found that in spite of dramatic changes in their lives they had made impressive progress, this due more to the warmth of the adoptive family environment and less to do with presence or absence of emphasis on cultural identity (Kim 1977).

In 1986, in an Australian study, Harper found the majority of adoptive parents who had undertaken international adoption of older children had fewer problems of attachment if the children were under the age of four at the time of the adoption, and if the adoptive fathers were involved in their care. Most adoptive parents rated the adoption a success (the response rate was 27 of a total of 110 mailed questionnaires). In other Australian research, Harvey (1980), found that difficulties reported were more prevalent in children aged four to six at the time of placement, and few difficulties were found by adoptive parents adopting younger infants. Harvey highlighted the need for open discussion between adoptive parents and their children, and challenged the conservative nature of adoption selection models derived from domestic adoption and applied to intercountry adoption. Harvey recommended that in the selection criteria for applicants a discussion of the motivation for the adoption and the couple's appreciation of their capacity to parent a child who could never be observed by others as their own was necessary. Harvey also highlighted

the necessity of, yet the almost total absence of, post-placement counselling services.

A review of Dutch research pertaining to international cross-cultural adoption, conducted by Loenen and Hoksbergen in 1986, noted that most research in Holland revealed strong family attachments, with some teenage problems among adoptees. These problems were considered to be more closely related to adoption, including the circumstances surrounding the adoptees' placement for adoption, than to ethnic differences. They stress their review also highlights the need for open discussion between adoptive parents and their children surrounding the adoption and the child's origins, in a way "which does not lead to a sense of 'unbelonging' in the child (English 1990,xi, Loenen and Hoksbergen 1986,26).

Bagley, Young and Scully (1993), with reference to their review of the literature on international adoption, write that their research reveals that just as racial and ethnic marriages are a growing reality in today's society, with successful outcomes for forthcoming children, so too are black adoptees in white homes "emerging in the 1980's and 1990's as bright, emotionally stable young men and women, with secure identities" (1993,72). Of their own research over a ten year period with Vietnamese adoptees they write that "being ethnically different from parents and siblings did not seem to have any negative impact on the lives of these teenagers" in a large majority of instances (1993,212). The research points to support for the continuation of cross-cultural adoption in the face of growing discontent with such adoptions and calls made for more appropriate same-race placements. However they do refer to research examining the cross-cultural adoption of "indigenous black and aboriginal children" in North America (Green, cited in Bagley, Young and Scully 1993) which concluded that such cross-cultural adoptions have a very poor outcome. Bagley, Young and Scully offer some explanations for this including the historical context of forced removal, oppression and institutional racism.

Overall, the international cross-cultural adoption literature suggests that such adoptions are encouragingly successful with some initial and some recurring difficulties in adjustment, particularly in the adolescent years. Preparation specific to cross-cultural placements, and post placement services are recommended. However it is unclear, and appears little discussed in the cross-cultural adoption literature, what the distinguishing factors are which provide a reported generally positive outcome of

international cross-cultural adoption, yet a poor outcome for cross-cultural adoption of native children.

## **Conclusion**

The above review of the literature attempts to place Australian and Queensland adoption practice within a local and international, historical and contemporary research context. This review suggests that a number of studies have had a major impact on adoption practice, for example Schechter's (1960) research concerning the disproportionate referral of adopted children to mental health services, pioneering research by McWinnie and Triseliotis concerning access of information about their origins for adoptees (1967,1973), and world renowned research with adoptive families concerning acknowledgment or rejection of differences by Kirk (1964). Revelations concerning the lifelong grief and loss experienced by many birth mothers (Sorosky, Baran and Pannor 1978, Inglis 1984, and Winkler and Van Keppel 1984) were welcomed. Other research examined may have attracted less international attention. However, it could be suggested that in addition to considering the studies examined here as confirming, challenging, superseding or of lesser significance than other studies, there is value in considering that these local and international studies all have made a contribution to building a credible body of evidence of both the similarities and the diversity of experiences in the lives of many individuals touched by adoption. Nevertheless, the mothering experiences of adoptive mothers do not feature strongly in previous research.

To gain further understanding of unique adoption experiences, perspectives and processes from a theoretical perspective, a selection of current theories and explanations relevant to gaining such an understanding, are examined in greater detail in the following chapter.

## CHAPTER FOUR

### ADOPTION: A THEORETICAL CONTEXT

#### **Introduction**

In order to gain a deeper understanding of adoption, a theoretical overview is presented in this chapter. Such an examination of well recognised, and newly developed theories of adoption does not appear to have been well established in the adoption and adoptive family literature, a point illustrated in the writings of Grotevant and McRoy (1990,168) who comment that "with the exception of Kirk's work, limited theoretical attention has been given to adoptive family relationships". The theoretical examination undertaken here focuses on nine theories considered to be highly relevant to gaining further insight into adoptive relationships:

1. An Adoptive Relationships Theory (David Kirk)
2. A Life-span Development perspective (including Rosenberg's Developmental Tasks model)
3. Inclusive and Exclusive Foster Care (Bob Holman)
4. Psychoanalytic theory
5. Family Systems theory
6. Bonding and Attachment theories
7. Grief and Loss and the Uprooting of Meaning (Peter Marris)
8. Goodness-of-Fit theories
9. A Postmodernist/Poststructuralist perspective

#### **1. An Adoptive Relationships Theory (David Kirk)**

In applying social role theory to adoptive families, Kirk (1984) suggests that human life can be viewed as actors and actions in a play, revealing a series of roles governed by "cultural scripts" existing only partially in print. For Kirk, cultural role scripts are of utmost importance in understanding the experiences of adoptive parents. As part of his theoretical framework of adoption, Kirk examines role preparation, role autonomy, role obligation, and role performance.

Kirk claims that preparation for adult life begins in childhood, and begins from the presupposition that there will be children; an individual's potential fertility is taken for granted. For the most part, **role preparation** for roles such as that of mother and father begins from early childhood, with learning influenced by one's own parents, one's peers and one's contemporaries, and from observation, acts, words, play, gestures, beliefs and sentiments. There also exists as a result of socialisation, a mental link between marriage and the family. Infertility is not written into the cultural script.

Greater cultural and societal socialisation into the mothering role, and emotional and psychological preparation for motherhood, occurs during pregnancy. During this time obvious physiological changes and the wearing of pregnancy clothes are external signals of one's forthcoming change of status. These signals will often illicit the sharing of maternal wisdom by women in the family and the community.

For adoptive parents the lack of absolute certainty connected with the adoption often inhibits the sharing of the good news, and therefore the receipt of parenting wisdom at that time. The preparation for adoptive parenthood tends to be very abrupt and there is no clear script or timetable around which parents can shape their thoughts and behaviours. There are few signs except perhaps the confirmation from the agency of eligibility and acceptance, and the telephone call (often years later) announcing the availability of the baby. Kirk (1984,12) further believes that at the time of most children's birth, the family gathers around, looking for family likenesses and participating in welcoming ceremonies or rituals where "the baby's membership in the group is asserted". However, making comparison to the adoptive family, Kirk (1984) states that no such rituals exist to mark the new adopted member's arrival into the family.

Kirk continues that in the case of most biological parents, the arrival of a new baby occurs under circumstances of **role autonomy**, except perhaps in medically assisted pregnancies, for example in invitro fertilisation or donor sperm programs. Essentially there is no middle person. For the adoptive parents there is no such independence. They are ultimately dependent on professionals for the authorisation, and for the opportunity to parent.

Kirk also believes that once a couple marry, entry to biological parenthood has no further social or legal criteria or requirements. However adoptive parents must show their capabilities for parental **role performance**. They

must provide evidence of psychological, economic, and relationship stability and evidence of parental suitability. According to Kirk it needs to be recognised that the examination of suitability often comes after a time of prolonged emotional upheaval and frustrations over infertility, and adoptive parents may find such an examination "especially distasteful" (1984,11).

For most parents, parental **role obligation** is most often total and unqualified, and parents are expected to be accepting of all deficiencies in their child. They undertake a commitment, and a permanent obligation to the child of unqualified acceptance for better or for worse. However Kirk (1984) suggests that for adoptive parents things are different. The legal processes in adoption, the folklore surrounding blood ties, illegitimacy and bad blood, the possibility that they may not be accepted as parents by the child, reduced recognition by the community of their lifelong obligation and commitment and the provision of legal termination of the adoption in the case of an incompatible or "defective" child (Kirk 1984,10), implies a reduced role obligation status that is not applicable to non-adoptive parents.

Kirk believes that as long as a situation fairly closely resembles the expectations of the actor, and the appropriate role script can be followed, there is a good chance of the actor being competent in that role, but when the actual situation is different from what was imagined, "the likelihood of the actor's competent role performance is, of necessity, greatly reduced" (1984, 13). Situational discrepancies, and irregularities in the expected role preparation, role obligation, role performance, and role autonomy, and interference to society's responses of sanctions and rewards to those roles can result in **role handicap**.

Drawing on the work of Seeman (1959), Kirk (1984) suggests that this resulting emotional state could have similarities to subjective states elsewhere described as alienation. He further reports that research conducted in this area reveals that the losses associated with involuntary childlessness are reported more by women than by men, and that women report more instances of role handicap.

Kirk (1984) believes that the pervading environment also plays a major part in the unfolding scenes of adoption, including the audience, made up of family, adoption workers, acquaintances, and the wider community. According to Kirk (1984,17) "in a way the adopters themselves belong to this audience" and as such are likely to share popular sentiments

concerning adoption. Important to consider here are the potential grandparents' attitude to adoption which could be expected to have played a part in shaping the views of adoptive parents. Earlier research undertaken by Kirk reveals that whilst the majority of adopters' parents approved, there was some disapproval, with the husbands' parents less likely to approve, and potential grandfathers on both sides less likely than grandmothers to approve, this explained by Kirk as perhaps revealing an attitude of "guardians of the bloodline" (1984,20). Another group of people whose attitudes and views of adoption are important, and who are members of the audience are the social workers. According to Kirk, social workers became involved in adoption to introduce standards of child placement that ultimately safeguard the child. This role can include education, but if it primarily concentrates on the testing and matching of potential adult adopters in order to match a couple with a child who is as near a replica of the one they might have given birth to, it does nothing to help adopters orient themselves towards the reality and the acceptability of a non-fecundity parent-child relationship. Kirk suggests that these attitudes may all contribute to role handicap.

Also revealed in research conducted by Kirk in 1956 were community sentiments. Many parents had received comments from friends and community members such as "aren't you wonderful", "the child looks so much like you, it could be your own", "do you know anything about the child's background?" and "how lucky you are that you didn't have to go through all that trouble of pregnancy and birth like I had" (1984,34). While Kirk highlighted the importance of family and community responses, what appears central to understanding role theory is that community sentiments are heavily influenced by a set of cultural standards of behaviour for any person or position, as determined by social norms and social structures. Yet for adoptive parents there may be an ambivalent rather than a clear cultural prescription of the adoptive parent role, and this can contribute to confusing inter-role and intra-role conflict (Brown 1991, Di Giulio 1987, Payne 1991).

As a result of his research Kirk was led to ask himself how did adoptive parents deal with role handicapped relationships and with the feelings which arise from them. Following further research conducted in 1956 and 1957, Kirk (1964), proposed a theory of "Rejection of Differences", and "Acknowledgment of Differences" as representative of the two ways adoptive parents cope with the role handicap of adoptive parenthood. In

developing the concept of Rejection of Differences (RD), Kirk identified that some adoptive parents sought to remove the image of the natural parents by depersonalising them. This was seen to be evident in comments that were made by participants in his research such as "I feel there is no difference between adoption and natural parenthood", "we feel we are the real parents", and "she was meant for us, God had a hand in bringing us together" (Kirk 1984,63-75). He saw further evidence of rejection of differences in adoptive parents' avoidance of discussion of the social and personal problems that made the child available for adoption in the first place, and in the comments of one couple that they had forgotten about the adoption. Kirk suggested that whilst rejection of differences may insulate adoptive parents against the effects of their pre-child alienation and the impact of disenchantment, it would be detrimental in the long run, and only the acknowledgment of differences would help to build a relationship of strength and durability.

In Acknowledgment of Differences (AD) adoptive parents may for example join adoptive parents groups before or after the arrival of the child, thereby admitting their adoptive status, may freely announce the coming arrival of the adopted child, may admit they missed the important experience of birth, and, they may adopt children whose appearance "betray the fact of their adoption" Kirk 1984,65).

Kirk (1984) hypothesised that adoptive parents of only one adopted child appeared to be less committed to a picture of themselves as "adoptive" parents, and further that the greater the deprivation suffered by the adopting couple in childlessness, the greater the likelihood that the role handicapped individuals will orient towards rejection of differences. Conversely, parents who adopted to increase their family size, and those who had suffered less as a result of their childlessness, who had empathy for the natural parents, who had open channels of communications, and who had adopted more than one child were more likely to orient towards acknowledgment of differences, the most desirable coping strategy. Kirk does state that the mechanisms of the typology of rejection or acknowledgment of differences, are "most likely not mutually exclusive" (1984,68). However it could be argued that while useful, such a typology when discussed in this binary form and with suggestion of these coping strategies being most desirable (AD) or detrimental (RD), could lead to such an assumption of mutual exclusivity.

## 2. A Life-span Development Perspective

One generalist theory located within a developmental psychology perspective is that of life-span development. According to Sugarman (1986) a life-span approach assumes that the potential for development extends throughout the life-span, and that there is no route that development must take (although as Sugarman admits, some examples of life-span models of development appear to violate this assumption). Gergen (1980) writes that a life-span theory should be directed not at enhancing prediction and control but rather at rendering intelligible and communicable one's experience of the world (cited in Sugarman 1986,3). A life-span approach also tends to favour a person-in-environment relationship model, seeing the individual and the environment as potentially influencing and being influenced by each other. Life-span developmental psychology is distinguished, according to Sugarman

"by its view of development as potentially lifelong, multidirectional and multidimensional, and as requiring contextual analysis" (1986,12).

### The Nature Versus Nurture Debate and its Relevance to Adoption

Sugarman writes that traditionally models of the person utilised by psychologists have been dichotomised between an "organismic" approach, emphasising the part played by nature, or a "mechanistic" approach which focuses attention on the part the environment plays in development (Sugarman 1986,7). Sugarman (1986) continues that whilst the importance of both the individual and the environment in determining behaviour have generally been acknowledged, the tendency has existed to focus almost exclusively on one or the other. A third model also exists which is referred to as an interactive model, and it is a model of person and environment.

Symbolic Interactionists emphasise the meaning of events and processes for individuals, where making sense or making meaning "is viewed as an emergent property of the interaction between the person and the environment" (Sugarman 1986,9). Symbolic Interaction theorists examine how individuals come to share meanings, how they learn beliefs and values through interactions with others, and how these beliefs fit together. For example Mead believed that it is through observing how significant others react to us, and how they act out their roles, such as mother, father,

or friend, in relation to us, that we learn as children what it means to be a social being, and how each person has a part to play (Lupton, Short, and Whip 1992, Mead 1934). In the adoption arena Kirk drew on such notions (Kirk 1963). Lupton, Short and Whip (1992) state that whilst an interactionist approach appears to have little to offer Marxist or functionalist theorists it does make a contribution to how structures are made real to individuals in everyday interactions.

Early environmentalists and behaviourists, including Watson and Skinner, had argued strongly that the environment and learning within the environment were far more important than genetic inheritance in determining behaviour. This "mechanistic" perspective is epitomised in Watson's assertion that he "could mould any healthy infant to be 'any kind of specialist I might select - doctor, lawyer, artist, merchant-chief, and yes, even beggar-man and thief" (Watson 1925, as cited in Goldstein 1994,369). Such theories of environmental supremacy in development and learning may have been more than a little influential in early emerging adoption ideology. Notwithstanding Behaviourists and Social Learning theorists' confidence in the role of learning within the environment, others have gathered extensive evidence supporting an "organismic" approach; a larger role for genetics.

One influential psychologist who was disillusioned with behaviourists' approaches which constructed the individual as passive in the environment, and who was convinced "that this mechanistic approach to the person was not for him" was Abraham Maslow (McAdams 1994,459-60), who achieved "international fame as the foremost spokesperson for humanistic personality theory". Maslow believed that a needs hierarchy existed where human beings strive to self-actualise after physiological and safety needs, and needs connected to belonging and self esteem, have been met. Maslow believed that people cannot fulfil their innate potential until they have taken care of business at the lower and more basic levels of the hierarchy (McAdams 1994,460). Maslow's theory has been influential in establishing the ideology that developing an integrated self is most important.

What is currently believed is that genetic inheritance is an important factor in development, and that each person is constructed according to a "biological blueprint" created by genetic contributions from his or her parents (Goldstein 1994,115). According to Goldstein, the genetic blueprint

contained in a person's chromosomes and genes, which creates his or her physical and behavioural characteristics is called the person's genotype. While this genotype is a powerful influence, it is not the only influence shaping the individual, because it is the environment in which the individual develops which affects how the genotype is expressed, this supportive of an interactive model of life-span development.

Adoption studies in the past have provided evidence both for and against the role of the genetic inheritance in the development of intelligence. According to Goldstein (1994) in early studies undertaken with African-American children from disadvantaged and deprived backgrounds who were adopted by white middle class families, adopted children were shown to have IQ's higher than children raised in the community from which they were adopted (although subsequent researchers have found that black children perform differently on IQ tests, depending on whether the researcher is black or white, Benet 1976). Additionally, research, by Scarr and Weinberg (reported in Goldstein 1994) with disadvantaged families from which one child was adopted into professional families, found that the adopted children had higher IQ scores than the children who remained in their original environment, supporting the notion of environmental influences.

Later significant research highlighting the role of genetics was undertaken by Scarr and Weinberg in 1983 (reported in Goldstein 1994). In their research the IQ's of adopted children were compared with the IQ's of their biological parents and of their adoptive parents. A moderate correlation between the children's IQ and that of their biological parents was found, but only a low correlation between the children's IQ and that of their adoptive parents. Therefore even when the adopted children shared the environment of their adoptive parents, their IQ scores were more closely related to those of their biological parents. Scarr and Weinberg proposed that the question may be not whether genetic inheritance, or environment and upbringing are more important, but how both nature and nurture interact to shape physical, perceptual, cognitive and social abilities (Goldstein 1994). Similarly, in further interesting research conducted in 1988, Tellegen and his associates (reported in Goldstein 1994) found that a shared family environment contributes little to personality. According to Tellegen the two main factors that determine personality are genetics, and environmental experiences that are unique to the individual; those experiences that occur outside of the family.

Overall it could be suggested that in the early days of adoption, ideas of hereditary influences existed but these came to be regarded as less important, as developing psychological research implicated environmental factors. This research was to have a major influence on theories of development of intelligence and the personality, and such theories at the time were very influential. More recent studies have highlighted the role of genetic heritage and the importance of the dynamic interaction of genetics and the environment in human development. Such developmental research may be evident in evolving adoption ideology.

### Erikson's Stages of Development Model

In the field of life span development one major contributor to the literature is Erik Erikson (1959), and his eight stage theory of life span psychosocial development is widely known. According to Sugarman (1986,84), Erikson's model, developed in the 1950's, is one of "a changing individual operating in a changing society" where, as the individual develops through nurturing, the society places new demands on him or her, demands to which the ego must adapt. Further, ego development does not develop randomly, rather it is a cumulative process of integration occurring to a timetable; this timetable being depicted by Erikson as a series of crises or tasks (Erikson 1959). Erikson's stages of psychosocial development, which may appear as polar opposites "but in fact represent dimensions rather than alternatives" (Sugarman 1986,84) are:

1. Basic trust v Basic mistrust (The first year)
2. Autonomy v Shame and Doubt (Early Childhood)
3. Initiative v Guilt (Play age)
4. Industry v Inferiority (School age)
5. Identity v Role confusion (Adolescence)
6. Intimacy v Isolation (Young Adulthood)
7. Generativity v Stagnation (Maturity)
8. Ego integrity v Despair and Disgust (Old Age)

Erikson's model has been criticised for its suggestion of consecutive accomplished stages. Yet according to Sugarman, in his model Erikson

stresses that identity formation is a continuous process with its roots firmly grounded in earlier stages of growth. Erikson also sees the tasks or struggles of both previous and present generations as enshrined in a culture's social institutions, and these institutions impinge on the individual, thereby influencing both the specific form and the outcome of the crises (Sugarman 1986,84).

Nevertheless it has been argued that Erikson's model assumes uniform health and growth across the lifespan, is culture bound, fails to consider gender differences, and cannot accommodate individuals who are seemingly out of step with the rest of society (Slugoski and Ginsburg 1989). It also fails to consider a social environment reality which may not be nurturing, and rather may be psychologically repressive, isolating or restrictive. Under such conditions a valid response may be shame and doubt rather than autonomy, or identity confusion rather than identity. Further it assumes that integration will be unquestioningly sought, yet unqualified acceptance of life's realities may be too heavy a price to pay for the comfort of integration (Buss, cited in Sugarman 1986,93-94).

Other life span development models emerging in the 1970's looked at continuing development in adulthood. They explored the significance of life-course transitions, life patterns, and significant life events, examining how such identified "bench marks" impact on the human life cycle (Holmes and Rahe 1967, Sugarman 1986,131).

#### **A Life-span Development Approach to Adoption: Rosenberg**

It has been commented that Erikson's theory and in particular the fifth stage of psychosocial development (identity versus role confusion) has contributed to informed theoretical discussion on adoption, and adoptees' tasks for identity formation (Iwanek 1989, Hoopes 1990). Rosenberg (1992) argues that not only are there specific developmental tasks for all adolescents, and additional tasks for adolescent adoptees, but that within adoption there are tasks which significant members of the adoption circle must undertake. As such Rosenberg (1992), utilising Carter and McGoldrick's framework (1980), has developed a theory of developmental phases and tasks over the adoption lifecycle, specifically identifying lifelong tasks for the birth mother, the adoptee, and the adoptive parents.

### **Birth Mothers**

For the birth mother Rosenberg (1992) identifies five phases (Rosenberg admits information has been gathered primarily on birth mothers rather than including birth fathers). Phase one is reaching the "decision" to relinquish (1992,20), when the reality of the birth mothers own abilities and the available resources are considered. Phase two, the preparation for relinquishment, includes psychological separation preparation during pregnancy and the birth, this often experienced by birth mothers as a time of loneliness, isolation, and sadness. Phase three, the relinquishment, produces a chain of emotional responses including those of denial, alarm, anger, loss and grief. The birth mother, in the past, has received little understanding or support for these acute and long term emotional experiences. Phase four, the post relinquishment, may include a mourning process which extends far beyond the adoption, and perhaps for some extends throughout their lifetime in varying degrees of intensity. Phase five, later life, includes the possibility of the search and of reunion.

It must be acknowledged here that, at least for some birth mothers, the "decision" to adopt was at times in the past a cultural, religious, societal, political and moral "requirement" more than a decision. Nevertheless for some birth mothers such a decision was and is still a necessary one, and Rosenberg concludes that presentation of this model of developmental tasks for birth parents can provide opportunities and information that can help them towards successful mastery over their situation. As Rosenberg (1992) points out, one of the basic tenets underpinning the adoption system in the past was that more suitable, "better able to provide and therefore... more competent" parents than the birth mother could be found for the child (1992,28).

### **Adoptees**

Rosenberg describes nine developmental task phases for the adopted person. Phase one is the circumstances of conception and birth, which are often connected to issues of legitimacy and to the rights and choices made by others. Phase two is the postpartum phase concerning early attachments. Rosenberg suggests that the degree of separation trauma for the infant may be connected to the infant's own temperament, and that while at one extreme there may be genetic vulnerability to natal trauma that may be carried forever, at the other is a genetically less vulnerable child

who may weather the separation more easily. Rosenberg positions most children between these two extremes, admitting however, that all adoptees would have experienced some maternal loss and are in need of a nurturing environment.

Phase three is infancy, including the initial post adoption period of the child entering the new family. What appears to be important here according to Rosenberg is the "match" (1992,94), a matching of complementary temperaments between child and adoptive parents. However contributing to the success of the situation may be the degree to which adoptive parents are still struggling with their own issues surrounding the adoption, and the degree to which adoptive parents develop realistic expectations about the adoption of a child. Phase four is the preschool years, which may include the disclosure of adoption status, although the concept of adoption may not be understood by the child at this time. It may be the beginning of a time when community comments related to adoption status begin to be taken on board by the child, and a time of beginning a "magical mode of thinking" about their adoption (Rosenberg 1992,97).

Phase five is the school years which herald significant cognitive development and an increased ability to understand the concept of two sets of parents, but a time of continuing fantasies about the adoption. There may be "cruel comments" directed at the adopted child (Rosenberg 1992,102) and a need for comfort and support.

Phase six is puberty and adolescence, considered in this and many societies to be a major developmental phase. It is generally accepted as a period of years during which formation of an individual identity occurs. This allows for genuine separateness from, yet the retention of an emotional bond to, one's family. Achieving this balance appears difficult however, for the adopted adolescent, this phase is particularly complicated due to the existence of the unknown birth parents. Rosenberg (1992,104) believes that not only do adopted adolescents need to achieve a separate identity from their collective family identity during this phase, but they must achieve such a developmental task as "determining what kind of adult they can or will become" within the context of their unknown biological identity. Whilst adoptive parents can provide some possible identification information such as social class, lifestyle, career options, community and family attitudes, beliefs, values and perceptions, there are some missing pieces of information. Information available to adopted adolescents concerning the

birth parents in many cases is extremely limited, often consisting of a mother's and father's occupation and age, and perhaps an interest. This is often the only information passed on to the adoptive parents. Rosenberg (1992,108) suggests that questions such as "who am I"? and "whom am I like"? are reputedly very common questions adopted young adults pose (although somewhat similar questions may not be unusual from non-adopted adolescents). Additionally, Rosenberg (1992) suggests that with such limited information, adolescents question why their birth parents were not responsible, or adequate parents, why the adolescent was available for adoption, and, if their parents were inadequate or irresponsible are such traits hereditary? At this time the adopted person may be keenly inquiring about the birth parents as part of the establishment of ego identity.

Adolescence appears to be a stage of development marked by striving's for independence and separation. This is therefore complicated for the adopted adolescent who is seeking separation and independence from the adoptive family, yet may be seeking information about the birth parents to complete their self knowledge. It could be that information gained concerning the birth parents at this time, may increase the difficulty of this process as adopted adolescents seek to join with their past, during this important developmental stage of separation.

Phase seven is young adulthood, when choices are made about careers and intimate relationships. For some adoptees it may be that it is this stage, rather than Phase six, where curiosity to search for the information concerning the birth parents emerges. However for others, there may be little desire to search, perhaps in part due to feelings of anger or anxiety concerning being placed for adoption, or due to the consideration that little would be gained from such a search. Indeed previous research undertaken in Scotland with adopted persons who sought information about their origins, found that only a small number of adopted persons "feel the impulse to seek out this type of genealogical information" (Triseliotis 1973,154).

Phase eight, adulthood, according to Rosenberg, is when adopted adults may become fully independent heads of their own household. For adoptees the birth of a child may have special meaning, where "they achieve the reality of having a blood relative in their lives, perhaps for the very first time" (Rosenberg 1992,116).

Phase nine is concerned with later life, and includes the eventual death of adoptive parents. This may or may not subsequently trigger the search for birth parents. A search at this time may become a reality because any felt need to protect adoptive parents has gone. Rosenberg considers that it may be that because of the painful loss, another caring relationship is sought.

### **Adoptive Parents**

Rosenberg (1992) states that when an individual or couple decide to adopt a child they hope that this option will serve them well, and serve to assist them in avoiding the alternatives of remaining childless. Some fertile adopters hope to increase their family size and enhance their family life while simultaneously meeting a social need. For adoptive parents there are special challenges and special development tasks in addition to the maturational achievements required of any parent. Rosenberg identifies eight developmental phases for adoptive parents.

Phase one is the decision to adopt. For some couples this is an alternative requiring much consideration after a difficult period of anxiety and confusion, and after the painful realisation that pregnancy will probably not occur. In Phase two, labelled the adoption process, the adoption plan is often shared with the extended family, the process of "public scrutiny" begins, and couples more often than not find themselves in "an intensely competitive situation" in order to secure a child (Rosenberg 1992,62). It may also be a time of a "serious life crises" (Rosenberg 1992,62); of coming to terms with infertility and with the losses involved, including the loss of blood line, and the loss of the idealised child as the replacement of, and the reflection of self.

Phase three is when instant parenthood occurs as "the adoptive family is born" (1992,65). At this time there is high excitement tempered with apprehension as the adoptive parents and particularly the adoptive mother, begin to establish emotional bonds with the child. For adoptive parents who have biological children, Phase one and two may be less applicable, however there may be unique challenges trying to meet the needs of biological children and the needs of adopted children, although very few differences may be evident in the early post adoption period. If the child is an older child or the adoption is a cross-cultural adoption the picture may

be further complicated. For adoptive parents there also comes at this time an awareness that in order for them to achieve parenthood there are others grieving. Phase four, the adoptive family with a pre-school child is where the child's social reality is extending, and adoptive parents need to begin to consider how they will give basic information concerning his or her adoption.

Phase five, the adoptive family with the school-aged child, is when the world broadens to include important new adults and children, and a time when adopted children must deal with the reality that they have a different story. The child must begin to deal with issues of belonging, of permanency, of acceptance and of identity, and many questions may be asked of the adoptive parents.

Phase six is the adoptive family with an adolescent, where special tasks are required when, after spending years nurturing parent and child attachments, separation looms. Adoptive parents may have invested a great deal of energy into building security and attachment into family relationships and they may feel they are losing their child, rather than experiencing a normal though perhaps more complicated developmental phase. Adoptive parents may be accused of not being the "real parents" during this phase. Adoptive parents may experience this as a very difficult parenting phase and it may even seem impossible during the times the process is being experienced. Rosenberg comments that at this time of difficult and unpredictable behaviours, adoptive parents may seek comfort in recalling that they did not give birth to the child, even speculating that a child born to them "would not behave in this manner" (Rosenberg 1992,80). There may or may not be increased interest from the adopted adolescent in the birth family during this phase. Rosenberg writes that while some adoptive parents may feel this interest is a necessary part of growing up, and some may feel so threatened that they may effect an estrangement with their child, others may experience mixed emotions, feeling both threatened by and empathic to the situation.

Phase seven, the adoptive family with a young adult, is when independence and departures must be faced by the adoptive parents. Adoptive parents may revisit infertility at this time, as the young adult enters permanent sexual relationships which may result in the birth of a child, the very experience of which many adoptive parents were deprived.

Phase eight is the adoptive family in later life, and Rosenberg alludes to a situation where some older adoptive parents may feel vulnerable about the kind of bond that exists between themselves and their adult children. It is a time of retirement and of grandparenthood. Adoptive parents may face their own mortality and also reflect on the lack of biological descendants. Rosenberg (1992) suggests that it is advantageous for adoptive parents, as with the other members of the adoption system, to accept the developmental tasks as a normal and necessary part of their role. Rosenberg further claims that for adoptive parents, a feeling of competence will be the result of having mastered the tasks.

Whilst this model, in attempting to provide a life-span theory and practice model of adoption, may inherit the shortcomings and limited ability of lifespan developmental psychology to adequately perceive the relevant wider environmental, political and social factors, or to accommodate well those who may not fit or progress easily through the phases, it nevertheless makes a valuable contribution to this theoretical review and will be relevant in later analysis of the research study.

### **3. Concepts Of Exclusivity and Inclusivity (Bob Holman)**

As established in Chapter Two, adoption became a legal permanent form of alternate child care, with its origins in, and retaining some similarities to the preceding boarding out or foster arrangements. Indeed foster care is still conceptualised by many as a quasi-adoptive arrangement of substitute care in a family environment. Yet foster care is considered to be a viable alternative to adoption and the preferred option for many children, particularly older children. It has been considered that foster care, when the child cannot remain in the natural family at the time, is preferable to admission to more institutional care and preferable to the severance of existing ties and attachments to the family of origin, as is dictated by adoption.

Holman (1980) defines "exclusive" fostering as foster care within a foster family, where the child's biological connections are mostly excluded. Holman's research revealed that 63% of foster parents "regarded the children as their own" (1980,75), and would have liked to adopt them. Holman noted that the exclusive fostering concept appeared to spring from the two-fold premise that the foster child needs to be sheltered from the

influence of their parents, and that the greatest need of foster parents and foster children is to be reassured that the placement will not be "disturbed". Holman (1980,76) considers that such views are strikingly similar in many ways to the naive "fresh start" thinking which dominated much boarding out under the nineteenth century British Poor Law. Holman (1980,76) believes that

"the exclusive concept minimises the fostering aspect. The natural parents, knowledge of them, and contact with social workers are excluded in order to promote security and continuity".

In contrast, the "inclusive" concept means that the foster parents "can offer love without having to regard themselves as the real parents" (1980,76). In his research Holman identified 36% of the participants who acknowledged "... he's not mine but I treat him the same", (1980,77), with 31% willing to include others. In the inclusive model emphasis is placed on the children's need to obtain a true sense of their present identity and past history within a framework of affection. While Holman states that these two conceptions (exclusive and inclusive) express polar positions within which there will be many variations, he asserts that two types of fostering approximating to these positions exists, "one a kind of possessive love akin to natural parenthood, the other related to the fostering reality". He adds that fostering of the exclusive kind creates role conflict or confusion, which must be challenged by social workers and that ideally foster parents of the inclusive kind must be sought by workers.

In agreement with the inclusive model, Thorpe (1980) writes that for all except the very youngest of children, entering foster care can be an experience of object loss because the formed attachment to their natural parents will be disrupted. She continues that the degree of disturbance to the child, as a result of the need for alternate care, depends on factors including the child's age at placement, the number of placements, the quality of care experienced before the placement, placement with siblings, a definite plan for the child's future, the child having knowledge of these plans, and contact with the natural parents. Thorpe asserts that access for the child to information concerning their natural family is important whatever the plan, because

"knowledge of uncertainty is shared and thus bearable, whereas uncertainty of knowledge can be frightening, even disturbing, since in the absence of facts, fantasies and fears will run wild" (1980,92).

Thorpe (1980) challenges the popular belief that contact between foster children and their natural parents will inevitably result in a disturbing conflict of loyalties and she calls into doubt the appropriateness of exclusive fostering. Similarly, Aldgate (1980) identifies important factors influencing children's experiences of foster care and the length of their stay in foster care. These include the attitudes of carers and social workers toward natural families, recognition of the impact reception into care can have on families, and the maintenance of frequent contact between parents and children.

In examining Holman's concepts for differences and similarities between adoption and fostering, it could be suggested that the differences between adoption and fostering may be partly identified in the above statement comparing exclusive and inclusive fostering; "one a kind of possessive love akin to natural parenthood, the other related to the fostering reality" (Holman 1980,77). It also appears that whilst historically adoptive parents may have been recruited to give love akin to natural parenthood, thus encouraging an "exclusive" arrangement, changes in adoption legislation, policies and practice internationally and in Australia have laid the foundations for a more "inclusive" adoption reality model.

#### **4. Psychoanalytic Theory**

It has been suggested that after World War II Psychoanalytic theory was influential in the assessment of the unconscious motivations of birth mothers to have a baby out of wedlock. These motivations were not believed to include wanting a baby, rather they were based in symbolism and fantasy. Psychoanalytic theory was also used in ascertaining birth mothers' emotional and psychological stability (Iwanek 1989). Birth mothers were often judged as "immature, irresponsible and emotionally unstable" and this diagnosis was seen as reliable and stable over time, that is, children placed for adoption (and their adoptive families) would need to be protected from unstable mothers who would interfere in the adoptive family life, this seen as harmful to the child (Iwanek 1989,8). Additionally Psychoanalytic theory was influential in the professional assessment and selection of adoptive parents, and it was "instrumental" in the construction of the abandoning mother, and the "unwanted child" myths (Freud 1964, Iwanek 1989,9, Kirk 1985, O'Shaughnessy 1994).

It appears that the goodness of an individual, seen as an attribute developing during childhood, was considered most desirable. Those who could not be good (or who did not choose a good option, for example marriage was the option accepted by many young girls who conceived ex-nuptially) were encouraged to put the needs of the child first and choose adoption. In contrast to the birth mother, successful adoption applicants were deemed to possess, and have the abilities to pass on, goodness (Iwanek 1989). Interestingly this "choice" (Iwanek 1989,11) made by young birth mothers, after their unconscious rather than conscious motivations to have a child were considered, appears to have been subsequently redefined by professionals and the community (to which adoptive mothers also hold membership) to be the "unwanted child" being given up for adoption.

Further, it seems that professional adoption workers and past adoption policy and practice could have contributed directly to this "choice" facing the birth mother being reconstructed by adoptive parents to mean the birth mother "abandoning" the child she did "not really want" (Iwanek 1989,10). This in turn may have resulted in adoptive parents holding a less than positive attitude toward birth mothers, although whether adoptive parents hold such an attitude towards birth mothers, or whether this is a stereotypical perception of adoptive parents' attitudes, is debatable. This is in light of the preceding literature review which reveals there is yet to be extensive research documenting the lived experiences, perceptions, beliefs and thoughts of adoptive parents.

Grotevant and McRoy (1990,170) have suggested that several psychoanalytic hypotheses exist in the adoption literature. These include the suggestions, implicating adoptive parents, that "emotional disorders in adopted children may result from the unconscious and unresolved aversion toward parenthood in one or more of the adoptive parents, particularly the mother", and that "emotional problems can arise from adoptive mothers' guilt about taking children that did not belong to them" (1990,170). This latter point, suggesting that adoptive mothers did not unfeelingly take the child "to raise as if born to" without any further thought of the birth mother, is not frequently discussed in the adoption literature.

For adoptees, from a Psychoanalytic perspective, there may be psychological struggles trying to understand their relinquishment. Relationships between adoptive parents and their children may be

vulnerable to "splitting", where adopted children attribute all their bad qualities or attitudes to their adoptive parents and all the good qualities to their unknown but idealised birth parents (Grotevant and McRoy 1990,170), or *visa versa*.

## **5. Family Systems Theory**

In Family Systems theory the family structure is viewed as a network of interdependent individuals and relationships. The child is seen as one element in a dynamic interconnected mutually- regulating system. Systems theory contributes to an understanding of adoption in terms of the degree to which the system is able to accommodate the child, the mutual adaptation that occurs over time between the parents and the child and between the child and other family members, the level of tolerance of dysfunctional behaviours in the system, and the adaptation of the system to accommodate the separating and reuniting of members of the system (Grotevant and McRoy 1990).

Berman and Bufferd (1986) believe that loss is the key issue in adoption, but believe that professional support for adoptive families needs to be family support. They consider that denial, fears, blame, loyalties and lack of information can impede the family's resolution of adoption issues. They further argue that a professional therapist who works only with an adoptee risks creating a system that mirrors the boundaries and secrecy in past adoption systems. They believe a family systems treatment approach helps the adoptive family appreciate the importance of the adoptee's genealogical roots and the multidimensional context that surrounds the adoptive family.

Similarly Clare (1991) and Schaffer and Lindstrom (1990) suggest that Family Systems thinking incorporates an appreciation of the wider, potential and actual family networks. Further it incorporates an appreciation of the culture, norms, traditions and secrets inherent in the family system rather than an emphasis on personal psychological frameworks, this also enabling the worker to practice from an informed, client-centred, systems respectful perspective.

## 6. Bonding and Attachment Theories

Research by Klaus and Kennell published in 1976 has been seen by some as the catalyst for a new era of maternal and child care, as mothers and professionals embraced the new concepts of bonding, and primary health care services developed innovative types of maternity care. Policies providing immediate contact after birth for mothers, fathers, siblings, and new babies in private delivery rooms and birthing centres, give testament to the changes implemented (Smith and Sherwen 1988). However in much earlier influential research undertaken by John Bowlby and Mary Ainsworth the importance of bonding and attachments was well documented (Ainsworth 1991).

Bowlby (1951,1969), through clinical and other studies looked at how early separation of the child from its mother affected the child's mental health. In broadening the psychoanalytic emphasis of a psychological fantasy world, Bowlby emphasised the impact of actual events of separation in children's lives. He concluded that the age of the child and the length of the separation would determine the degree of maternal deprivation. He asserted that lack of a warm, intimate and continuous relationship with a mother or a mother substitute, due to the impersonal environment of institutional rearing and due to separation, had far reaching effects on a child's character development and that damage was permanent and irreversible. According to Tizard this may have influenced early adoption policy concerning some children who may have been seen to have been irreversibly damaged and therefore were labelled unsuitable for adoption (Tizard 1977). Tizard reports that Bowlby believed even good mothering is useless if the child is older than two and a half, and that "Bowlby himself urged that, where possible, adoption should take place in the first two months of life" (1977,12).

Bowlby also determined that the relationship between the mother and the child is reciprocal; a two way process where the mother has a sensitive period in which to attach herself, and the child has a sensitive period in which to attach itself. Tizard states that her research findings do "suggest that Bowlby was correct in suggesting that the nature of the child's early dependency relationships may have an important effect on his later social development" (1977,230).

Bowlby describes a child who has been deprived of mothering for a prolonged time from an early age as having no real friends, having no

emotional response when such a response would be normal, being deceitful, displaying lack of concentration at school, and being forever handicapped in forming friendships (Smith and Sherwen 1988). Bowlby further determines, (cited by Benet 1976,194), that:

"Because ..... children tend unwittingly to identify with parents and therefore to adopt, when they become parents, the same patterns of behaviour towards children that they themselves have experienced during their own childhood, patterns of interaction are transmitted, more or less faithfully, from one generation to the other. Thus the inheritance of mental health and mental ill health through the medium of family microculture is certainly no less important, and may well be far more important, than is their inheritance through the medium of genes" (Bowlby 1973).

Tizard (1977,12) states that as a result of Bowlby's work there was a critical review of doctors' previous argument that all those involved in adoption should advocate for a delay of up to twelve months to accurately assess the child's level of intellectual functioning. The development of these theories of bonding and environmental influences apparently resulted in the fear of the genetic "bad blood", being widely replaced with a fear of personality damage resulting from early separation trauma.

Some critics did question the wholehearted acceptance of the bonding theory, and highlighted the lack of clarification that these early theories were based on specific clinical studies of disturbed children, concerning gross neglect in less than suitable institutional environments (Smith and Sherwen 1988).

In her research Ainsworth identified that there were some problems inherent in Bowlby's work, which suggested that if separation from the mother, or permanent parents occurred, the child will always suffer deprivation. It appeared to suggest that continuity of parents' presence ensured quality of relationship and prevented deprivation, and also appeared to assume that damage was irreversible (Smith and Sherwen 1988). Strongly critical, Rutter (1974) did not support Bowlby' position of irreversible damage and suggested that factors related to the reversibility of deprivation include the child's emotions and their thinking processes, the child's age when deprivation occurred, and the level of stimulation and support available in the new environment. However it has been suggested by others that, in particular, the whole concept of exclusivity of the mother and child relationship as the only satisfactory arrangement for raising a

child, is a culture bound concept. It has been emphasised that other cultural groups do not have exclusive child raising, rather the burden of child rearing is a shared role, this in the end providing attachment and perhaps even greater continuity of care (Smith and Sherwen 1988).

Offering an explanation for the popularity of Bowlby's model Tizard (1977,219) writes that

"for a whole variety of reasons, including the strong grip psycho-analytic theories had on the public imagination at that time, and the strong social pressures in the west during the post-war period to keep women in the home, these ideas were very widely accepted. Not only were they accepted as an explanation of the emotional difficulties of ex-institutional children, but there was also a general acceptance of Bowlby's better known inference, that women with young children must stay at home if the children are not to be emotionally damaged. Few people at the time noted how ethnocentric Bowlby's views were".

On a similar note Iwanek (1989) suggests that early studies which proved to be powerful tools in the shift away from hereditary and genetic determinism and towards environmental and psychodynamic influences, were "biased and have been promoted for political and social reasons by professionals and politicians alike" (Iwanek 1989,7).

Attachment and bonding theories evolved out of ethological studies of animal "imprinting" within a sensitive period (McAdams 1994,22). Attachment theory in humans suggests that the primary function of the attachment relationship is to insure "the proximity of the immature infant to its caregiver for provision of safety and food" and achieve the goal of "felt security" (Grotevant and McRoy 1990,170, Herbert 1984). It is considered that attachment develops as the caregiver meets the needs of the infant, and that insufficiently sensitive mothers, those who had an aversion to physical contact, or those with less alert or more difficult infants, may create less than desirable attachments.

However Sluckin, Herbert and Herbert (1983) question the whole basis of bonding and attachment theories asserting that the ethologically based bonding doctrine was based on early animal experiments and it was never established if mammalian species have rapid maternal bonding. They further argue that there is no support for the belief that skin to skin contact is necessary for the development of maternal love, or that mother to infant

attachment depends on contact occurring during a sensitive or critical period.

Further on the subject of maternal attachment Goldstein (1994) argues that although research on attachment has focussed on mothers because they are most likely to be the infant's primary caregiver, others have shown that infants are also attached to their fathers. Goldstein speaks of research by Lamb where it was found that mothers and fathers interact with their infants differently. It appeared that mothers tended to hold babies while performing caretaking functions such as changing nappies or feeding while fathers tended to hold babies while playing with them. Fathers, Lamb apparently suggested, are not simply "mother substitutes" but provide their children with qualitatively different experiences than does the mother (Goldstein 1994,414).

#### **Attachment and Bonding Theories and Adoption**

Grotevant and McRoy (1990) state that the implications of attachment theory for the study of adoption are important. When discussing bonding and adoption, there appears to be diversity of opinion as to whether separation at certain times causes deprivation, to what degree this is reversible, and what are the mitigating circumstances (Smith and Sherwen 1988). Klaus and Kennell (1976) support the notion of factors which may contribute to poor mother and child bonding, including separation immediately after birth, unresolved grief in the mother, and obstacles to attachment engendered by caretakers of hospital regulations. However Smith and Sherwen (1988) believe many questions are still left unanswered, including how persons not present at a birth establish bonds with infants. This, they state is a vitally important question for adoptive parents, particularly those adopting cross-culturally, or adopting older or special needs children. In their study Smith and Sherwen take a stance on bonding and attachment issues, critically examining the bonding concept with reference to adoption, and with particular focus on the placement of older, or disabled children, or those from a different cultural background to the adoptive family.

Klaus and Kennell (1976) propose that biological mother/child bonding can be related to four specific periods before and after birth, which are: prior to pregnancy, pregnancy, birth, and after the birth. Smith and Sherwen (1988), in seeking to further understand the adoption bonding process,

adapted this model. They theorise that a model of three specific stages; Prior to entry, Entry and After entry, is appropriate for understanding bonding in relation to adopted children.

They suggest that in stage one, Prior to entry (pre-adoption), there may be many similarities for non-adoptive and adoptive mothers, as adoptive mothers prepare to assume the mother role, although preparation for adoptive mothers involves differences, with an indefinite waiting period and a very brief notification period. Positive fantasising in stage one of Klaus and Kennell's (1976) model is seen as important for mothers bonding with babies, and Smith and Sherwen suggest it may be very important for adoptive mothers, to do the "work of worry through fantasising about realistic problems they may experience with an adoptive child" (1988,59).

During the second time period identified by Smith and Sherwen, Entry (adoption), there may be a lack of the organised activities to promote bonding which exist in the equivalent period of birth. Also important at this time is the mother's role in the first meeting, any reactions from support persons, the adoptive father's reaction, and professional support available at that time and in the period immediately following the adoption.

According to Smith and Sherwen during stage three, After entry (after adoption) behaviours of non-adoptive mothers and adoptive mothers may again be somewhat similar as the mothers facilitate attachment through day to day nurturance. The child will begin observable, reciprocal communication, responding to the actions of the mother, and these responses will vary according to factors such as "the child's age, previous experiences and development, and innate characteristics" (1988,61). These variables "may foster or impede bonding" (1988,61).

As the model presented by Klaus and Kennell suggests, psychological bonding may begin for the biological mother and child before the birth, existing during and even before pregnancy. However Smith and Sherwen (1988) look to research suggesting that the biological father-to-be may also undergo the psychological changes necessary for bonding, this again highlighting the work of fantasising for all new parents, be they adoptive or non-adoptive parents-to-be, and highlighting the fact that bonding does not appear to be "totally dependent upon an actual physiological link with a foetus" (Smith and Sherwen 1988,68).

Smith and Sherwen pinpoint the environmental factors of social support and environmental stressors, as having impact on, or delaying the attachment process. These include circumstances where the environment does not adequately support the new demands, for example if the isolated nuclear family is devoid of extended kinship group support, or if extended family stresses or significant negative life events occur in the early post adoption period. For the older child, or child of a different cultural background, a slow adjustment to the unfamiliar environment, even when the environment is supportive may impact on the success of the bonding process. Overall Smith and Sherwen suggest that less problematic bonding is facilitated when the child is physically and emotionally healthy, and that bonding will be less difficult with the child under two, rather than over two years and less difficult with the child from the same rather than a different cultural background. Smith and Sherwen consider that post placement support is crucial, as is contact with other mothers with adopted children, "to keep expectation realistic" (1988,116).

Of importance, Smith and Sherwen state that their study reveals an inhibiting practice among adoptive mothers of suppressing fantasy. This, they state, is to do with the uncertainty concerning what the child will be like, insufficient notification of the child's availability, and fear that a child may not become available. They conclude that "measures that can free the mother to engage in the normal process of fantasising in preparation for her new child are important" (1988,123). They do warn that initially some adoptive mothers who feel free to fantasise, including those adopting cross-culturally, or adopting an older child, may fantasise a child similar to themselves, and Smith and Sherwen suspect this idealised child will need to be mourned. Another major finding is the necessity of support, with counselling and guidance to be provided by non-judgmental persons, at the important "first encounter" , and in the post adoption period (1988,126).

Of interest is a recent study of attachment where the mother-infant attachment relationships of non adopted, adopted intra-racial, and adopted inter-racial mother-infant pairs were compared. Overall in that study it was concluded that the quality and the nature of the attachments that occur between mother and infants were relatively similar and the researchers further believe that

"lack of early contact per se does not place middle class adoptive families at risk of anxious mother-infant attachment relationships ..... Our findings also suggest

that it is unlikely that the higher incidence of psychological and academic problems among adoptees in middle childhood and adolescence can be explained in terms of insecure family attachment patterns in the infancy years" (Singer, Brodzinsky, Ramsay, Steir and Waters 1985,1547).

Evidence from that study does indicate that "interracial" adoptive mother infant pairs show a more insecure attachment than non adopted or adopted intra-racial pairs (1985,1543). This they explain, may be due to the unusualness of rearing a child from a different ethnic background, and they propose that this unusualness

"may temporarily undermine their (the mothers') self confidence in their ability to handle the problems associated with this type of family" (1985,1549).

Overall it appears that while concerns of bonding and attachment can be overstated, nevertheless in adoption such issues may be important to consider in developing enduring adoptive relationships.

## **7. Loss, Grief, Uncertainty, and the Uprooting of Meaning (Peter Marris)**

Marris asserts that grief is a universal human response where a person's

"familiar pattern of relationships is so suddenly and radically disrupted that the ability to make sense of life may for a while be overwhelmed by despair" (1974,58),

and for a time a person feels bereft of purpose. Marris (1974) reiterates that when a pattern of relationships is disrupted in any way for which an individual is not fully prepared, the thread of continuity in the interpretation of life becomes attenuated or even lost altogether. The loss may fundamentally threaten the integrity of the structure of meaning on which continuity rests and such threat and uncertainty cannot be acknowledged without distress.

Marris speaks at greater length of loss associated with the loss of structures of meaning, these being the structures by which individuals sustain relationships to people, work, and physical and social circumstances, and

"the way in which these human structures which manipulate both form and content, create the relationships in which they become embedded" (Marris 1980,101).

In part, according to Marris (1980), these structures of meaning can be represented as the common knowledge of the culture. Marris (1980) also believes the structures of meaning are in part the elaboration and confirmation of a particular personal history; an understanding of life which derives from experiences which no-one else has shared exactly. In summary Marris (1980) suggests that the

"structure of meaning which enables anyone to make sense of his or her own life is a unique evolution of both abstract and concrete, and generalisable and specific organisations of the physical, social, and conceptual relationships, embodied in intentional behaviour and attached to particular people and situations" (1980,104,105).

Uprooting of meaning represents a severe disruption to this structure, and may come about through the loss of any of the elements on which the structure depends. Marris (1980), in discussing the uprooting of meaning, identifies the core elements as: purpose, attachment, regularity of events and conceptual coherence.

Marris (1991) suggests that meaning is organised by **purpose** and that any event that thwarts an individual's crucial motives for action is likely to cause bewilderment and a sense of futility. Disruptive events are much harder to deal with if they are both sudden and unexpected, and if there are few supportive, continuing relationships. Most importantly, unintelligible events which disrupt purposes and attachments are doubly threatening.

Marris, taking up Bowlby's thesis, believes that from immediately after birth, the "baby's responsiveness to a nurturing figure becomes imprinted", and a pattern of **attachment** appears to be set (Marris 1980,104). The attachments formed as a result of the emerging emotional structures of meaning give a model for understanding every other kind of order. As children grow, they "begin to identify, classify, group, and compare evolving notions of space, speed, time, cause and effect, of reversibility and conservation" (Marris 1980,102). These structures of operations by which children interpret the world increase, to provide systems of thought which define reality. The emotional attachments become the context in which individuals continue to learn, and any loss that fundamentally disrupts the central purposes and the formed attachments of life will provoke grief. The bereaved must find a new sense of meaningfulness of life (purpose), and such meaning must acknowledge the loss of attachment that cannot be made good by avoidance and substitution. Rather the loss must be

grieved. The degree to which any loss is experienced as an upheaval to meaning will be influenced, in turn, by the individual's childhood experiences of attachment.

Marris writes that when the loss is irretrievable there must be a reinterpretation of what has been learnt about purposes and attachment - and the principles which underlie the **regularity of events** and experiences. To do this the loss must first be accepted as something that has to be understood. Further the bereaved must conceive through grief to restore meaning by transforming, and accommodating disruptive events to inform the present and the future, therefore slowly regaining a pattern of order (regularity) to meaning and attachments.

Uncertainty arises when individuals can no longer make sense and Marris (1991) believes that each person's vulnerability to uncertainty depends on how well the culture and institutions of the society can impose meaning on events. Rather than be influenced by the concept of indifference and substitution and by a seemingly emotionless detached contemporary industrial society which shrugs off loss and grief as the price of progress, the bereaved must be reassured that grieving the loss of **conceptual coherence** is normal, painful, and demanding of energy. It also must be acknowledged that when change and loss are inevitable, all those suffering loss will need concepts which validate rather than ignore grieving, which allow time to grieve, which recognise the right to grieve and which encourage rituals and customs of mourning, thus validating the worth of past, present and future attachment (Marris 1991).

### Adoption and Loss

It has been stated that adoption is a process which is characterised by multiple experiences of loss. For birth parents the relinquishment of the child is a loss, for the adoptive parents there is often the loss of fertility and loss of the image of, or the reflection of their own dream child or fantasised large family, and for adopted persons there is reportedly the loss of continuity of their biological identity and loss of a sense of belonging (Brodzinsky 1990, Triseliotis 1973, Van Keppel, Midford and Cicchini 1987).

Previously the significance of the loss for birth parents has been denied or grossly underestimated, with birth parents being given the advice that they

"should go on with their lives" and forget about both their mistake and the child (Van Keppel, Midford, and Cicchini 1987,2). This situation was exacerbated by the "conspiracy of silence which has shrouded adoption practice" (Van Keppel, Midford and Cicchini 1987,2). Birth parents have more recently revealed their experiences, and their profound loss which had long term deleterious results. Making a contribution to this grief may be the fact that there was no recognisable rituals or supports for the birth mother subsequently without a child. Further, birth parents experience ambivalence of feelings, and many feel sadness, anger, confusion, guilt and distress formulating into long term grief and sense of loss. Such emotions have received little recognition or affirmation in the past.

For adopted persons there are specific issues concerning the loss of their genealogical history, generational continuity, and biological commonality. There can be loss of self esteem, as a result of thoughts of being unworthy and rejected by the birth family. Van Keppel, Midford and Cicchini (1987) assert that a major loss is loss of identity. They believe, as do others (Triseliotis 1973), that a lack of information about biological and genealogical heritage means that the adoptee has very little on which to base his or her own identity and therefore suffers loss of identity and, perhaps linked to this, loss of a sense of belonging.

According to Van Keppel, Midford and Cicchini (1987) for adoptive parents there may be losses as a result of infertility, and the whole process and implications of adoption. The ability to produce a child is an ability assumed by most individuals and by the community. Married couples who initially fail to produce a child come under increasing pressure to do so from their family and the community. The diagnosis of infertility may be a devastating blow causing great personal grief. Until recently most childless couples could overcome childlessness by way of adoption, which was presented as an easy "as if born to you" alternative. Those unable to enlarge their family through birth due to medical or other reasons, also looked to adoption to fulfil their needs.

However, according to Van Keppel, Midford, and Cicchini (1987) the romantic adoption story of past eras, of an couple taking in a poor unwanted baby, may fail to incorporate the complex reality for adoptive parents. The existence of ambivalent messages from the community concerning adoptive status could cause some distress or confusion. Adoptive parents may consequently silently suffer difficulties as a result of

the notion "that bringing up an adopted child is identical to bringing up a biological child" (Van Keppel, Midford, and Cicchini 1987,5). There also may be losses through disruption of an adoption placement which, though uncommon, does occur. Additionally, adoptive parents' unspoken fear of loss of an adopted child to their biological past may for some be a constantly threatening loss.

Marris asserts that when a person's expected pattern of relationships is disrupted in any way for which an individual is not fully prepared, when the thread of continuity in the interpretation of life becomes lost, and when there is an uprooting of structures of meaning and disruption to purpose, attachment, regularity of events and conceptual coherence, grief occurs. It could be considered that Marris's theory has much to offer in the gaining of a greater understanding of the emotional experiences of adoptees and birth parents. However it appears equally useful in providing an understanding of adoptive relationships and the experiences of adoptive mothers.

## **8. Goodness-of-fit Theories**

Such theories generally assert that an individual's development is enhanced by optimum compatibility between the individual, and the demands and the resources of the environment. Consistent with attachment theory, goodness-of-fit theory when applied to parents and children, proposes that when an infant is raised by parents who are sensitive to his or her needs, development will be optimised, and when parents are not able to accommodate the needs of the child, mismatch problems can occur (Clarke-Stewart, Friedman and Koch 1985).

In 1977 psychiatrists Thomas and Chess presented a goodness-of-fit model concerning children's behaviours and development. (the concept having been first described by Henderson in 1913 (Clark-Stewart, Friedman and Koch 1985, Lerner 1984). The model indicates that individual's demands from their support resources are a consequence of their physical and psychological individuality, the attitudes and expectations of others, the behavioural attributes of others, and the physical features of the setting. Thomas and Chess (1977) found that clusters of behaviour traits could be identified as the "easy baby", the "difficult baby" and the "slow to warm baby", and that "temperamental individuality is well established by the time the infant is two to three months old" (1977,153), but that these

temperamental traits were not immutable (Clarke-Stewart, Friedman, and Koch 1985, Thomas and Chess 1977). They suggest that at any time children's behaviour may be consonant with, or dissonant with their surroundings, but that this goodness-of-fit can change over time. Thomas and Chess (1977) found that parents were deeply affected by whether a child was easy or difficult in infancy, and that "when a mother believed that she was responsible for her infant's behaviour, an easy baby tended to reassure her that she was indeed an adequate mother" (Clarke-Stewart, Friedman and Koch 1985,571). The reverse seems equally plausible.

According to Lerner a

"conception that the relationship between an organism and its context must involve congruence, match or simple fit, in order for adaptive transactions to exist is an idea traceable at least to Darwin (1859) ..... this idea has permeated American and to some extent European social science, albeit in formulations as seemingly diverse as those of G.S. Hall (1904), Clark Hull (1952) and George Herbert Mead (1934)" (1984,149).

Lerner (1984) writes that data pertinent to mother-infant dyads does support a goodness-of-fit concept. Lerner believes babies are at risk of later problems if there is a poor fit between the baby's specific temperament and needs, and the available support resources for these characteristics, but that

"neither children's attributes per se nor demands of their setting per se are the key predictors of their aptive functioning. Instead, the *relation* between the child and the context seems most important" (1984,158).

Building on the model developed by Thomas and Chess (1977), Lerner proposed that children may change their demands, or be changed, to fit the demands of changing contexts. Of significance, Lerner (1984) also proposes that their demands may promote reactions from "their socialising others", which feed back to them to increase the individuality of their development, and provide the basis for further development (Lerner 1984,50), this in keeping with an interactionist perspective of life-span development.

Discussed briefly in the context of adoption by Rosenberg (1992) and by Grotevant and McRoy (1989), they suggest that mis-matches can occur surrounding physical, and intellectual capacities, and the expectations of adoptive parents. Further mis-match can occur between personalities of

adoptive parents and children, and between characteristics of adopted siblings, or between adopted children and biological children within the same family. Such circumstances could result in reduced parental responsiveness. Other contributing factors to reduced parental responsiveness could include: when there is major unresolved issues concerning infertility, when there is parental tentativeness in interactions due to the adoption placement being less than guaranteed, when there is a lack of support typically available to most biological parents, and when the child's attributes are seen as different and therefore the child is seen as "not ours" (Grotevant and McRoy 1989,173, Rosenberg 1992). Goodness-of-fit or "matching" has been considered by other adoption researchers, who believe that in adoptive families a perception of likeness, not necessarily of physical characteristics but of style, personality, values or interests, was most important in the adoption context, particularly for older child adoptions (Benson, Sharma and Roehlkepartain 1994, Kadushin 1980, Raynor 1980).

### **9. A Postmodernist/Poststructuralist Perspective**

Of Postmodernism Appignanesi, Garratt, Sardar and Curry (1995) write that it is a consequence of this century's obsession with language. Further, it is a shift away from the historical origins of language which would reveal meaning, to the "social and collective dimensions of language" and the "infrastructure of language common to all speakers on an unconscious level" (1995,57). In offering a understanding of the premise of Postmodernism, Richardson comments that the

"core of postmodernism is the *doubt* that any method or theory, discourse or genre, tradition or novelty, has a universal and general claim as the 'right' or the privileged form of authoritative knowledge" (1994,517).

She continues that a particular form of postmodernist thought is Poststructuralism, which links language, subjectivity, social organisation and power, and recognises that language does not "reflect social reality", it "creates social reality" (Richardson 1994,518).

According to Walton, Poststructuralism grew out of the European political and social movement of the mid twentieth century, after disillusionment, particularly in France, over the failure of the Marxist "revolution" (Walton 1992,2). The grand theory of power gave way to the theory of power as diffuse. Poststructuralism began to challenge the grand structural concepts,

and to challenge the construction of binary oppositions, for example sanity/madness, good/bad, dualistic/wholistic, positive/negative, and dependent/independent (Foucault 1967, Walton 1992). Feminist poststructuralists then began to deconstruct the binary oppositions of patriarchy by arguing that the general use of the masculine, and the binary oppositions of masculine/feminine, as well as the use of other terms such as rational/irrational and subjective/objective, placed the feminine not only in the position of second, but in the lesser position of "other" (Appignanesi, Garratt, Sardar, and Curry 1995, Davies 1993, Walton 1992,2).

Sampson (1989,1) writes that the previously held understanding of "psychology's subject" (the individual) as having uniform naturally occurring realities which can be studied, has received at least six discernible challenges. These are (1) Cross cultural investigations which have suggested the peculiarity of current western society views, (2) Feminist reconceptualisations of the patriarchal versions of social, historical and psychological life, which have produced strikingly different versions of personhood, (3) Social Constructionism, which has built on earlier work of Cooley and Mead, that the selves are social and historical constructions, (4) Systems Theory's focus on relations rather than entities, (5) Critical Theory, which has located individualism in the heart of advanced capitalism, and (6) Deconstructionism, which includes challenging all notions that involve an assumption of agency. All challengers, asserts Sampson (1989), imply that if psychology's subject does exist, it does as a sociohistorical, sociocultural product, and must necessarily belong to its particular time and place. Sampson (1989,4) continues, presenting critical theorists' concept of the "interpenetration" of society and the individual, as a concept where

"we do not begin as two independent entities, individual and society. Rather society constitutes and inhabits the very core of whatever passes for personhood".

Harré (1989) claims that English-speaking heirs of Judaeo-Christian civilisation believe about themselves that they are autonomous individuals, that they are "agents" (in spite of being trapped in a web of conventions), and that they have individually and collectively a past and so have histories (1989,20). Such social discourses, and conversational positioning, make possible certain kinds of roles and lives. Yet according to Shotter and Gergen

"persons are largely ascribed identities according to the manner of their embedding within a discourse - in their own or in the discourses of others". Thus in this way "cultural texts furnish their inhabitants with the resources for the formation of selves", and, that beliefs about self are "constitutive of social pattern" (1989,ix).

Further, Davies writes that:

"Our (liberal humanist) belief that we are the architects of our consciences and our consciousness, is as much the result of discourses we have been subjected to (constituted by) as anything else" (1994,3).

According to Davies (1993) applying Poststructuralist theory makes it possible to see the multiple discourses through which people are inevitably positioned, including discourses of gender and the way in which gender roles are taken up. Central to Poststructuralist theory is the concept of subjectivity. This is different from the concept of identity. It shifts attention away from the unitary non-contradictory selves that individuals each struggle after as a result of our immersion in humanist discourses and, rather, focuses on the inevitable shifting, fragmented, multi-faceted and contradictory nature of our experiences.

Slugoski and Ginsburg (1989) examine the development of identity, in poststructuralist terms, and challenge Erikson's theory of identity formation suggesting it is culture bound, it is inappropriate for marginal groups, it is gender biased, and it implies that the individual has control over the process. Further it implies that anything less than identity achievement is a deficit. They believe Erikson's theory is not invalid, but is "a model of culturally sanctioned ways of talking about oneself and others during a certain stage of life in Western societies (Slugoski and Ginsburg 1989,51). Supporting this position Kitzinger (1989) asserts that identities are not primarily the private property of individuals. Rather they are social constructions, suppressed and promoted in accordance with the political interests of the dominant social order.

Rose (1989) argues strongly that we need to recognise that our search for our own identity is itself constituted by the forms of identification and practices of individualisation by which we are socialised and governed, and which provide us with the categories through which we govern ourselves. Similarly Slugoski and Ginsberg (1989) proclaim that to conceive of action taken in achieved identity is to believe in the notion of agency - that an individual could have done otherwise.

It would seem that Poststructuralism has its origins firmly based in Symbolic Interactionism, with both theories drawing on role theory to varying degrees. For Mead (1971), Symbolic Interactionism posits that the self is not primarily a physiological organism, rather the self is a social self, that which the organised community or social group (generalised other) gives to an individual. That is, the experience of the self is given to the individual and experienced by an individual objectively rather than subjectively. It is gained by taking generalised others' attitudes towards the individual. Further it is not enough that individuals "take" the attitudes of other individuals toward their "self", but in the same way they must take up the attitudes and the roles ascribed by the generalised others concerning the social group in which they are engaged (1971,147-158). It is only through the taking by individuals of the attitudes of the generalised other towards themselves, and the social group, that "a universe of discourse" is rendered possible. Only then may a "complete self" be developed, or that self which has developed, be "possess(ed)" (Mead 1971, 147-158).

#### **A Poststructuralist View of Adoption**

In developing a Poststructuralist view of adoption it could be suggested that during the adoption process, significant members of the adoption circle (birth mothers, adoptees, and childless women who become adoptive mothers) are all faced with the need for an altered subject (identity). These are the mother who is now without a child, the child who is now without a mother, and the childless woman who becomes the mother of a non-biological child (this is not necessarily to exclude birth fathers or adoptive fathers who may well fit into a similar model). However, if the existing cultural discourses only value individuals who are living within society's rules, including religious and moral rules, and also including cultural rules of generational heirs and inheritance, blood ties, and fecundity (fertility), then those unlinked to their genealogical past or present, and those unable to produce a genealogical future generation, are devoid of alternate discourses and roles. As members of the society, they would have little perceivable choice but to take on, to varying degrees, the available discourses (be they ill-fitting).

In considering society's construction of the role and identity of mother as a natural and valued role for married women, single birth mothers would best fit if they pretended they were not mothers. Additionally, adoptees would

develop an identity which fitted if they ignore the two family model of their existence. Further a position of equal denial would be that of adoptive mothers, who would find acceptance if they emphasised the absolute sameness between adoption and rearing a biological child. It is not difficult to see that under such circumstances, birth mothers would find little understanding of their grief, adoptees could not avoid incorporating to some degree the non-acceptance of their adoptive status inherent in the language and in the prevailing discourses and practices, and adoptive mothers would be unlikely to develop a strong sense of their own unique role.

Gergen (1989) writes that self knowledge is not, as is commonly assumed, the product of in-depth probing of the inner recesses of the psyche, nor is it the result of acute sensitivity to the nuances of emotion, motivation, or intention. Rather it is a recognition and a mastery of the discourses. However Davies (1992) points out that even "when the process of positioning has been understood" it may be that taking up existing positions, to varying degrees, is "almost inevitable" (1992,54) because they have "*become part of the subjectivity of that person*" (1992,57). A Poststructuralist perspective provides an understanding of the positions taken up by significant players in adoption, although the inevitability of being locked into such positions, preventing change, does not necessarily appear predetermined.

The Poststructuralist's deconstruction of the language which characterised structuralism, and through which knowledge of the self and the social world is structured, identifies that terms in the language are powerfully constructed as binaries of either/or, with one term being able to express both what they are and what they exclude (the other). A consideration of adoption in poststructuralist terms may reveal such binaries in many adoption related social discourses. Examples of such binaries may include such pairs as nature/nurture, legitimate/illegitimate, wanted/unwanted, deserving/undeserving, single/married, fertile/infertile, and natural/unnatural. Such binaries may have been powerful influences in adoption discourses.

### **The Contribution Made by Theory to Adoption Legislation**

It appears that early adoption was influenced by a "mechanistic" model of development. Western adoption, in developing a "raise as if born to" nurture model of adoption, placed less emphasis on the biological "organismic" inheritances of the child, and placed major emphasis on the role of the environment in the development of the child. A review of the development of the early adoption legislation (between the turn of the century and the 1930's) reveals these early laws were evolving at the time when the environmental theoretical explanations of personality development were beginning to enjoy great early popularity. Such theoretical explanations may have had more than a little influence on the development of early adoption legislation. However growing public acceptance at the time of the "raise as if born to" policy, may belie total agreement with an environmental position. Some ambivalence is evident with the lack of early enthusiasm to embrace adoption after the introduction of adoption legislation in the 1920's. Further, hesitation over the possible inheritance of "bad blood" may provide evidence of less than total acceptance of the environmental explanation (Goodacre 1966, Kadushin 1980).

Iwanek (1989) considers that new theories supporting environmental rather than biological factors concerning child development resulted in the discounting of genetic determinism and dedicated support for the advantages of the adoptive environment. Such an emphasis not only may have severely diminished the importance of the genetic component of the child (the genetic, nature component), but also failed to adequately comprehend the unique developmental challenges which may face the adopted person and all those upon whose life adoption impacts. Iwanek (1989) does suggest that studies asserting the importance of the environment may have facilitated a theoretical shift away from securing of the best child for the family, toward a position of the best environment for the child.

The development of early bonding and attachment theories appear to have contributed to changed adoption policy, with Bowlby's theory informing recommendations for much earlier placement of the adopted child. These theories also may have contributed to the popularity of adoption of young babies, but was detrimental for children deemed damaged by maternal deprivation. With the society's embracement of bonding theory in the post

war era, married women at home as nurturers of babies became one of this society's promoted icons. In combination with other factors including the society's mores of conception within monogamous marriage, and with the influence of psychodynamic theory, the demand for, and the supply of babies grew and the stories of bad mothers abandoning unwanted babies flourished. These theories appear to have had an impact on the exclusive "clean break" legislation developed at the time to safeguard all concerned. Elements of the goodness-of-fit theories are evidenced in the practice of closely "matching" children available for adoption to adoptive parents, this attempting to ensure few if any differences.

Changes in the practice, policy and legislation concerned with adoption occurred in the 1960's. Kirk's 1964 exploration of the availability of an acceptable role ("cultural script") for adoptive parenting lead to the development of a theory recommending the ideal coping position as "acknowledgment" of, rather than "rejection of differences". Ideas of psychological growth and fulfilment through the development of self esteem and a complete sense of self (Maslow's self-actualisation) were emerging in the 1960's, as was recognition of the unique developmental milestones continuing across the lifespan for all persons (Erikson's crises model). In the 1970's and 1980's recognition of the unique differences in individuals' biological blueprints, and renewed appreciation of the role of genetics in the personality and in the development of individual, have emerged. All of these theories of individuals striving for growth, fulfilment and a complete sense of self may have implications for adoptees, and may have influenced the changes toward more open adoption and access to identifying information.

It seems necessary to note here that it appears reasonable and understandable that theories of bonding and attachment, nature and nurture, and lifespan development, explaining that children need the continuous care of one mother or one mother figure for bonding, and for future ongoing development, could be instrumental in bringing changes to previous adoption policies. However it seems less clear, and perhaps indicative not only of the strength of prevailing discourses but of the power, complexity and incomprehensible nature of societal values, mores and attitudes, that while theories dictated the desirability of early continuous care of a child by its mother, the option of the single birth mother raising the child was not presented as a real option.

## **Conclusion**

The theories presented in this chapter incorporate many perspectives on adoption that reflect currently acknowledged (to varying degrees) professional and social adoption discourses. They include theories of loss, Kirk's theory of adoptive relationships, Holman's theory of inclusive and exclusive foster care, psychoanalytic theories, and theories of life-span development, developmental tasks across the adoption lifecycle (Rosenberg), family systems and goodness of fit. The review also incorporates some perspectives that thus far have attracted more minimal consideration or exploration in the adoption literature, for example a Poststructuralist perspective. Additionally, a review of the attachment and bonding theories provided a look at some important theoretical underpinnings of mothering, and, consequently of adoptive mothering, in this society. A greater examination of the mothering literature is undertaken in the following chapter.

**CHAPTER FIVE**  
**THE BEGINNINGS OF MOTHERING:**  
**A MOTHERING AND NEW MOTHERHOOD CONTEXT**

**Introduction**

This final chapter of Part II, Deconstruction, examines the literature addressing infertility, and the literature on motherhood and mothering and the wide range of emotions experienced by new mothers after the arrival of a baby. The review includes the literature describing the distress and depression experienced by some women in the postpartum period, and the theoretical explanations of such emotional responses.

While adoptive mothering has been considered by professionals to be both similar and different to rearing a biological child once the legal adoption processes are completed, the reality of new adoptive mothering seems little known. Wide ranging responses of many women to the mothering role are well documented in the literature, yet the possibility of such responses being experienced by adoptive mothers seems little acknowledged or explored. The examination of such available literature in this thesis is to acknowledge that adoptive mothers are mothering, and may therefore also experience a range of emotional responses to their role.

**Mothering: An Historical Context**

Crawford (1990) and others write that despite the fact that without women's reproductive labour a society would cease to exist, motherhood has attracted, until recently, little interest from western historians or social scientists (Oakley 1979,1981). This recent interest has not necessarily produced favourable accounts, with parents in early modern times being accused of cruelty and, mothers in particular, being condemned for loveless neglect (Crawford 1990).

Other studies have presented a happier picture, although many believe that good mothering was "an invention of modernisation" (Crawford 1990,4). Badinter (1980) writes that maternal instinct is not a natural instinct but rather, similar to good mothering, a modern development. Attention to the

psychological development of the child is also a relatively recent phenomenon (Richardson 1993).

According to Crawford (1990) in the 17th and 18th century in England, male authority in many households was considered necessary and natural. A powerful ideology was developing in the emerging middle classes of good mothers caring for their children under patriarchal direction, and social approval for motherhood was based on childbirth within marriage. In Australia childbirth within marriage appeared less common, although this did not necessarily mean relationships were transient, or that children were unwanted. Nevertheless, by the late 1780's Governor Phillip "offered various incentives to marriage" (Burns, Goodnow, Chisholm and Murray 1979,20). At this time two-thirds of Australia's annual number of new births was reported to be illegitimate (Burns, Goodnow, Chisholm and Murray 1979). Similarly in England powerful disincentives were discouraging maternity outside wedlock; the children were deemed bastards from whom inheritance rights were withheld, and punishment of women for ex-nuptial birth was confinement to a house of correction. A couple who married in order that the child was born, although it had not been conceived within marriage, received minimal punishment (Crawford 1990). A natural bond was believed to exist between a mother and her baby, and as such mothers should mother their own children where possible.

Some community doubt existed concerning the commitment of surrogate mothers, including wet nurses, parish nurses and foster mothers, but especially step mothers. It was believed that a step mother's care represented a danger to children, who would not be loved and cared for as the step mother's own children. Fairy tales emerged depicting these archetypes (Burns 1985, Crawford 1990, Fildes 1990, O'Neill 1991).

According to Richardson (1993) obedience to authority, in particular the authority of the father, was an important feature of family life during the nineteenth century. A child's disobedience was seen a rebellion against parents and against God. High infant and child mortality during this time meant mothers were urged to teach their infants to be obedient, to insure the child's eternal salvation. As these lessons in obedience and morality were seen to be those lessons a mother had learned from an early age, it was considered easy for them to pass them on to their children.

The welfare of children was not generally treated as important, according to many historians, yet Gittins argues that there is scant evidence that parents

were less capable of loving their children, only that in those difficult times it may have been expressed differently (Dally 1982, Gittins 1985, Matthews 1984, Richardson 1993) For many families children's labour formed an essential part of their economic survival (Gittins 1985). Prior to the eighteenth century it was believed children should work however, as the new middle classes became economically stable, they no longer needed their children's labour. Subsequently this new middle class argued that "children generally should not work" and they sought legislation which forbade young child labour (Gittins 1985,3). This heralded improved child health. In Victoria, two Acts of 1887 imposed penalties on the employment of children unless the requirements of the Education Act were followed (Kennedy 1985). By the early 20th century better living conditions prevailed, and by the 1940's improved medical care for mothers and infants gradually improved the high mortality rates of previous years, of women in childbirth, and of their newborn babies (Matthews 1984).

In the early years of the twentieth century ideologies about women as wives, were giving way to ideologies of women as mothers. Women were beginning to be seen as the "saviours of the race" (Richardson 1993,30), entrusted with the vital task of moulding the future generation. However, so important was this task, that these good mothers needed professional, expert instruction in child care. Women's wisdom acquired as mothers, of birth and childcare, was devalued, and the medicalisation of childbirth and childcare grew (Albury 1988).

According to Rich, motherhood also demanded of women "maternal instinct rather than intelligence, selflessness rather than self-realisation (and) relation to others rather than the creation of self" (1976,42). Motherhood was "sacred" (Rich 1976,42). This was of course as long as the offspring was not illegitimate. Single parenthood now immediately rendered women unfit, although this "unfitness" could be "at least partially rectified by abandoning the baby to the state" or by marrying during the pregnancy (Matthews 1984,181). Motherhood was otherwise "women's highest and holiest mission", and the home was the basis of all institutions, the buttress of society" (Rich 1976,42).

The "sacred calling" had of course a pragmatic reality, writes Rich; ordinary families in early colonies had many children because no other calling was available to women. A young women of twenty five was classed as an old maid and treated with reproach. Such women had no way of economically

supporting themselves, and they most often lived with kin and helped with child care or aged care.

Historically (and currently in less industrialised societies), women have raised their many children while doing their share of productive labour as a matter of course. The home was a part of the world and the busy workplace. Women raised children, cooked and washed. They also produced dairy foods, were involved in spinning thread, kept poultry, and brewed and baked for immediate consumption and for barter and the marketplace. They worked in the field and they crafted. Mothering, and the keeping of the house were not and could not be the central occupation of women, nor were women and children living and working in isolation from the community (Calvert 1985, Gittins 1985).

With the changes to productivity, and the development of early factories, came the gradual severance of the world of work from the world of child raising. Many women worked alongside men for long hours before then returning home to childcare and domestic duties. Children at home were cared for by older siblings, by relatives, or by women carers who would care for young children for a fee. Yet by as early as the mid 19th century, voices were beginning to rise against mothers in the workplace and in praise of "the mother in the home" (Rich 1976,44). At this time there were concerns over the welfare of children whose mothers were working. There were also growing concerns that women working twelve hour days for less pay than men (54% of the male wage in Australia in 1919), were a threat to men's position in the workplace (Burns, Goodnow, Chisholm and Murray 1979). State-supported childcare was opposed on the grounds that it would violate the "sanctity of the domestic hearth" (Rich 1976,49). The cry for full time mothering reached a crescendo at the time when technological change began to reduce the level of societal and labour hardship, and the size of families was declining. The idea of an exclusive mothering and homemaker career was to become a "religious obsession" (Rich 1976,44).

Patriarchal voices began to deliver in earnest the message of dedicated, selfless but strict mothering, and pronouncing that "when the world is filled with pious and patriotic mothers then will it be filled with virtuous and patriotic men" (Rich 1976,44). Legislation, in the form of the British Custody of Infants Act in 1839 gave formal authority over young children to mothers, this providing legal recognition of the mother/child bond. Men moved to establish themselves in the role of breadwinner and head of the household.

Mothers were seen to serve the interests of patriarchy; they exemplified in one person religion, social conscience and nationalism. The idealisation of motherhood was born (Calvert 1985, Dally 1982, Reiger 1991, Rich 1976).

At the turn of the 20th century, according to Matthews, an almost exclusively masculine economy was established in Australia, balancing agriculture, manufacturing, and services, with the majority of men employed in towns and cities and many earning a "family wage", adequate to support wives and children (Matthews 1984,198, Burns, Goodnow, Chisholm and Murray 1979, Calvert 1985,63, Gittins 1985). The exclusion of women from the formal paid workplace appeared to be the exclusion in particular of married women, with single women allowed and even expected to work until marriage.

Through two world wars and a depression, striking changes occurred in married women's lives in connection to the workplace, yet these changes were seen as mere aberrations, they were seen as temporary workplace engagements and necessary movements which would soon return to normal. After being praised for their work during the war years, women were encouraged after the Second World War that they must "give up their jobs for the sake of the returned men, and the future welfare of the race" (Lewis 1984,151, Campion 1995).

However Weeks and Batten argue that it may be incorrect to assume that most women left the formal paid workforce after the Second World War, citing a study by Beaton that of the 200,000 women in Australia who entered the formal paid workforce, "only one-quarter of this number actually left the paid workforce after the war" (Weeks and Batten 1991,35). It is also incorrect to assume that women in the home were not engaged in paid work in addition to unpaid domestic labour, or that housework did not have a market value.

According to Gittins (1985) the production of goods in the home by women and children for cash or exchange has continued for centuries. Further, many working class women were employed by upper class women and men for cleaning, cooking and childcare, this undertaken in addition to their own household duties. For some women, particularly "deserted mothers", prostitution was a means of self-support (Burns, Goodnow, Chisholm and Murray 1979, Kennedy 1985). Offering board and lodging was also a means by which women could exchange domestic labour for payment. What further existed according to Gittins (1985), was an informal women's

economy operating between households with exchange involving work, goods, childcare and sometimes cash and children (Burns, Goodnow, Chisholm and Murray 1979, Gittins 1985, Nairne and Smith 1984).

During the early twentieth century expert advice on childcare and homemaking expanded and demands on women as wives, homemakers, and mothers grew. Theorists, child specialists, clergymen, politicians and the media extolled the virtues of creating a proper, clean and happy home, and of engaging with the science of housework and childraising (Albury 1988, Ehrenreich and English 1978, Mercer 1975). However in the 1940's and 1950's authoritarian mothering gave way, under the influence of psychoanalytic thinking, to a much more permissive approach. The psychological, emotional and physical well being of the child was "the new job description of motherhood" (Richardson 1993,42, Dally 1982, White 1996), and success hinged on a mother's balanced emotional state. A close warm, loving, continuous relationship with a good mother was what every child needed.

Few questions were asked concerning how women dealt with the terrible solitude of raising children in isolation, how they dealt with the difficulties, uncertainty, confusion and illusions of this newly constructed motherhood role (Dally 1982). Any problems in mothering were seen to be the mother's inadequacy. Their self-reported problems, of lack of relief from child care, low self esteem, and few community supports were dismissed, or treated with "pharmaceutical bandaids" (Reiger 1991,52). From a psychoanalytic perspective, what benefited the child, was considered to be mutually beneficial to a good mother, who "found her own fulfilment in meeting her child's needs" (Richardson 1993,40, Chodorow 1978). Richardson writes that, at a time when the values of discipline and self-control in the society were being superseded by those of permissiveness, consumerism, self indulgence, and self actualisation, this theory of the enjoyable, naturally fulfilling and mutually-rewarding mother/child relationship avoided the contradiction of how women could be self-indulgent, self actualising and self-sacrificing all at the same time.

By the early 1950's Bowlby's ideas on mothering had reached a wide audience, this theory reinforcing the notion that the mother/child bond was crucial to the child's future mental health. Institutionalised care was seen as deleterious to children's wellbeing, this due to maternal deprivation. Further Bowlby's theory reinforced the instinctive, natural and naturally

rewarding role of mothering. Theories of mothering now appeared to direct ordinary devoted mothers to merely rely on bonding, love and instinct to mother, although it was conceded that some mothers may not always know instinctively what was best for the child, and therefore advice concerning childrearing from experts was still necessary. The desire to mother, however, was natural instinct. Further, to enjoy mothering was natural and good. A "good mother is always available to her children" (Reiger 1991,47) and those not enjoying the work ("leisure" or "fun") of childcare and housework, those not engaging at all times with the child, or, those harbouring feelings of hostility toward the child were not good mothers (Calvert 1985,57, Walkerdine and Lucey 1989,83, Ehrenreich and English 1978). Gittins writes that it is ironic that the new middle classes of the nineteenth century

"who so fervently preached the gospel of domestic bliss, the sanctity of the family, the women's place as in the home, and the importance of cleanliness, hygiene and careful childrearing,"

placed much of their burden of domestic work and childcare on the shoulders of working class women (1985,123). The emerging middle class women in particular were able to embrace the whole mythology of the strong attachment to the child, the child's need for selfless love and security, and its need for constant attention and guidance;

"the good mother is one who wrapped their child in a blanket of love, attended to its every whim, ... prepared for every possible little upset" (Mercer 1975,208).

By the late 1960's and 1970's Bowlby's theory of maternal deprivation had major implications for working mothers, regardless of the fact that the theory of maternal deprivation had been developed through research into deprivation resulting from long-term institutional care. Women who did not work were best able to "to fulfil their children's needs, as well as satisfying their own deepest instincts in the process" (Richardson 1993,45). Women who wanted to work outside the home "were depriving both their children and themselves" (Richardson 1993,45, Mercer 1975), thus the regulation of women seemed secure (Walkerdine and Lucey 1989).

Richardson believes however, that while it appears that developing theory was "contributing very nicely" to the British Government's policies on child care, the belief that post war theories were used to drive women out of jobs and back into the home, is "both inaccurate and oversimplified" (1993,46).

Richardson argues that during the war years women had been advised that their service was temporary, and with lack of adequate day care and low pay "women might not have wanted to go on working" (1993,46).

Richardson further argues that it would be wrong to see Bowlby's work as entirely negative to women, rather his emphasis on women's special knowledge of mothering, the importance of the job of mothering, and the need for support for mothers through improved child guidance services, may have been some positive aspects of his work. Nevertheless there has been serious criticism of much of Bowlby's maternal deprivation theory and its extrapolation to ordinary children and working mothers (Mercer 1975, Rutter 1972, Sluckin, Herbert and Herbert 1983). Yet it still appears that maternal deprivation theory

"underpins much of what is taken for granted about childrearing and the role of women in society. It also continues to exert an important influence on the thinking of policy makers and childcare professionals." (Richardson 1993,47).

The steady increase of women entering the workforce since the 1970's indicates for some women, at least, a partial rejection of Bowlby's theory and the regulation of mothers. That many women feel guilty, and perceive the condemnation of others that they are abandoning their babies by returning to work, indicates the strength and embeddedness of patriarchal ideology and of maternal deprivation theory (Walkerdine and Lucey 1989).

During the late 1960's and early 1970's new theories of mothering, and the influence of the women's liberation movement had potentially radical implications for change. Mothering was emerging as less a natural and intuitive role and more as a learned role that was not a role bound by gender. Women did not necessarily have to be full time mothers, and mothers could "be male" (Richardson 1993,59, Pease and Wilson 1991, Rothman 1989). Further, acceptance grew that children did not necessarily need exclusive maternal care, and could even benefit from quality alternate care (Burns, Goodnow, Chisholm and Murray 1979, Rossi 1972). Women had increased control over fertility, and increased opportunities to show that maternity is only part of the social contribution they can and do make (Reiger 1991).

Some women began to reject the assumption that all women must always mother, or that motherhood was necessarily every women's destiny (Tong 1989). However the ideology of parenting remained strong. Mothering

ideology incorporates many persuasive reasons for parenting, including obtaining a sense of membership to "real woman(hood)", enjoying a more meaningful life, gaining a "mother's power", providing a sense of security in old age, gaining the prestige value of children, displaying one's fertility, fulfilling one's destiny, ensuring a marriage lasted, creating a sense of immortality and placing one's "stamp upon the world", providing heirs and grandchildren, gaining unconditional love from a dependent child, adhering to "cultural values" of forming and living in families, avoiding the alternative of an empty marriage and an empty nest, and performing the "important role" of mothering (Richardson 1993,1, Gittins 1985,95-110, Richards 1979, Townsend 1957, Sorosky, Baran and Pannor 1984).

Confusingly, the reality is that mothering in 20th-century Western culture, according to Kitzinger, is viewed as a "second-rate activity", and children are considered to be best cared for in isolation, where they cannot cause "irritation" or intrude on "the organisation of life in an industrial culture", an environment designed to accommodate adult healthy males (Kitzinger 1992,5, Mercer 1975). Women's identity becomes that of mother, this superimposed over any previous identity.

Leonard (1984) writes that it is both the ideology of male economic responsibility, and the ideology of motherhood, together as the "ideology of family life", that maintain women in domestic labour, and suppress them in the role of mother (1984,165). He observes that motherhood is presented as an important, highly valued social role from childhood, and becoming a mother brings widespread social approval to the woman, while providing for the family is the role of the father.

However Leonard argues that to "be a good mother is so demanding a role that complete subordination to the child's needs seems often the only way to meet it" (1984,166). This means, Leonard continues, that although motherhood can be a good and satisfying experience, ideologically constructed motherhood "represents a deeply contradictory experience" (1984,166). Frequently argued is that a special bond exists between a baby and a mother. Yet given the subordination required by the ideology, the resultant "close and symbiotic" relationship is not surprising. This in turn acts as tautologous reinforcement of the biological existence of a unique maternal instinct and the justification of the subordination of mothers (Leonard 1984, Dally 1982). Leonard writes that in practice women frequently fight against this complete subordination, however their primary

role is as mother rather than as women. The "construction of self must centre on the attributes of a mother" (1984,167), and insubordination will result in guilt and anxiety (Leonard 1984).

For many mothers, the reality of mothering within such a contradictory and invalidating context may bring forth a range of emotional responses, some of which are unexpected negative responses. There appears to be varying social acceptance of these discrepancies between the ideology and the reality of mothering, and of women's discontent. Typically, the source of any discontent is not seen to have its origins in the tasks of mothering, or in mothering within such a contradictory context, but rather in the individual mother. Nairne and Smith (1984) assert that women can feel depressed after achieving what they thought they always wanted, when the actual experience does not measure up to their expectations. They state that depression is more likely to occur when the experience is one towards which a lot of personal energy has been directed.

It has been argued that revelations in recent times of the discrepancies between the reality and the ideology of motherhood has created a negative image of the identity and the occupation of mothers; motherhood as a symbol of mindlessness and of isolation, of loss of self, and of being subsumed by the infant. For some women this makes motherhood seem too high a price to pay (Gieve 1987, Crouch and Manderson 1993).

Distinguishing between motherhood and mothering, Dietrich theorises that it is the ideology of motherhood that serves to suppress and exploit women. In contrast, "mothering" involves a unique power, as well as the capacity and skills of mothering (1987,242). She continues that it is useful to separate three aspects of mothering and motherhood: a) the ideology of motherhood, including the images of motherhood in this patriarchal society, b) the work of mothering, the skills and effort needed to nurture the child from birth to adulthood and beyond, and c) the feelings of mothering, the positive and fulfilling and the negative and limiting aspects of mothering transferred into feelings (Dietrich 1987,242-246). Most recently there appears to be a "re-embracing" of women's exclusive ability to mother, and their desire and right to mother in a supportive environment (Crouch and Manderson 1993,4).

In Western societies, as in more traditional societies, mothering is an issue that effects all women, this whether they biologically mother a child or not, although most women expect to mother. While the availability of

contraception and legal termination of pregnancy secured rights for women to choose when mothering occurred, most women take for granted the ability to mother (Richards 1978). When this right to choose when and if to mother is removed through infertility the impact is often devastating.

### **Infertility: A Barrier to Mothering**

"Sterility or Barrenness hath in all Ages and Countries been esteemed as a Reproach" (Leminus 16th century, cited in Crawford 1990,6).

Kitzinger (1992) writes that in many cultures fertility is celebrated, and those who are infertile are often shunned. Most cultures are ritually united in the celebration of fertility; the past, the spirits of the tribe, and the future united in conception. In Western culture it is a common perspective that every person has a right to parent a child, with Article 16 of the International Bill of Human Rights stating that:

"Men and women of full age, without any limitation due to race, nationality or religion, have the right to marry and to found a family" (Article 16.1).

Childbirth is considered the female rite of passage (Crawford 1990, Kitzinger 1991), and women are under great pressure to bear children.

These "social pressures" still remain strong, as was apparent in research by Marshall (1993,109) with a sample of voluntarily childless individuals. Most of these participants had encountered pressure to parent, although not all felt the same sense of being "under pressure" to perform (1993,114). Richardson and others believe that it is not difficult to understand why, in a society in which "the efforts to socialise girls into wanting babies are so pervasive", women most often "choose" motherhood (Richardson 1993,xi, Chodorow 1978, Richards 1978). Chodorow (1978) speaks of the reproduction of women as mothers, as "a product of feminine role training and role identification" (1978,31). She further asserts that girls are

"barraged from early childhood well into adult life with books, magazines, ads, school courses, and television programs which put forth pronatalist and promaternal sex stereotypes" (1978,31).

Voluntary childlessness is considered selfish, and involuntary childlessness a situation to be overcome (Marshall 1993).

Infertility, or the loss of fertility, often involves multiple losses which can be unforeseen, unexpected, and devastating. Confronting infertility can be a life shattering and humiliating experience, the reality, and the effects of which may be little realised by the fertile. Johnson (1992) lists six distinct areas of significant loss for an infertile couple, these being loss of control over many aspects of life, loss of individual genetic continuity linking past and future, the loss of the joint conception of a child with one's partner, the loss of the physical satisfaction of pregnancy and birth, the loss of the emotional gratification of pregnancy and birth, and the loss of the opportunity to parent. According to Johnson, loss of control of fertility, for adults reaching maturity after the birth control revolution, presents an extreme irony.

Over the course of this century the medical profession's involvement in the process of parenting has become more and more profound. Medical intervention reducing fertility was welcomed, and advancement in ante natal care and delivery greatly benefited mothers and babies. Yet medical intervention has seeped further into parent's reproductive lives, particularly in the area of assisted reproduction, reducing their control over their own reproduction (Campion 1995).

Reproductive techniques available include artificial insemination by donor, where donor semen is used by fertile women with infertile partners, egg donation for women unable to produce eggs, and basic in vitro fertilisation, where fertilisation of the woman's eggs occurs outside the female body using a partner's sperm and fertilised embryos are replaced. Surrogacy is another form of reproductive technology, where a women agrees to receive the sperm of another women's partner, and to carry the baby in her womb until the birth, when the baby is given to the commissioning couple.

Klein writes that since news of the first child "conceived in vitro (in the glass)", it has been a highly publicised media topic (Klein 1989,1). Some believe that those working with reproductive technologies assume the perspective that all women are essentially reproductive beings, and that they perpetuate the myth that "benevolent lab-father" can and will produce children for couples experiencing infertility (Klein 1989,1, Napier 1987, Campion 1995, Rothman 1989, Tong 1989).

Many significant and growing issues exist in the area of assisted parenthood, not the least being the accurate success rate for live births after medical assistance. Klein (1989) speaks of the hidden "failed technology"

of in vitro fertilisation (IVF), which produces a success rate ranging internationally between five and ten percent, and she argues that this invasive technology also brings high risks of side effects including ovarian cysts, and depression (Klein 1989,1,2). Similarly Rothman believes that doctors have "colluded with women to protect genetic paternity, at the cost of women's safety and health" (1989,150). Others point to the medical control over these services, and the inequity of services to women, with the rejection of women who fail to fit the acceptable, stable heterosexual relationship criteria (Napier 1987, Campion 1995).

The growing demand for assisted reproduction is attributed to many factors including the huge reduction in babies available for adoption, couples wanting to have the experience of creating a child, couples' (or single persons') desire to experience family life, divorce and remarriage resulting in the desire to parent in later life or after vasectomy or tubal ligation, and evidence also exists of a reducing fertility rate over the century (Campion 1995, Crouch and Manderson 1993).

Also relevant to the demand for services, according to Deitrich, is the "ideology of infertility" which states that women in this society who cannot fulfil their maternal role have failed (Dietrich 1987,245). Deitrich believes that women need to expose the exploitative nature of this ideology. She states women need to see themselves as powerful, and able to choose their position on reproduction (Dietrich 1987). Similarly Koval writes that:

"If motherhood was seen as one of the options to be chosen by women, rather than as an essential part of self esteem and social acceptance, then the drive to further development of reproductive technology might be largely removed" (1986,8).

Women need to realise they are able to exercise their rights to engage or disengage with assisted reproduction.

One issue of importance to some individuals is that of knowledge of biological history, previously little regarded in the development of these technologies. Recently similarities between IVF and other reproduction processes, and adoption, have been highlighted and discussed in the literature (Ferrari 1996, Harris 1994). Ferrari writes that since its development, the modern treatment of infertility has been riddled with "ethical dilemmas" (1996,11). Most recent are those dealing with ownership and lifespan of frozen embryos, eligibility and equity (access for groups such as de facto couples, single, and lesbian women) and the

provision of information about donors to children who are conceived through donation of eggs or sperm. An Australian study by Paul and Durna (1988,42) found that sperm donors were more interested in their children than was previously thought, and in Victoria information will be available to children born through such methods, in line with the State's family and adoption laws (Ferrari 1996).

Discussing the impact of infertility further, Johnson (1992,25) speaks of "fertility-impaired" people allowing themselves to become "victims" of infertility, by avoiding thinking about their own crisis management style when faced with infertility. Similarly Rothman discusses "infertility as a disability", where the degree of felt handicap is dependent upon the individual involved, and the means by which the handicapping effects of the disability are addressed (1989,143). It appears that initially it is difficult for some individuals to cope with the full ramifications of infertility, or to fully comprehend its significance for an infertile partner. It is often difficult for both to see themselves as an infertile couple. According to Johnson (1992) avoidance of the infertile label may prevent the development of feelings of compassion for others, including those facing decisions surrounding the instigating or the abandoning of I.V.F., donor sperm, or other medical procedures, or those facing decisions concerning voluntary childlessness. For those couples for whom adoption is the route to parenthood, being victims of the infertility disability may prevent the development of compassion for birth parents or for those faced with an untimely pregnancy or single parenthood (Johnson 1992, Rothman 1989). Infertility appears to be a little recognised stressful life event.

### **Life Events**

Sugarman writes that life events are "bench marks in the human lifecycle" (1986,131), describing them further as the milestones that give shape and direction to an individual's life. She continues, that when significant life events occur they require the modification of the "taken-for-granted assumptions we make about ourselves and our world" (Sugarman 1986, 142). Such transitions are rarely smooth and continuous. Previous research had indicated that disadvantaged socio-demographic groups such as those living in poverty, those with disabilities, the less educated, and women, are more vulnerable to the impacts of life events. Researchers then hypothesised that psychological vulnerability of some groups may be

due to the joint contribution of many stressful events, and few psychological resources with which to cope with these life events. Life event scales were developed to gauge, measure and even predict life change (for example Holmes and Rahe 1967, Henderson, Byrne and Duncan-Jones 1981, Tennant and Andrews 1976). Typically researchers use the scales to measure the amount of life change experienced by individuals over a given time period (Thoits 1982, Sugarman 1986, 140).

With regards to social class, when research utilising life event scales is examined, findings are mixed, although many researchers agree that lower class groups experience more stressful life events. In disagreement, Thoits argues that her research (1982) does not support an explanation of greater vulnerability to life difficulties as due to a higher incidence of life events.

Dohrenwend and Dohrenwend (1974) consider research where perception of a more threatening, demanding, frustrating environment may be linked to the impact of life events. Closely related to this, they cite research which indicates the idiosyncratic rather than general nature of the effect of life events; what one individual finds stressful, might be of little consequence to another. These points raise issues concerning scales which assign a standard score to measure the stressfulness of a given event. Of importance is the suggestion by Gersten, Langner, Eisenberg, and Orzeck (1974) that the key component in making a life event stressful is its ability to change an individual's usual activities, not its desirability or undesirability. Further they suggest that an item on a life event scale could be "nonevent", an event that is anticipated and does not occur, and could be something desirable which does not occur when its occurrence is a normative one (Gersten, Langner, Eisenberg, and Orzeck 1974). Failing to achieve motherhood may fall into such a category. They state that "nonevent" cannot be easily incorporated into current scales measuring and scoring readjustment, and that other types of scales could be conceptualised.

Thoits (1982) writes that she did not find significant evidence of the buffering effect of social support, however Cutrona (1983, 1984), and many others state research findings have indicated that social support is a significant determinant of individual differences in reactions to potentially stressful events including motherhood (Scott 1988, Boyce 1988, Brown and Harris 1978, O'Hara, Rehm and Campbell 1982). Interestingly, adopting a child is not frequently considered a life event in the life event literature or the adoption literature, nor has it been considered a potentially stressful life

event. This may be in part the result of some life event theorists asserting that it is only undesirable life events that have the potential to impact negatively on an individual's life.

### **New Motherhood as a Distressing Life Event**

Literature emerging during the second half of this century began to consider the transition to motherhood in greater detail. According to Crouch and Manderson pregnancy is a build up to the crisis of delivery; heralding the approach of this "singular and monumental event" (1993,28) in women's lives. In contrast they describe becoming a mother as a "process" rather than a singular event, spanning pregnancy, childbirth and the puerperium; a clear predictable timetable marked at the onset and at the conclusion with the return to normal of the body to a "near pre-pregnant state" (1993,109). Yet it could be considered that achieving motherhood is not a transitory event or process, rather a transitional life event making monumental lifelong changes to women's lives. Recent literature has explored motherhood in much greater depth than previously held to be warranted, particularly, the stress and maternal distress many women experience after the arrival of their baby (Crouch and Menderson 1993, Sugarman 1986, Phillips 1985, Puckering 1989, Corob 1987, Oakley 1981b, Dix 1986, Summers 1975).

Frank and Rowe report that in the first year of a baby's life they "have not seen differences between adoptive and biological pairs in behaviour of mother and baby" (1990,21). However they state that for adoptive mothers, a self-consciousness exists concerning their role. According to Frank and Rowe (1990) adoptive mothers incorrectly gauge the ease with which biological parents face "normal problems like colic", and they perceive that they should know what to do, and would know if they were the biological mother (1990,21). Frank and Rowe (1990) further argue that for adoptive mothers there may be "anxiety in the midst of satisfaction" after the arrival of a child (1990,25). Of interest are the results of a study by Bernstein, Mattox and Kellner (1988) who found that after a successful pregnancy, previously infertile women gained higher depression scores than never infertile women. While these authors believe that the effects of infertility treatment would probably not result in long-term emotion effects, nor indicate serious dysfunction, they suggest it still may interfere with a new mother's quality of life.

Possibly shedding light on the situation for adoptive parents, Levy-Shiff, Bar and Har-Even (1990) found that prospective adoptive couples' strong sense of impending rich fulfilment may reduce their sense of the differences and unique stresses associated with adoptive parenthood. Equally so, for adoptive mothers the possibility of experiencing the universal stresses of motherhood or the more specific new motherhood depressive conditions, appears far removed.

### **Social Support in New Motherhood**

It has been found that the support of close family and friends, offering encouragement and guidance during stressful times can be most beneficial (Scott 1988, Boyce 1988, Brown and Harris 1978, O'Hara, Rehm and Campbell 1982 ). However motherhood within marriage, until recently, has been considered a joyful and therefore not a stressful life event. Rejecting this notion, Phillips (1985) asserts that in this industrialised society it is a myth that motherhood will be a stressfree event, and that new mothers will receive steadfast, reliable support from family and friends. She further states, as do others, that social support for new mothers is diminishing, with the reality revealing transitory relationships, busy and sometimes critical friends and remote family (Miles 1988, Hopkins, Marcus and Campbell 1987, Boulton 1983, Dix 1986). Supporting this notion, Wearing, Rudland, Koenig and Noble-Spruell (1990) believe that legitimacy of support for women is undermined by the ideology of motherhood concerning women's capacity and desire to endlessly nurture. They revealed that the ideology of motherhood appears to dictate from whom support can be received, with one's own mother an acceptable and legitimate source of support. However asking a male partner, a member of the paid workforce, to give household and childcare support was not legitimate. They concluded that the ideology of motherhood impacted on the long term health interests of women. According to Rosenberg and others, adoptive parents, although undertaking the parenting role, may not be "afforded the same kinds of cultural goods and supports" which are "typically available to biological parents" (Rosenberg 1992, 51, Kirk 1964, Grotevant and McRoy 1990:173).

## Conditions of the Postpartum

Current interest in the literature of maternal distress and depression is, according to some, a revival of interest in a condition which was recognised and described, yet not necessarily fully understood, by Hippocrates almost 2000 years ago (Phillips 1985, Paffenbarger 1982, Welburn 1980). In 1858 Louis Victor Marce' made considerable contribution to the recognition and diagnosis of Postpartum disorders. However in 1926 a well recognised psychiatrist, Strecker, suggested that there was no evidence of the existence of maternal depression or psychosis, and subsequently, the previously used terms and categories were removed from official classificatory texts (Paffenbarger 1982, Hamilton 1982, Eden 1989, Dix 1986). Recently there has been a great renewal of interest in maternal depression and a proliferation of literature. Yet maternal distress and depression still appears shrouded in myths, mystique and misconceptions (Badinter 1980, Dix 1986, Corob 1987, Phillips 1985). In addition to this, whilst maternal distress appears to be disruptive, unexpected and most disconcerting for new mothers, women suffering still appear misinformed, fearful, guilt ridden and silent (Badinter 1980, Gruen 1990, Handford 1985, Oakley 1979, Wearing 1984).

In the past postpartum disorders have been diagnosed from one extreme, that of a figment of the neurotic mothers' imagination, to the other, a type of post delivery schizophrenia (Paffenbarger 1982, Phillips 1985, Summers 1975). However in recent literature they are most often viewed in three categories. These categories are: Baby Blues, also referred to as Maternity Blues; Postpartum Psychosis, also termed Puerperal Psychosis; and lastly, Postpartum Depression, referred to also as Postnatal Depression. They are most often viewed as three mutually exclusive categories, although the boundaries between them seem unclear, and many symptoms appear shared (Cutrona 1983 Dennerstein 1988, Gruen 1990, O'Hara 1987). While Stern and Kruckman (1983) comment that perhaps it may be a conceptual mistake to consider the blues, psychosis, and depression postpartum as connected entities, many others believe Postpartum disorders exist on a continuum from the mild Baby Blues to the severe Postpartum Psychosis, with Postnatal Depression situated on the continuum midway between these two conditions (Arizmendi and Affonso 1984, Boyce 1988, Cabot 1991, Dix 1986, Hopkins, Marcus and Campbell 1984).

### Baby Blues

Baby Blues is considered to be a mild tearful, emotional irritability and appears common and transitory. Its onset is in the period of 3-10 days after birth. Often lasting only 24-48 hours it is considered trivial by some, with no long term deleterious effects (Stein 1982, Pitt 1968). Said to be a result of physical stresses and tenderness, and great changes to progesterone and/or oestrogen, prolactin and cortisol levels after birth, it is also said that most often a women's body responds quickly to restore hormonal equilibrium (Dalton 1971, Halbreich and Endicott, 1981).

There appears to be varying opinions on both prevalence and severity of Baby Blues. The incidence of the Blues is said by some to range from 35% to 85% of all new mothers (O'Hara, Zebroski, Phillips and Wright 1990, O'Hara 1995, Troutman and Cutrona 1990) while others report a range of 1%-80% (Atkinson and Rickel 1983). This is explained by differences in definitional, methodological, and diagnostic criteria (Atkinson and Rickel 1983, O'Hara 1987). Baby Blues is often characterised by episodes of crying. Other symptoms include fatigue, anxiety, headaches, insomnia, hostility to partner, loss of appetite and perhaps confusion over the absence of the expected warm rush of feelings towards the baby (Pitt 1968, Stein 1982). This last, often distressing factor has been revealed in several studies (Oakley 1981b, Robson and Kumar 1982, Stein 1982). In a detailed study of 119 first time mothers Robson and Kumar (1982) found 40% of new mothers described a lack of affection towards their baby after the birth. These unexpected feelings may contribute to a state of anxiety in the first days after the baby's arrival (Oakley 1981, Handford 1985).

Baby Blues has been reported in several different cultures and therefore it is unlikely that it is culture bound (Stein 1982, Puckering 1989). Parity, whether a woman is a primipara (a first time mother) or a multipara, does not appear to be significant, although, inexplicably many of the studies in this area have excluded "women who have had a previous child" (Brown, Lumley, Small Astbury 1994,265). No association has been found between demographic factors, such as age or socio-economic status and the Blues, although not all agree (Stein 1982, O'Hara 1987). Some state that the label Baby or Maternity Blues may fail to capture the lability of mood, ranging from feelings of great sadness and confusion to great elation and excitement (Dix 1986, O'Hara 1987). Whilst many consider Baby Blues a transitory, benign syndrome (Cabot 1991, Pitt 1968, Stein 1982) others

believe it may be a precursor to a more severe and disabling condition (Arizmendi and Affonso 1984, Boyce 1988, Cox 1986, Victoroff 1952). It appears difficult to determine if the Blues plays a causal role or merely shares common causal factors with other postpartum conditions.

### **Postpartum Psychosis**

The most serious of the postpartum conditions discussed in the literature, Postpartum Psychosis is considered to be a severe, often disabling mental illness placing mother and/or baby at risk, and frequently requiring hospitalisation of the mother (Cabot 1991, Cutrona 1983, Gruen 1990). The onset of Postpartum Psychosis is sometimes quite sudden, and it is mostly confined to the first few weeks after the arrival of the baby. Relatively rare, the prevalence rates of the condition are considered to range from 1 to 3 per 1000 births (Cox 1986, Hopkins, Marcus and Campbell 1984, Troutman and Cutrona 1990). Postpartum Psychosis is said to be a result of similar influences to those attributed to Baby Blues, with a strong link presented in the literature to hormonal disequilibrium immediately after birth (Hamilton 1982, Tetlow 1955, Phillips 1985). It is interesting to note that according to Kraus and Redman (1986) and other researchers, neither of the above Postpartum conditions appear to surface during a time when hormonal imbalances are most evident, that is immediately after birth and up to 72 hours post birth (Brockington, Winokur and Dean 1982, Hamilton 1982, Kraus and Redman 1986). However it is considered by some that a type of delayed reaction or shock, or a link to lactation onset, are possible explanations of this phenomenon (Dix 1986, Hamilton 1982).

Whilst some consider Postpartum Psychosis to be a unique state, (Brockington, Winokur and Dean 1982, Hamilton 1982, Pitt 1968) others believe it need not be considered different from other psychoses occurring at other life stages (Barnett 1989). However Paffenbarger (1982) states it occurs at significantly higher rates in women in the first month after the baby's arrival, than at any other time in the life span. Findings of a study of medical records over an 18 year period revealed that in the immediate 30 days postpartum, psychosis was four times more likely to occur (Paffenbarger 1982). Paffenbarger, however, pondered if some physiological, psychological, or societal protective defence mechanism against mental illness, present before and even during pregnancy, is suddenly absent after delivery.

Some symptoms of the condition include sadness, anxiety, depression, anger, loss of reality, an inability to adequately care for the baby, lability of moods, confusion, insomnia, disorganised speech and thinking, and suicidal thoughts (Boyce 1988, Brockington, Winokur, and Dean 1982, Dennerstein 1988, Melges 1968). There appears to be an excellent prognosis for the condition. Those particularly at risk appear to be first time mothers, with subsequent pregnancies often heralding further relapses (Barnett 1989, Brockington, Winokur, and Dean 1982).

Postpartum Psychosis, as with Baby Blues, does not appear to be culture bound. Interestingly, one study in Cincinnati revealed Negro women suffering at nearly twice the rate of white women (Paffenbarger 1982) while another study in Britain revealed that foreign born women have relatively more puerperal breakdowns, than psychiatric illnesses at any other time (Brockington, Winokur and Dean 1982). These studies may indicate a need to consider other than biological influences such as life stress, relocation distress, lack of previously available supports and loss. Postpartum Psychosis is not related to socio-economic status, urban or rural residence, age, or marital status. It has been suggested that there may be a hereditary predisposition factor, but evidence seems inconclusive (Brockington, Winokur, and Dean 1982, Paffenbarger 1982, O'Hara 1987). Postpartum Psychosis appears to be uncommon, serious, and in need of further research (Brockington, Winokur, and Dean 1982).

### **Postnatal Depression**

Postnatal Depression appears to be a condition more disabling than the Blues, yet less dangerous and dramatic than Postpartum Psychosis (Cox 1986, Cabot 1991). However some state there are still clear ramifications for the safety and wellbeing of the mother and the infant (Hopkins, Marcus and Campbell 1984, Searle 1987). Said to appear between the 20-40 day postpartum, its onset often seems somewhat slow and insidious (Dix 1986). Most studies report an incidence ranging from 7%-20% (Cutrona 1984, Dalton 1971, Puckering 1989), although more recent studies report an incidence ranging from 12-40%, a figure significantly higher than previously considered (Brown, Lumley, Small and Astbury 1994, Price 1988, O'Hara 1995). Again, discrepancy over differing prevalence rates may be explained by the lack of uniformity of research and diagnostic criteria (Nicholson 1986, O'Hara 1987, 1995). As with Postpartum Psychosis, some

believe Postnatal Depression differs greatly from depression experienced by women at other life stages (Pitt 1968), while others do not (Hopkins, Marcus and Campbell 1984, Searle 1987). Characteristics of Postnatal Depression include fatigue, loss of interest, sadness, guilt, resentment, difficulty concentrating, exhaustion, exaggerated fears concerning the baby or self, hostility towards a partner or the baby, some obsessive behaviour, and often tearful despondency (Barnett 1989, O'Hara 1987).

The most common explanation of Postnatal Depression is that, as with the other postpartum disorders, an imbalance of hormones affects women's thoughts, feelings, and behaviours, placing them at risk of depression (Dalton 1971, Dix 1986, Dennerstein, Varnavides and Burrows 1986). Negative environmental and social factors may then compound the situation, triggering an episode of Postnatal Depression. Some suggest this condition frequently occurs at a time when the supports initially secured after birth are withdrawn, that is, the partner returns to work or the visiting new grandmother returns to her home (Atkinson and Rickel 1984, Dix 1986, Dennerstein 1988, Searle 1987). Dennerstein (1988) and Scott (1988) appear to consider that the hormonal factor alone can trigger Postnatal depression due to the fact that often no other discernible cause for depression seems apparent in some mothers' lives. However in complete contrast to Dennerstein (1988) and Scott (1988), Nott, Franklin, Armitage and Gelder (1976) found no relationship between hormonal levels and postpartum disorders. Further, O'Hara (1995) states there is little evidence that levels of progesterone, prolactin, or cortisol had "any relation to the risk for postnatal depression, or (the) blues" (1995,183) and others believe it is important for health workers to be open to the possibility of men (La Coursiere 1972, Atkinson and Rickel 1984, Quadagno, Dixon, Denny and Buck 1986) and even adoptive mothers (Melges 1968, Van Putten and La Wall 1981) developing psychiatric problems after the arrival of a baby.

It does appear that Postnatal Depression can be extremely persistent. Whilst Handford (1985), and Pitt (1968) state this condition may last up to one year after the arrival of the baby, others report it may last up to 15 months (Boyce 1988), or may continue for up to three (3) or four (4) years (Phillips 1985, Dennerstein, Varnavides and Burrows 1986). Additionally, onset in some cases appears delayed, with Dix (1986) citing a case of Postnatal Depression with onset 8-10 months after birth. However she argues this does not mean the hormonal explanation can be dismissed.

In recent literature the very existence of the condition known as Postnatal Depression has been questioned. Troutman and Cutrona (1990) found no evidence of a postnatal clinical depression in a study of adolescent mothers, and non child bearing adolescents. This is contrary to the findings of Dennerstein (1988) who states women become depressed postpartum at twice the rate expected in women of the same age. Supporting the findings of Troutman and Cutrona (1990), is a study by O'Hara, Zekoski, Phillips and Wright (1990) of 380 childbearing and non childbearing women, where no evidence of increased clinical depression in the postpartum period was found.

However, as they recognise, the frequently long duration of Postnatal Depression is one intriguing factor which stimulates the interest of researchers. Therefore the recruitment of mothers who were merely not bearing a child at the time of the study, as a control group for this study of depression in childbearing women, may result in the emergence of data from each group not being dissimilar. Also the frequent contact between the researchers, the control group and the sample in this study (the control group was made up of acquaintances nominated by the sample group) may have resulted in an unreliable prevalence rate. This point is acknowledged by O'Hara and his associates (1990). What was found in this study was an absence of clinical depression in need of particular medical intervention, however there was nevertheless evidence of some maternal distress, believed to be a result of changes, for which new mothers were ill prepared (O'Hara, Zekoski, Phillips and Wright 1990).

It has been suggested by critics of the physiological explanation, that maternal distress and depression is more socially acceptable if viewed as a medically treatable condition. This allows the sick label to be applied, and suitable medication to be prescribed. However Phillips (1985) states hormones cannot explain a condition which can last for years. Others agree, also stating the application of the sick label ignores the impossible workload, the loss of uninterrupted sleep, and the overwhelming responsibility of motherhood. The sick label, they state is inappropriate and even detrimental to mothers (Arizmendi and Affonso 1984, Corob 1987, Cox 1986, Miles 1988, Nicholson 1986, Oakley 1984).

Interestingly, some writers argue that anti-depressants, frequently prescribed for Postnatal Depression are often ineffective in their treatment of this condition (Affonso, Lovett, Paul and Sheptak 1990, Oakley 1981,

Kumar 1982). This is attributed to the theory that Postnatal Depression is actually an anxiety or anger based syndrome, rather than the assumed sad or depression-based state (Affonso, Lovett, Paul and Sheptak 1990, Quadagno, Dixon, Denney and Buck 1986). Others have likened the condition to a type of battle fatigue (Victoroff 1952, Phillips 1985).

Early detection of Postnatal Depression is considered most important (Scott 1988, Cabot 1991, Searle 1987, Eden 1989). If left undetected and undiagnosed, it is considered that it may result in disruptive and dysfunctional behaviours. Some serious repercussions may include alcohol and drug abuse, marital breakdown, a disrupted mother-child relationship and disruptive child behaviour, and child abuse (Cox 1986, O'Hara 1987, Puckering 1989, Searle 1987). Some state maternal depression has been found to have had adverse effects on the behavioural, intellectual, and emotional development of children (Holden, Sagovsky, and Cox 1989).

Many and varied explanations for the distressful disruption to the transition to motherhood have been suggested. Some believe the many stresses inherent in major life transitions and life events may hold a clue to understanding maternal depression (Corob 1987, Kraus and Redman 1986, Miles 1988, O'Hara 1995, Paykel, Emms, Fletcher, and Rassaby 1980, Sugarman 1986). What has also been implicated is the mother's appraisal of her life situation, and some researchers believe a new mother with a negative view of the self, the world and the future, and a global, stable and internal style of attribution may be at high risk (Abramson, Seligman and Teasdale 1978, Beck, Rush, Shaw, and Emery 1979, Boyce 1988, Cutrona 1983). Others state that a mother's realistic evaluation of her needs, and the demands taxing her resources, is crucial to her confidence, self esteem and mental health (Brodzinsky and Schechter 1990, Brown and Harris 1978, Cox 1986, Coyne, Aldwin and Lazarus 1981, Rowe 1983, Tetlow 1955).

An unsatisfactory relationship with a new mother's own mother has been implicated by several researchers, as has a lack of adequate nurturing in her own childhood, or a personal or family history of mental illness (Freden 1982, Holden, Sagovsky, and Cox 1989, O'Hara, Zekoski, Phillips and Wright 1990). Other suggestions are that the quality and quantity of social support is of major importance, (Cutrona 1984, Paykel, Emms, Fletcher, and Rassaby 1980) as is the quality of the marital relationship (Arizmendi and

Affonso 1984, Brown and Harris 1978, Gruen 1990, Levitt, Weber, and Clark 1986, Miles 1988, Scott 1988, Puckering 1989) and the availability of a close confidante (Brown and Harris 1978).

Another factor may be the shocked realisation of the many losses that can be associated with new motherhood, particularly perceived long term or irreversible losses. These include loss of independence and freedom, loss of intimate and exclusive relationship with partner, loss of employment status, loss of a valued role (employment) and the rewards of that role, loss of identity, and loss of the full potential of self or at least, a perception that aspirations are now more distant. Added to this may be the overwhelming realisation of the huge, adult responsibility of the new role, the magnitude of the whole task, and the thoughts that life will never be the same (Brown and Harris 1978, Freiden 1963, Handford 1985, Gove 1972, Krass and Redman 1986, Melges 1968, Mercer 1975, Nicholson 1986, Oakley 1974, 1979, Phillips 1985, Summers 1975).

Also implicated by some are the extremely high expectations held by some mothers, the sudden recognition of the huge gap between the mythology of motherhood and the reality, and the overall socialisation of women (Freidan 1963, Handford 1985, Summers 1975, Freden 1982). It has been suggested that the glorification of motherhood, particularly the contemporary media portrayal of motherhood, may contribute to the internalisation of unrealistic ideals and expectations, in turn fostering and reinforcing feelings of inadequacy and guilt. New mothers may also feel misunderstood, discontented, and alone. What may contribute to these feelings, according to some, is an almost "conspiracy of silence" surrounding motherhood, this perpetuated by mothers themselves (Badinter 1980, Boyce 1988, Corob 1987, Dix 1986, Miles 1988, Phillips 1985, Summers 1975, Wearing 1984, Oakley 1974).

Many men may also be misled by their own socialisation and by media propaganda, to believe that all new mothers feel confident, competent, and filled with maternal knowledge, and serenity. Therefore they may fail to provide the necessary support, and may even trivialise non-coping mothers' feelings, or criticise or condemn new mothers, thus contributing to their guilt and anxieties (Phillips 1985, Dix 1986, Boyce 1988, Kraus and Redman 1986). It has been stated that it does not necessarily follow that because a mother feels guilt and self condemnation, that mental illness or depression will follow (Phillips 1986). However Victoroff (1952) states

confusion and anxiety could follow such feelings, and these may easily escalate if undetected.

Some researchers further believe it is the great changes in family functioning, as the baby is integrated into the family, that could be a large factor in maternal depression (Kraus and Redman 1986, Hopkins, Marcus and Campbell 1984). Atkinson and Rickel (1984) agree, stating family interaction may be the key to unlocking the mysteries of Postnatal Depression. They further state that the introduction of a child is an acute and disruptive event in parents' lives, and that the greater the disruption, the greater is the likelihood of disordered behaviour. Cabot (1991) states postnatal depression is just as likely to occur in women who have spent years desperately wanting a baby, as it is in those women whose lives have been interrupted by an unwanted pregnancy.

Many other factors have been considered relevant. Some state an older mother may have difficulties (Dix 1986, Kumar 1982, Handford 1985), while others state a younger mother is at higher risk, (O'Hara, Neunaber, and Zekoski 1984), thus evidence supporting age as a risk factor seems inconclusive. Another clue may be the difficulties experienced as a result of women not having had the opportunity in their pre baby years to acquire the necessary skills of parenting (Atkinson and Rickel 1984, Oakley 1979, O'Hara 1990, Phillips 1985, Starr, Taylor, Taft 1970). Also indicated has been the baby's temperament, the "goodness of fit" between mother and baby, whether the baby cries a lot, or, whether it is a sickly, or a non sleeping baby (Boyce 1988, Clarke-Stewart, Friedman, and Koch 1986, Dalton 1971, Krass and Redman 1986, Levitt, Weber and Clark 1986, O'Hara, Rehm and Campbell 1982, Searle 1987, Thomas and Chess 1977).

Some research has suggested women with a history of subfertility (Kumar 1982, Dix 1986), women experiencing Dysmenorrhoea in the previous two (2) years (Pitt 1968), or women with a history of pre-menstrual tension are at risk (Dennerstein 1988, Phillips 1985, Dix 1986, Melges 1968). Others have suggested Postnatal Depression may be the result of the accumulative effect of a mild depression after several babies (Nicholson 1985, Searle 1987). Still other researchers state depression during pregnancy may be an indicator of postnatal depression (Affonso, Lovett, Paul and Sheptak 1990, Kumar 1982), as may delivery stress, delivery style, or overuse of obstetric technology (Barnett 1989, Paffenbarger 1982,

Oakley 1980, Robson and Kumar 1982). O'Hara, Rehm, and Campbell (1982) agree that women are at risk of depression during pregnancy, and that this may be a postpartum risk factor. However they also reveal an inverse relationship between delivery stress and postpartum depression, this being contrary to their research hypothesis. Other variables indicated are mothers having major responsibility of caring for baby and other pre school children, and the stress of daily tasks and daily hassles (Cutrona 1983, Coyne, Aldwin and Lazarus 1981, Brodzinsky and Schechter 1990, Brown and Harris 1978).

Miles (1988) argues that the unrecognised occupational stress inherent in the homemaker role is an important contributing factor to maternal distress. Others agree stating social isolation is also a major contributing factor, encouraging feelings of confusing alienation, as perhaps evident from the use of such coined terms as "problem with no name", "suburban neurosis", and "homemaker syndrome" (Oakley 1974, Phillips 1985, Freidan 1963, Summers 1975, Rothman 1989, Welburn 1980). Mothers particularly at risk may be those with a previously very busy, well organised lifestyle (Margison 1982). Many also suggest the lack of paid employment outside the home is a vital clue to postpartum distress and depression (Rowe 1982, Phillips 1985, Rossi 1972, Dix 1986, Oakley 1981, Brown and Harris 1978, Rowe 1983, Summers 1985, Quadagno, Dixon, Denny and Buck 1986, Corob 1987, Wearing 1984, Nicholson 1983).

Some researchers consider socio-economic status may be a factor. Wearing (1984) believes that middle class women may have more options available to them, and Brown and Harris (1978) appear to agree, commenting that lower class women may be at greater risk of depression. However others disagree claiming that middle class women may too wholeheartedly embrace the mythology of motherhood, and thus quickly become disillusioned, confused, and distressed (Summers 1975, Mercer 1975). Boulton (1983) found few differences between classes. In her study of 50 mothers, approximately 44% of working class mothers and 60% of middle class mothers did not find looking after children enjoyable, and in fact found it a predominantly irritating experience. Still others believe postnatal depression has no respect for social class, thus overall, evidence supporting a social class factor placing mothers at risk of depression appears at best, inconclusive (Cox 1986, O'Hara 1987, Fredan 1982). Interestingly Brown and Harris (1978) state their research reveals that borderline depression may not place lower class women at greater risk,

with the majority of those in their study with borderline depression and with no other recognisable provoking factor, being middle class.

Thus the literature would seem to indicate a lack of agreement over exactly which factors do contribute to stress, distress, and depression in new mothers, despite the overwhelming abundance of literature on the subject. In addition to this Phillips (1985) states that while depression does appear to affect more women in the postpartum period, the hormonal factor is not sufficient in itself to explain this, and that social and psychosocial factors could contain more convincing explanations.

### **Theoretical Explanations of Postnatal Depression**

Offering additional insight into the condition Postnatal Depression are many theoretical explanations, a selection of which are further examined here.

A **functionalist** approach assumes deviant and abnormal behaviours are better understood as pathological, and therefore individuals can, after treatment, resume their normal functioning. Such perspectives include those of Psychodynamic and Ethological theorists. An **Ethological** approach stresses the natural love between mothers and their offspring. Early studies of female animals and their young led to the discovery of imprinting, a baby animal's instinctual preference, established during a sensitive period, for a particular stimulus. Early studies also led to the recognition of a fixed-action pattern of instinctual caregiving behaviour. Human attachment, a theory developed from these Ethological discoveries, was considered to be "a much more complex and malleable phenomenon than imprinting or fixed action patterns" (McAdams 1994,221). Nevertheless "many psychologists believe that human attachment is an instinctually grounded behavioural system of profound evolutionary significance" ( McAdams1994,221, Bowlby 1969).

**Psychoanalytic** theorists also believe motherhood is natural, and is naturally rewarding and unproblematic; a normal function of mature women's femininity. Dissatisfaction and difficulties in mothering is seen as evidence of psychological ill health. They believe motivation to care for a baby arises from a mother's instinctual love for that baby, and mothering will be intrinsically rewarding as a result. According to Boulton "this would then imply that if the experience is not rewarding, the mother has not

established an adequate bond, that is, she does not love her child" (Boulton 1983:10).

Early negative childhood experiences are considered important in understanding depression from a Psychodynamic perspective. Freud theorised that depression was a pathological reaction to a loss, and that ambivalence between the ego and the lost love leads to difficulties of reconciliation or resolution of the loss (Corob 1987). Criticism of these approaches pinpoints a lack of consideration to concurrent events in the environmental and social world of the mother and a lack of consideration for the mother's subjective experiences (Corob 1987, Howe 1987).

**Behaviourists** believe that the loss of positive reinforcement previously available in a person's life, may hold the key to depression. The Behaviourist approach also states that learned helplessness is a contributing factor, this being the result of lack of control over the circumstances which are inhibiting the normal lifestyle. The Behaviourist approach is problem focussed, task centred, and usually time limited (Howe 1987) and provides both an explanation of behaviour and a method of intervention. Whilst a Behaviourist approach differs from both a Psychodynamic and an Ethological perspective, with emphasis on both learning and present maladaptive learning and reinforcement, all share the view that the individual is the focus of intervention.

**System Theorists** recognise that there are many different parts of a whole, all of which are interrelated and interdependent. The major premises of Systems Theory are (1) that an individual is comprised of interacting components or sub systems such as the cognitive, affective, and the physiological, and (2) an individual is an interacting, interconnected component of larger social systems such as families, workplace, and the community (Okun 1982). Therefore any growth, breakdown, or change affecting one part, will affect the performance of the other parts. This theory would therefore support those suggesting an interactional view of Postpartum Depression (Kraus and Redman 1986, Atkinson and Rickel 1984). Criticism of this approach is that it may encourage the seeking out, and repairing of the malfunctioning part to restore balance, thereby assuming that return to former balance is the most desirable state. In addition to this, Systems Theory may offer a description but not provide an explanation, nor an effective model for intervention (Compton and Galway 1979). Neither does it recognise the hierarchy of systems nor the internal

or external power influences often affecting systems (Okun 1982, Howe 1987).

An appraisal of depression from a **Humanist perspective** seeks to understand the process by which problems are identified, maintained, and most importantly experienced by those who are depressed. The subjective experience is necessary to understand individual suffering according to the Rogerian Humanist approach, and it is most important to share the client's reality. The major assumption of this approach is that talking about feelings to an empathic, non-judgemental professional will enable people to take a more positive view of themselves, and regain the confidence to take control over their own lives (Howe 1987, Phillips 1986).

Although not a well known theory, **Epstein's Self theory** has similarities to the Humanist approaches above, while also sharing aspects of the Cognitive, Behavioural and Symbolic Interactionist theories. Epstein (1973) states the self is developed out of social interaction and is essential for positive functioning. Maintaining a positive self concept he states, involves the interpretation of events, and the emotions elicited as a result of those interpretations. What is most important he believes, is to realise that individuals all have implicit self theories. These contain knowledge which influences the acquisition of new knowledge, interprets events, and subsequently impacts on the self and the construction or destruction of self esteem. Epstein (1973) further states if the self, ever anxious to continue self maintenance and gain fulfilment while avoiding disapproval, is for whatever reason, unsuccessful in this quest, distress will occur.

In the above theories the subjective reality is highlighted. However the societal and structural barriers and forces impinging on and influencing functioning have not necessarily been considered. Such considerations are implicit, to a lesser or greater degree in the next group of theories to be considered.

Implicit in an **Anthropological perspective** is the view that social institutions are of paramount importance in shaping women's behaviour, and their health. Social anthropologists hold that the desire and capacity to care for children are largely culturally created, and therefore society engenders in women the desire and capacity to mother. Medical anthropologists would posit that health and disease are not only related to biological factors but also to cultural resources, and the social organisation governing them (Boulton 1983). Further, according to Stern and Kruckman

(1983) an anthropological perspective would argue that theories of postnatal depression based strictly within biological boundaries have resulted in a treatment bias towards pharmacological intervention, when much greater attention should be given to the impact of cultural patterning on the postpartum period. Stern and Kruckman (1983) believe that a relationship exists between the supportive strategies typically employed by the culture in the postpartum period (which serve to mobilise social support for new mothers), and postpartum mental health. They further propose that negative outcomes of the postpartum period can be attributed to the lack of social structuring of postpartum events, lack of social recognition of the role transition, and lack of adequate support for the mother. Whilst O'Hara (1995) points to a lack of research which investigates the social structuring of the postpartum period and the related risks of depression for women, one such study was undertaken with a large group of Chinese (Taiwanese) and Australian women by Chu in 1993. She found that while as a rule a Chinese woman could expect and receive care and attention from her family after becoming a mother, this was not the case for an Australian woman who was "floundering alone to adjust to her new role as mother, and to cope with the new demands made on her". She also found that

"while the incidence of postnatal depression was rarely found among the Chinese sample, it was reported by a significant number of Australian women in the sample" (Chu 1993,125).

It has been argued that in the past **Sociological** studies examining the mothering role often made the presupposition that enjoyment was a fundamental feature of the mother-child relationship, thus neglecting to explore more negative feelings (Boulton 1983). In 1978 Brown and Harris undertook research into depression, involving the participation of 500 women, with the results highlighting the impact of positive and negative life events on the lives of women. They confirmed that women appear more likely to be depressed than men, while others suggest that women may constitute two thirds of the depressed patients seen by psychiatrists (Hale 1983, Summers 1975, Oakley 1981b). Brown and Harris isolated four major contributing factors which were loss of a parent before 11 years old, women at home caring full time for three or more children under 14, the lack of a close confidante, and the lack of paid employment outside the home. A major provoking factor according to Brown and Harris (1978) is the experience of loss or disappointment, including loss of a role, major material loss, loss of idea, loss of employment, or loss of, or threatened loss

of a significant person in their lives. The perception that these may be long term losses was viewed as most important. Lower class women were considered to be most at risk.

Other considerations suggested by Brown and Harris were the restrictive nature of the motherhood role and the realisation of the frustrating nature of constant child care and housework. It also appears significant that when women have no paid work outside the home and when division of labour in the home is within traditional conservative guidelines, women have much higher levels of depression (Brown and Harris 1978, Oakley 1974, Corob 1987).

Whilst this study highlighted many important issues for women, Brown and Harris (1978) have been criticised for their lack of a feminist perspective, and for use of the occupation of a participant's husband or father as an indicator of women's social status and thus life chances. This, critics state, assumes that a family is a single unit of equivalent status, that it has social homogeneity even when women are not in paid employment (Delphy 1981, Roberts 1981, Oakley 1981b). Boulton (1983) states that while the experiences of working class and middle class mothers may differ in important ways, a women's relationship to the social structures is different to a man's, and that classification of social class using a husband's income may not highlight the restrictions and inequalities which all mothers are subjected to by virtue of their gender.

**Role theory** may offer further understanding from a sociological perspective. What appears central to understanding maternal depression from a role theory perspective is that community sentiments are influenced by a set of cultural standards of behaviour for any person or position, as determined by social norms and social structures. The mothering role is a strong western society icon; a well recognised both ascribed and achieved role with clear behaviour boundaries. When role conflict becomes visible in the behaviours of new (natal) mothers, the application of a temporary, alternate role, the sick role, allows for a time-limited exemption for new mothers from their obligations and responsibilities. However the obligations and conformity inherent in the patient role, to passively accept expert knowledge in order to "get well" may exacerbate rather than alleviate the situation for some mothers. Criticism of Role theory is that on its own it is insufficient to explain particular behaviours and that other theoretical

explanations are required alongside it (Brown 1991,75, Payne 1991, Davis 1986).

**Cognitive theorists** believe it is the internalised, socially prescribed beliefs, and expectations which play a major role in the vulnerability of an individual to depression. They focus on the personality, and on appraisal and attribution, and undertake to review the belief systems of those suffering distress and depression. In particular the effect of the cognitive appraisals on the emotions and behaviours are most important. Depression from a cognitive perspective stems from irrational thinking. Intervention seeks to modify unreal expectations, to shift the emphasis from personal failure, and to help women recognise the cultural, social, and societal forces in operation (Brodzinsky and Schechter 1990, Gruen 1990, Cutrona 1983, Cox 1986, Okun 1982).

**Feminist theorists** posit that the patriarchal construction of the society suppresses and oppresses women. They state that women are struggling within an unnatural situation and that the basic assumption that the nuclear family in its present form is an ideal to which all women should aspire, is narrow and inappropriate (Hale 1983, Freidan 1963, Summers 1975, Phillips 1985). Hale (1983) states that the modern nuclear family in the western world is a deviation from historical family groups. Hale (1983) claims that it isolates women, it denies them their social needs and their need for greater sharing of the child rearing, and it dictates an impossible role.

According to Gove (1972) there are at least three plausible reasons for high rates of mental illness in women. One is that they are biologically more susceptible, while another is that women are more susceptible to the appearance of mental illness, since it is perhaps more acceptable for women to discuss their psychological distress. The third possibility is that there is something about the role women occupy which is difficult and which promotes mental illness. This role may be perpetuated through the socialisation of women in this society. Through the socialisation process women acquire set roles and patterns of behaviour, and also a somewhat restrictive sex stereotypical code of conduct (Summers 1975, Wearing 1984). This process may also contribute to the underdevelopment of a positive self image for women. Consequently for some women the sudden realisation of the vast discrepancy between the ideallic, romantic myth of motherhood, reinforced through socialisation and by the mass media, and

the lonely, low status, restrictive, extremely tiring, little praised reality, can be most distressing (Nice 1988, Phillips 1985, Freidan 1963). Those who wholly embrace the maternal bliss mythology may experience the most distress, guilt, and anxiety (Mercer 1975, Nicholson 1983, Nicholson 1986).

Freidan (1963) spoke of the feminine mystique, a powerful social prescription of motherhood so thoroughly internalised that failure to meet their own unreal expectations and those of the society, may mean women experience feelings of deep personal failure. Phillips (1985) states that while mothers anxiously strive to maintain the facade of selfless perfection, large cracks in their self esteem and confidence can appear in a remarkably short time, placing mother, baby and their relationship at risk. Rich agrees, asking

"what woman in the solitary confinement of life at home enclosed with young children and in conflict weighing in her own mind the dogma that says she is mother first, last and always, has not dreamt of just letting go - relinquishing her sanity?" (Rich 1976,285).

For many women aspiring to the myths of motherhood, which give no clue to the realities, the arrival of their new baby may herald unexpected, unwelcome and confusing maternal stress, distress, and depression (Corob 1987, Searle 1987, Mercer 1975, Dawkins 1976, Rich 1976, Badinter 1980).

Solomon's (1976) **Empowerment theory** focuses on the many internal and external direct and indirect power blocks influencing the lives of people in this society at primary, secondary and tertiary levels. External blocks can limit access to a range of individual choices, particularly those cherished by the society such as economic power and personal achievement, resulting in loss of self determination for some individuals (Solomon 1976). This model of powerlessness was first used to describe the inequalities faced by American black communities, in order to highlight their powerlessness and to recognise the need for specific, empowering intervention strategies. However the model has been extended to include other powerless groups in this society, such as women, and in particular mothers with new babies. What needs to be realised is that the societal restrictions placed on mothers' lives make a major contribution to their distress and devalued identity. Mothers are most often viewed as unproductive, rather than powerless, devalued, unpaid, hard working members of the society (Oakley 1984, Wearing 1984, Corob 1987).

**Structuralist** theorists view capitalist societies as problematic, due to unequal power, and the means of production being in the hands of a small group - the ruling class (Howe 1987). Labour, necessary for the acquisition of wealth, is produced by the working class who receive only a portion of the value of their labour. The subjugated conditions of the working class are not recognised as the unequal order of things but taken as the natural order of things. Hale (1983) states "the power of the ruling class is both complete and secure when those whom it exploits, accept the right and desirability of this by a sense of differential ability or deservingness" (Hale 1983:170). Individuals are thus conditioned to believe they are personally responsible for the state of their lives because all people are responsible for their feelings and behaviours. The psychology of capitalism extends to suggest that "it would be highly dangerous to suggest that the personal inadequacies of the poor, the deviant, or the difficult were the product of their downtrodden economic or social experience" (Howe 1987,143). According to Marxist thought, revolution is the only answer for liberation, and some state it may also be the only answer for achieving radical changes to the oppressive reality of mothers' lives in this capitalist society (Wearing 1984, Summers 1975). Engels (1971) states the oppression of women has an economic base and an economic solution, and that the overthrow of capitalist production will create a new concept of gender. However others state that even a revolution may still leave women's oppression intact (Segal 1987).

As discussed earlier, of **Postmodernism** Richardson writes that the core of postmodernism is the doubt that any method or theory, discourse, genre or tradition has a universal and general claim as the 'right' or the privileged form of authoritative knowledge" (1994,517).

She continues that a particular form of postmodernist thought is **Poststructuralism**, which links language, subjectivity, social organisation and power, and recognises that language does not "reflect social reality", it "creates social reality" (Richardson 1994,518).

Bainbridge (1994) writes that different cultures have different structures of social organisation and different ways of dealing with life's stresses at individual and at social levels. He continues that the binary categories of sanity and madness "can only be interpreted in relation to the complexities of that culture, its signs and symbols" (1994,7). In western society, once classification is completed, application of the madness label often means

treatment within psychiatric institutions (Bainbridge 1994). Davies and Harré (1991/92) observe that a sane person is one that can accept responsibility for what they say and do, and whose actions can consistently be accounted for within the moral and social order. They consider that the law courts and psychiatric clinics are institutions in which those who do not produce acceptable accounts of their actions, are taught to do so, and those who are resistant or unable are disqualified from participation and removed from the social world. In Foucault's terms, after the Renaissance psychiatric hospitals had "nothing to do with any medical concept", but with power (Foucault 1967,40). They were not concerned with turning mad people into sane people but with maintaining power and the social order (Appignanesi, Garratt, Sardar and Curry 1995, Bainbridge 1994, Foucault 1967).

As stated above, in their study Brown and Harris (1978) isolated four major contributing factors to depression for married women (loss of a parent before 11 years old, women at home caring full time for three or more children under 14, the lack of a close confidante, and the lack of paid employment outside the home). Brown and Harris (1978) further found that a major provoking factor to women's distress and depression as mothers was the experience of losses or disappointments, particularly if their perception was that these may be long term losses. Yet confusingly women experiencing distress continue to be bombarded with a startling array of "highly addictive tranquillising drugs" and treated with ECT to help them maintain their role (Bainbridge 1994,12, White 1996). Rundle (1994/95) believes that the 1960's and the 1970's heralded an assault on the medical and physiological models of mental illness, and moves toward deinstitutionalisation. However Rundle believes a parallel process existed where Valium and other "mothers little helpers" became standard treatment for neuroses, depression and anxiety in public hospitals and GP clinics (Rundle 1994/95,19, Harpwood 1981). A return in the 1980's to the placement of depression "decisively in the biological basket" heralded the acceptance of new miracle drugs such as Prozac to assist individuals to "stay afloat in postmodern everyday life" (Rundle 1994/95,20,24).

A Poststructuralist perspective of postpartum conditions would imply that medicine, and in particular psychiatry, reinforces the prominent discourses surrounding the socially constructed role of good (bad and mad) mother. It rejects the contradictory demands and nature of the role, and it labels as deviants those who struggle to resist their positioning (regulation) within the

discourse or those who fail to fulfil its demands and responsibilities. Labelling a mother's distress as a clinical problem reflects a rejection of any explanation of reasonable reaction to the stresses of the mothering role, and illustrates the power of such discourses to medicalise any deviation from the constructed role of mother. Such a clinical diagnosis serves to reinforce the interests of patriarchal capitalism (Bainbridge 1994, Matthews 1984, Davies and Harre 1991/92, Walkerdine 1986, White 1996).

In summary, several of the above theories stress a pathological response to a natural role where that role has become increasingly difficult. Many argue that much of the personal distress affecting women's states of mind and health can be considered in terms other than those of a physiological nature, and that maternal distress and depression could be better understood in terms of the crippling effects of current cultural and social discourses concerning the mothering role in this society.

### **Postpartum Depression - A Mother Only Syndrome**

From the review above it could be stated that there is an overwhelming plethora of theories, approaches, and explanations concerning personal, societal, physiological, environmental, and political influences to consider when struggling to understand maternal depression. One factor remains steadfast: maternal depression is exclusively a new mother syndrome, or is it? While Nicholson (1986) states depression following childbirth is exclusive to women, some would disagree. La Coursiere (1972) found evidence which indicates that health workers need to be open to the possibility of men developing postpartum psychiatric problems. He stated that this is not to be confused with the Couvade Syndrome, the birthing pains some men have reported experiencing. La Coursiere (1972) further states that men may be totally unprepared for postpartum problems, believing such conditions to be exclusive to new mothers. They may be caught unaware and be totally overwhelmed. Van Putten and La Wall (1981) agree, documenting a case study of a father welcoming a much wanted child and subsequently developing Postpartum Psychosis. Atkinson and Rickel (1984) also document evidence of distress in new fathers, which they attribute to the father viewing the new baby in a less positive light than they anticipated. Further, Quadagno, Dixon, Denny and Buck (1986), in a study of 21 couples found that the postpartum period is an emotionally unique and often distressing time for women and for some men

whose lives have been dramatically changed after the arrival of a baby. However their studies indicate that the men were found overall to be less lonely, sad, irritable, depressed, angry, discouraged, miserable, and tearful than women, and also more energetic and confident. This, Quadagno, Dixon, Denny and Buck (1986) suggest may be due to the fact that men often have time-limited contact with the new baby, and are much more likely to return to paid employment.

### **Sleep Deprivation**

Some would say that sleep deprivation is an inherent problem of new motherhood (Phillips 1985, Oakley 1979, Cox 1986, Dix 1986). It is of interest to consider that according to Janis (1971) individuals suffering from sleep deprivation often show a marked loss of mental efficiency, display poor judgement, and may become so anxious, and disorganised in their thinking, that they are temporarily "in a psychotic state" (Janis 1971,26). He further states research indicates that when people obtain only half their usual night sleep, they develop symptoms of tension, anxiety, irritability and they have difficulty concentrating. According to Janis (1971), students undergoing examinations, or the elderly suffering pain, may be deprived of sleep, and may therefore suffer such symptoms, as may those suffering a traumatic event, or other emotional stress. Similarly Errante (1985) writes that findings on the effect of sleep deprivation on the personality have been striking, with the prevailing mood of the sleep-deprived individual being one of depression and apathy, while irritability and aggression were also common. As the deprivation period increases, individuals become confused and occasionally experience hallucinations. Presenting a slightly different perspective, Shapiro and Flanigan (1993) postulate that if sleep has a restorative function, it is understandable why patients who do not sleep normally - for example those with insomnia, those with medical disorders which disrupt sleep, or those who take drugs to alter sleep patterns, may be more likely to suffer psychiatric illnesses than those whose sleep is not disturbed. Yet Errante writes that

"in light of the fact that the manifestations of postpartum psychogenic disorders and sleep deprivation are very similar, the relevance of sleep disturbances to postpartum emotional adjustment is of interest" Errante 1985,13).

Errante (1985) goes on to suggest that profound sleep disturbance in pregnancy, and the sudden drop in hormones after the birth may provide an explanation, although she also suggests that anxiety over role changes could be implicated and that future research is needed. Supporting this notion, Dix (1987) considers it is curious that no major study has been undertaken on the effect of sleep deprivation and broken sleep cycles on new mothers, when it is such an intrinsic characteristic of new motherhood.

### **The Hormonal Factor**

Scott (1988) suggests that an ecological perspective of Postnatal Depression may be illustrated as a number of concentric circles consisting of the central core, the biological factor, being circled by layers of intrapersonal, interpersonal, social and cultural influences. Such a model could suggest that the hormonal factor may be the primary central factor.

However it has been indicated in the literature that any evidence of the role of the hormonal factor remains inconclusive (Beck 1993, Corob 1987, Eden 1989, George 1987, Quadagno, Dixon, Denny and Buck 1986, Phillips 1985, O'Hara 1987,1995 ). Moreover, some have argued more strongly than merely saying that the evidence is inconclusive. Krass and Redman (1986) believe that the assumed cause of Postpartum Depression is hormonal changes, which in turn, affect the psychological state of new mothers. Yet this view, they claim, may encourage premature closure of investigations, and encourage the exclusion of relevant social and environmental factors. In addition to this they question the hormonal factor, stating hormonal levels peak and fall within 72 hours of birth, yet Postpartum Depression usually surfaces several weeks or even months after childbirth. Supporting this, Quadagno, Dixon, Denny and Buck (1986) suggest the postpartum period begins after birth and ends approximately 6 weeks later when the reproductive tract has returned to normal. Kraus and Redman (1986) assert that physiological changes, even if present, are unlikely to lead to depression. Further, a study by Nott, Franklin, Armitage and Gelder (1976) found no relationship between hormonal levels and postpartum disorders in the early postpartum period. Many others propose that the hormonal argument maintains the myth of a personal, internal imbalance, when the clue can be found in social, cultural, environmental, and even political factors (Oakley 1980, Phillips 1985). Cabot (1991) does not agree, believing that to attribute the high incidence of depression in

women to environmental and psychosocial issues may deny the role hormones do play. However, in a very recent study O'Hara states that evidence for a hormonal aetiology for postnatal depression is quite weak, and that

"our study did little to alter that impression in the literature .... there was little evidence that levels of progesterone, prolactin, or cortisol had any relation to the risk for postnatal depression, or blues for that matter" (1995,183).

### **Adoption and Postpartum Depression**

Oakley (1980) states it has long been a part of medical mythology that hormonal change is the cause of postpartum depression. Nicholson (1986) also recognises such myths, stating there is a need to question the assumption that the concept of postpartum depression is inviolable, and that it is a product of hormonal imbalance. Some appear even more definite, particularly Victoroff (1952) who suggests it is dubious if conception is even necessary in view of the fact that three patients in his research of 100 case histories of "para partum" depression were adoptive mothers. These mothers appeared to develop full blown psychosis after having adopted a baby. Tetlow (1955) also undertook a study of psychosis associated with childbirth and discovered six adoptive mothers suffering symptoms not unlike women he was studying, this condition having occurred within weeks of the adoption taking place. Similarly, research undertaken by Melges (1968) looked at the onset of mental illness several weeks after the arrival of a baby. He found it coincided with the withdrawal of supports which had been available immediately after birth. He also comments on the conflict experienced when the mother has to face the commitment and responsibility which in advance had not been perceived so demanding as in the reality. He stated that since three patients had very similar symptoms after having adopted and not given birth, that

"conflict over the mothering role can precipitate a confusional state, even in the absence of any postpartum physiological changes" (Melges 1968:107).

Van Putten and La Wall (1981) also draw attention to adoptive mothers suffering depression and psychosis post adoption.

Importantly, Handford (1985) states it is her opinion after 12 years involvement with a professional non-medical self help program in

Vancouver that new mothers, both adoptive and biological, experience postnatal depression. She states as a result of being involved in the program, a general profile of a mother at risk of Postnatal Depression has been developed. This mother, according to Handford (1985), is 28 years old, is in a stable relationship, has had approximately 2 years post secondary education, has a planned baby, and a middle class lifestyle, and she expected to experience a trouble free transition to motherhood. She further states that while the possibility of a physiological phenomenon is acknowledged, her own professional experiences lead her to question this.

However whilst hormonal changes of birth may not be central to postnatal depression, suggestions have been made by some of a link between premenstrual mood changes, and maternal anxiety and depression (Dennerstein, Varnavides and Burrows 1986, Dalton 1971, Melges 1968). According to Dalton (1971) premenstrual hormonal changes are not dissimilar to the hormonal changes at the time of giving birth, although they may be much less extreme. Others agree stating endocrine changes occurring after delivery can be similar to those occurring premenstrually (Carroll and Steiner 1978, Halbreich and Endicott 1981, Pitt 1968, Melges 1968). Melges (1968) found that 50% of mothers in his study into postpartum psychiatric syndromes gave a history of premenstrual syndrome. This study included three adoptive mothers although Melges does not clarify if these mothers were represented in the 50% who gave a history of pre-menstrual syndrome. However this figure may merely reflect the overall percentage of all women who suffer premenstrual syndrome to varying degrees (Cabot 1991). Of interest, Davidson (1972) found no link between mild or severe postnatal blues and previous menstrual difficulties, and O'Hara (1980) failed to find any association between menstrual difficulties and postnatal depression.

While there appears little if any conclusive evidence to affirm the assumption that a hormonal imbalance following birth is the central factor placing women at risk of postnatal depression, it is acknowledged that there may be some hormonal factors which are shared by both biological and adoptive mothers.

### **Adoption, Depression, and Social Class**

An assumption that adoptive parents are predominantly although not exclusively middle class is supported in the literature (Grotevant and McRoy 1990, Harper 1992a). It has been suggested that adoptive parents of older, handicapped, "racially mixed" or previously fostered children, were in the past, of lower economic status than other adoptive parents, although this situation may have changed (Kadushin 1970, Kellmer-Pringle 1967,15, Rothman 1989). Contributing to the middle class status of adoptive parents may be the benefit of many working but childless years in which to build financial stability (Brodzinsky and Schechter 1990, Lewis and Kornitzer (cited in Humphrey 1969), Humphrey and Humphrey 1993).

There appears to be inconclusive evidence concerning the association between social class and maternal distress and depression, and indeed, many challenges have been mounted concerning the validity and accuracy of assigning of social status classifications to women (O'Hara 1987, Oakley 1974, Boulton 1983, Cox 1986). Oakley (1974) argues that to assume a mother enjoys a middle class lifestyle, may be to assume that unpaid dependent women at home enjoy the same status that they previously enjoyed, or that their husbands presently enjoy. This, she states, cannot be assumed. Furthermore, Boulton (1983) argues that the absence of marked differences between the responses of working and middle class mothers in her study suggests the obligations inherent in the mothering role, and the almost exclusive responsibility for children, largely overrides class differences and becomes the main influence on women's experience as mothers. Mapp reveals it has been reported by at least one British psychiatrist that "women from a six bedroom house as much as homeless women are among those in need of treatment" for postnatal depression (Mapp 1994,19).

This issue of social class may be one important factor influencing the belief that middle class adoptive families should live happily ever after, and that adoptive mothers will have an unproblematic transition to the mothering role. While not attempting to minimise the difficulties for disadvantaged mothers, an assumption of an unproblematic transition to motherhood for adoptive mothers may be as erroneous as such an assumption for other groups of mothers, for example younger or older mothers, or first time mothers. This assumption is not supported in recent literature (Boulton 1983, Handford 1985).

## Measurement of Postpartum Depression

Some of the major difficulties associated with agreement over the detection, labelling, diagnosis, and intervention procedures concerning maternal depression appear to be related to diagnostic criteria, and the degree of confidence in, and reliability of measures (O'Hara 1987, Arizmendi and Affonso 1984). Affonso, Lovett, Paul and Sheptak (1990) believe that the difficulties which occur are in part due to the unquantifiable nature of qualitative data, together with vastly differing measures used, resulting in false positives. They further state that depression will be over diagnosed if clinicians fail to carefully interview women, or if they use only self reports. The Edinburgh Postnatal Depression Scale, developed by Cox (1986) is one recommended scale which has most often been found useful in the provision of health services and in research (Eden 1989, Barnett 1989, Scott 1986, Harris, Huckle, Thomas and Johns 1989, O'Hara 1995). Criticism of this scale includes that of Affonso, Lovett, Paul and Sheptak (1990) who question the accuracy of a scale which cannot measure the intensity of the depression.

Another scale frequently used in the past to measure Postnatal Depression is the Beck Depression Inventory, which has been criticised for its potential to confound depression and perinatal symptoms, thus resulting in false positives (Affonso, Lovett, Paul and Sheptak 1990). The Pitt Atypical Depression Scale (Pitt 1968) which was used by Nicholson (1986) who consequently questioned the ability of any measure to accurately detect mother's depression. Another scale which has been administered to new mothers is Goldberg's Standardised Psychiatric Interview, used by Holden, Sagovsky and Cox (1989) in conjunction with the Edinburgh Postnatal Depression Scale.

To measure symptoms more rigorously in a study of 202 first time mothers, Affonso, Lovett, Paul and Sheptak (1990) selected a scale used extensively in the United States of America, namely the Schedule for Affective Disorders and Schizophrenia (SADS). This they stated, enabled them to detect and distinguish depression without contamination of normal childbearing and postpartum complaints.

However some would question the appropriateness of the pursuit of more rigorous, totally objective measures to establish or corroborate evidence of Postnatal Depression. Lumley (1990) states she is left most concerned about the importance, implications and meaning of those symptoms which

end up being regarded as mere characteristics of the child bearing years. This, she states, does little to help understand the problem of maternal depression, nor does it validate the reality of mothers' experiences. Such a position according to Brown, Lumley, Small and Astbury, of persistently seeking objective data means that

"women are seen as unreliable informants who do not know what has happened to them and who cannot and should not be believed without corroborating evidence from a superior source" (1994,3).

Supporting this Nicholson (1986) asks how much do objective measures, without accompanying qualitative data, contribute to knowledge concerning the nature and experience of depression, and further she argues, as do others, that objective measures may deny the individuality of experiences (Nicholson 1986, Royse 1991). Nicholson (1986) asserts that the eternal quest for objective data, and the associated popular positions, amplify women's oppression in motherhood.

In the research reported in this thesis the Edinburgh Postnatal Depression Scale was not included necessarily to diagnose postnatal depression in the study sample. It was used as an adjunct, to broaden the range of data secured, and to deepen current knowledge on the mothering experiences of this different group of mothers.

### **Adoption - Similar or Different**

It appears that there is an underlying assumption that because adoption is a most desirable solution for childless couples, that adoptive parenting will be unproblematic. This is, of course, with the exception of adoption related issues and transitions, such as the telling, and the adolescent identity-questioning years. Such a position may have been complicated by the cultivated professional and legislative stance that encouraged adoptive parents to believe that there were few differences once the adoption had been made, and that they should go home and raise the child as if the child was born to them.

Kirk (1964) states adoptive parents are not necessarily free from anxieties merely because they willingly undertake adoption. To the contrary, he states adoptive parents face a number of role handicaps and role strains. In addition to this, Kirk (1964) states that while some adoptive mothers may believe the arrival of their baby allows them to finally experience long

awaited motherhood, and heralds the resolution of all past differences and difficulties, he believes the opposite may be true.

Kirk (1964) believes adoption is very different from bearing one's own child and argues that these differences must be admitted, although Kirk does not appear to discuss the inherent similarities in the parenting role. Others state that, socially, adoptive parents are a minority group who have to face many emotional obstacles and losses, such as facing the lack of control over, and the loss of their own fertility, and therefore loss of their "own dream child" (Silverstein and Kaplan 1990), the fact that their child may be illegitimate, and the reality that there is a lack of ancestral ties and a lack of common family characteristics between themselves and their child (Benet 1976, Iwanek 1990).

Some researchers have argued strongly that acceptance of these losses plays a vital part in adoption adjustment (Small 1987, Silverstein & Kaplan 1990). However Miall (1987) argues, as do Seglow, Pringle and Wedge (1972) that any problems experienced by adoptive parents may be more a consequence of the social values of a society that greatly values fertility, than a problem of psychological adjustment to infertility. Other issues for adoptive mothers include the disempowering and intrusive nature of the whole adoption process, the stigma associated with adoptive parenthood, the lack of role models for adoptive parents, and new mothers questioning their own mothering abilities and anxiously worrying over such issues such as the irrevocable damage caused by the absence of breast feeding or immediate bonding (Silverstein and Kaplan 1990, Smith and Sherwen 1988).

Further concerns may revolve around the explanation of adoption, and the inquisitive questioning by the child for more information concerning their genealogical past when little information is available (Hartman and Laird 1990, Triseliotis 1973, Kirk 1964).

It appears evident that professionals in the past have preached both that there are many differences and these must be clearly understood (prior to the adoption placement), and confusingly, that there are minimal differences (after an adoption placement) and the child must be raised "as if born to" you without any additional support. Others point to both differences and similarities. Humphreys (1969) states that while it is important that adoptive parents do not deceive themselves that their situation is now exactly the same as biological mothers, there is little evidence to suggest

that successful performance of the role of adoptive parent depends on determining and acknowledging the differences and peculiarities between adoptive parents and their biological counterparts. Brodzinsky (1990), and others agree stating the rejection of differences is not necessarily detrimental, and in the initial stages may serve the family well by supporting the primary socialisation goals of unity, connectedness and trust (Brodzinsky 1990, Small 1987, Smith and Sherwen 1988, Kaye 1990). Further, it may need to be considered that while issues unique to adoptive mothers do exist, these mothers could indeed encounter many of the joyful but also many of the distressing facets of new motherhood that most new mothers face in this society (Silverstein and Kaplan 1990). Yet the unclear and ambivalent role description, the lack of recognition of similarities in the mothering role, and no legitimised temporary exemption from the mothering responsibilities (the option of the sick role is not applicable to adoptive mothers since postnatal depression is restricted to birthing mothers), may point to the possibility of adoptive mothers facing unexpected difficulties.

All new mothers may experience feelings of loss, such as the loss of independence and the perceived loss of personal identity, the loss of career status and the rewards of a valued role, and the loss of the exclusive relationship with their partner, carefully cultivated during the childless years. These equally may affect adoptive mothers, particularly recent adoptive mothers, who have often experienced many married but childless years on the adoption waiting list in waiting for motherhood. The current trend, of many women delaying conception whilst establishing a workplace role, may provide a similarity of experience for adoptive and non adoptive mothers, of feeling the loss of a valued and developed workplace role, and additionally may place them in a common age category. These similarities commonly have not been present in previous years, with adoptive parents most often older than their biological counterparts (Brodzinsky 1990, Dix 1986, Handford 1985, Sorosky, Baran and Pannor 1984, Melges 1968). Further common experiences may include the pleasure and pride of presenting the new baby to their social world and seeking to establish the baby in the family group, and of taking up the role of nurturing, loving and protecting their new baby. However they may also include insufficient social support and isolation from their previous social and working worlds. Adoptive mothers may experience the loneliness common to many mothers of young children. This may be even more intense where women...

"wanted to avoid the limelight, the inevitable questions and the suspected criticism which adoption had brought in its train" (Goodacre 1966,90).

Further similarities may include the unrelenting demands of a new baby and an unfamiliar role, insufficient rest, interrupted sleep, the distressing daily hassles, the confusion of discrepancies between the fairytale of new motherhood and the reality, and the need to appear to be a perfect mother. As a consequence of some or all of the above, may be the emergence of feelings of incompetence and guilt (Brodzinsky 1990, Melges 1968).

For adoptive mothers there may be many shared similarities concerning new motherhood and ongoing lifelong shared mothering experiences. There also may be many differences. The need for informed support and preparation for the mothering role and the calamities all mothers are prone to experience, may be little acknowledged in adoption practice.

## **Conclusion**

It appears evident that there is an overwhelming abundance of literature on the topic of distress and depression in the postpartum period, and an enormous number of factors to be considered. What seems apparent is the lack of conclusive evidence supporting any one theory, perspective, belief or assumption concerning distress in new motherhood, particularly the hormonal/physiological theories. This point often remains conveniently unexplained.

Overall this review placing adoptive mothers within a mothering context, highlights the exclusion of adoptive mothers from much of the postnatal and mothering literature (a small number of exceptions to this exclusion include Dix 1986, Copeland-Lewis 1990, Handford 1985, La Coursiere 1972, and Melges 1968 who do make mention of adoptive mothers), and indeed from most of the literature and research concerned with mothering, and theoretical explanations of motherhood. This absence may highlight a biological determinism philosophy inherent in much of the mothering and postnatal depression literature, this literature subsequently only paying lip service to the development of an understanding of the social, environmental, cultural, psychological and political influences which impact on the experience of the mothering role.

In the adoption literature the exclusion of adoptive mothers seems equally apparent, concerning the actual lived mothering experiences of adoptive

mothers across the lifecycle after the adoption of a baby or infant. What does exist, as has been identified throughout Chapters Two, Three, and Four of Deconstruction, is a vast selection of literature on adoption. This literature includes the impact of adoption on adoptees' mental health, difficulties and breakdown in adoptive families, adopted persons and their physical and intellectual development comparative to non-adopted individuals, how to raise adopted children, outcomes for older adopted children, similarities and differences with adoption, adopted persons' search for identity and searching for families of origin, reunion, open and closed adoption, the experiences of birth parents, infertility and adoption, cross-cultural adoption, and customary traditional adoption. However there seem few international studies, and fewer, if any, Australian studies documenting the early and the later mothering experiences of adoptive mothers as they negotiate lifelong adoptive motherhood.

Deconstruction, Part Two of this thesis presentation, incorporated an examination of historical, international, and Australian developments in adoption, and included a research and a theoretical overview. It also introduced a different, broader perspective on adoption by illuminating the mothering role taken up by adoptive mothers. The aims of the qualitative study reported in this thesis included an undertaking to explore the experiences of adoptive mothers, to identify some of the differences unique to adoption and adoptive mothering across the adoption lifecycle, to explore and highlight any shared and similar experiences for all mothers mothering children, and to provide empirically grounded knowledge which would contribute to the provision of more effective adoption practice. The research aims of this research are documented in greater detail, and the methods fully described, in Part Three.

## PART III

### FRAMING THE RESEARCH

#### (Methodology)

#### **Introduction**

Part Three, Framing the Research, consists of Chapters Six and Seven which incorporate Denzin's research steps (2) "Framing the Research Question", (3) "Capture", and (4) "Bracketing". According to Denzin (1989,48) the phase in the analysis process labelled "framing the research question" includes the conceptualisation of the phenomenon to be studied and the formulation of the methodology, in order to ask *how* the phenomenon is experienced.

Denzin speaks of phase three "Capturing" the phenomenon (data collection), as locating the subject matter within the natural world. Capture includes obtaining multiple instances of biographical experiences, locating the crises and epiphanies (life events which leave indelible marks) in the lives of person's being studied, and obtaining multiple personal self-stories from participants concerning the topic under investigation. It also deals with what the researcher is doing with the phenomenon in the present, in his or her study (Denzin 1989). During the "Bracketing" phase of the interpretive process, preconceptions identified Deconstruction (the literature review) remain suspended, in order for data analysis to occur unimpeded.

Denzin (1989) describes step (2) "Framing the Research Question" as also including the researcher locating their personal history within the research process and this personal history is presented in Chapter Seven.

## CHAPTER SIX

### FRAMING THE RESEARCH QUESTION: METHODS

#### **Introduction**

In this study qualitative and feminist research methods were used to conduct research which documented the mothering experiences of adoptive mothers. This included exploring adoptive mother's experiences during the waiting period, in the initial post adoption period and in the first years of motherhood. It also included exploring the later years and the reality for adoptive mothers of the availability to their child/ren of identifying information about their families of origin.

#### **Rationale: Qualitative and Quantitative Methods**

"The case depends not only upon the utility of qualitative methods, but also on a critique of more conventional approaches" (Finch 1991,195).

In previous decades it has been argued that the social world can be studied using the same methodological perspective and techniques as traditionally have been used to study the natural world. This methodology is known as the **positivist** approach to social research (Lupton, Short, Whip 1992). However it now has been recognised that there are vast differences between the natural and social worlds, and that vastly different research approaches are necessary to conduct research concerning the social world. An alternate methodology is an **interpretive** approach to social research, concerned with the interactions of individuals and with meanings.

McCracken (1988) claims one of the most striking differences between these approaches is the goals of the research. The goal of the positivist methodological perspective, utilising **quantitative** methods, is "to isolate and define categories as precisely as possible before the research is undertaken", while the interpretive, **qualitative** goal is often "to isolate and define categories during the process of research" (McCracken 1988,16). Lupton, Short, and Whip (1992) suggest that the labels "quantitative" and "qualitative" derive from the extent to which the research data can be and is turned into a set of numbers, is described in statistical terms, and is

interpreted in terms of statistical probability (1992,41). An equally important distinction is that qualitative research normally looks for "patterns of interrelationship between many categories" as distinct from a quantitative "sharply delineated relationship between a limited set of them" (McCracken 1988,16). McCracken points out that this particular difference can be considered to be the "trade off between the precision of quantitative methods and the complexity-capturing ability of qualitative ones" (1988,16).

Lupton, Short and Whip (1992) offer further understanding of the distinctive features of the positivist and interpretive approaches. They suggests that a positivist researcher will be more concerned with a macro-analysis of the structure of society, making use of highly structured interviews and questionnaires, and producing quantitative data. In contrast, a researcher who holds an interpretive perspective will more likely be concerned with a micro-analysis of the interactions of individuals. Such a perspective places emphasis on using minimally-structured methods to produce qualitative data which documents the ways in which individuals give meaning to the situations in which they find themselves (Lupton, Short and Whip 1992).

Of significance also in differentiating between the two perspectives is that a positivist approach is most often associated with "theory testing", whilst a interpretive approach is usually associated with "theory building" (Lupton, Short and Whip 1992, 42). Paramount to the qualitative researcher, and to the authenticity and credibility of qualitative research is the construction of theory based on concepts and propositions which have emerged from the data (Strauss and Corbin 1990, Lupton, Short and Whip 1992). Lupton, Short and Whip (1992) suggest that these approaches exist as the two extremes of a continuum of methodological approaches, and that the researcher's position on this continuum can be clearly reflected in the focus of the research, and the choice of research methods.

Denzin (1989) speaks of a perspective he calls "interpretive interactionism", a means by which "the lived experience of ordinary people (is) directly available to the reader" (Denzin 1989,7). He states that the research methods of this approach include open-ended questions in interviewing, document analysis, life history, life story, personal experience and self story construction. Further he states interpretive interactionism attempts to encompass other methods. Grounded in early Symbolic Interactionism (Mead 1934), other central approaches utilised in interpretive interactionism include participant observation, ethnography, naturalistic

studies, creative interviewing, the case study method, critical turning-point experiences (epiphanies) and recent feminist critiques of positivism. He further writes that interpretation and understanding are the key features of social life to be captured. Denzin advocates for the interpretive approach, believing that:

"research of this order can produce meaningful descriptions and interpretations of social processes. It can offer explanation of how certain conditions came into existence and persist ..... it can furnish the basis for realistic proposals concerning the improvement or removal of certain events, or problems..... (and) may expose and reveal the assumptions that support competing definitions of a problem" (Denzin 1989,23).

Denzin also speaks of the crucial use of thick description, which:

"rescue(s) the meanings and experiences that have occurred in the field situation, ... captures the interpretations persons bring to the events that have been recorded ... attempts to uncover the means that inform and structure the subject's experiences .... takes the reader to the heart of the experience ... (and) assumes all meaning is symbolic and operates at the surface and the deep, and the micro and the macro levels" (Denzin 1989,32).

Denzin describes the process of interpretive interactionism as involving:

1. Deconstruction, a critical analysis and interpretation of previous literature and research,
2. Framing the research question, where the means and the methods by which the question "how the phenomenon is experienced" can be asked, and where personal biographies are made explicit,
3. Capture, where the researcher secures multiple naturalistic instances of the experiences being studied,
4. Bracketing, (reduction) where the researcher attempts to isolate the key features of the processes under examination,
5. Construction, where the researcher attempts to interpret the events fully,
6. Contextualisation, where the researcher relocates the phenomenon and the new constructions back in the world of lived experience (Denzin 1989,31).

Of major significance to qualitative, interpretive research, as stated by many researchers (Denzin 1989, Fonow and Cook 1990, Guba and Lincoln 1994, Marshall 1986, Reinharz 1992, Stanley and Wise 1983) is that such a position assumes that the researcher

"cannot stand apart from their subjects in the way that the natural scientists can and that it is important to take the role of researcher into account when conducting social research" (Lupton, Short and Whip 1992,39).

On this topic Richardson (1994) states that qualitative researchers

"don't have to try and play God, writing as disembodied, omniscient narrators claiming universal, atemporal general knowledge, they can eschew the questionable metanarrative of scientific objectivity and still have plenty to say as situated speakers" (1994,518).

### **Feminist, Qualitative Interpretive Methods**

In the 1970's feminists argued that "quantitative methods in general .... represent a distortion of women's experience" (Finch 1991,197, Harding 1987, Oakley 1974, 1981a, 1984, Jayarante 1983). It was widely considered among feminists that previous social study "was in fact white, male study of white male society" (Smith and Noble-Spruell 1986,135). Smith and Noble-Spruell 1986) continue that

"reviews of social science journals provide evidence that the majority of research focused on men and on issues of concern for them ..... studies of work did not include housework, and stratification studies were based on the status of the male member of the family..... Research had focused on the official, the public and the dramatic, ignoring the private, less visible informal systems" (1986,136).

Finch believes that in the past

"all social science knowledge has tended to have a built-in bias and consequently our very understanding of the social world comes through men's eyes. The argument for counteracting this amounts to much more than an exercise in which women are added in, but the overall picture is left essentially unchanged. It is important that the whole picture should be redrawn so that social knowledge, especially of a kind which could be influential in shaping social policies, and changing social institutions, should reflect the interests of women" (Finch 1991,199).

Feminist writers and researchers are critical of the over reliance on traditional scientific method as the most useful way to understand social reality. They consider that qualitative methods could reveal women's hidden experiences. It seems that modern feminist writers are not alone nor original in these thoughts, with John Mills, a 19th century British philosopher cited as having written of the need for women-centred research:

"It is a subject on which nothing can be known, so long as those who alone can really know, women themselves, have given but little testimony, and that little, mostly suborned" (Brown, Lumley, Small and Astbury 1994,1).

However qualitative methods, in the past, have been regarded with considerable suspicion, and have been dismissed as subjective and unrepresentative, and even held to be "sloppy research" yielding "soft data" (Klein 1983, Royse 1991, Sutherland 1986, 152,155, Walker 1985, Nicholson 1986, Griffin 1986).

Disregarding such suspicions, Nicholson (1986) suggests women-centred, qualitative research would present a picture of women as multi-dimensional individuals greatly varying in their psychological and social lives and experiences. From this position, a female perspective would be regarded as central to research, not as an additional or comparative viewpoint. Nicholson (1986) also believes a qualitative feminist based methodology would enable women to themselves define the nature of their experiences, and states that it seems self evident that qualitative methods are appropriate vehicles for much human inquiry. Concurring, Wilkinson (1986) defines feminist research as research based on the exploration of women's own knowledge and experience in a scholarly and rigorous way. She states that rather than using a methodology which illustrates a total lack of fit between theory and practice, it is vital to adopt a methodology which enables the acquisition of new understanding and insight into women's lives. Du Bois (1983) agrees that to address women's lives in their own terms is to create theory grounded in the actual experience and language of women. Most important is the call for a re-conceptualisation of research methods, and a realisation that qualitative feminist researchers need not emulate the positivist researcher by attempting to objectify data. Nor do they need to rigidly constrain themselves or the data within quantitative criteria for validity and truth. For in doing so they are rejecting the subjectivity of naive inquiry which "whilst prone to the errors of our

biases and prejudices, is involved, intuitive and alive" (Reason and Rowan 1981 xiii, Marshall 1986).

Wilkinson and others believe that some would still argue that to jettison the rigorous objectivity of quantitative methods, is to "disown them at our peril", (Wilkinson 1986,14, Guba and Lincoln 1994, Smith and Noble-Spruell 1986). Arguing against such a view Jones (1985) states interviewer bias need not be avoided, but used creatively, contingently and self consciously. Oakley (1981) concurs, stating that it needs to be recognised that "personal involvement is more than dangerous bias, it is the condition under which people come to know each other and to admit others into their lives" (Oakley 1981:58).

The above recommendations from some of the literature for a qualitative, interpretive, feminist methodology, however, does not necessarily imply that quantitative methods are to be totally and rigidly rejected. Rather it is to acknowledge that different techniques and methods need to be strategies employed separately, or in combination, for different research projects, this being dependent upon their suitability to the study, not their assumed superiority (Royse 1991, Mies 1983, Klein 1983, Rubin and Babbie 1989). Indeed, Jayarante (1983) advocates for the use of both qualitative and quantitative methods in the social sciences and she asserts that a combination of these methods have been used successfully by feminist researchers to promote feminist theory and to effectively meet their goals. In agreement, Sutherland writes that we should be prepared to "take, use, modify, reject or go beyond" any approach" and that "there is not and need never be *one only* style of feminist research" (Sutherland 1986,148).

### **Relevance of Feminist Qualitative Research to This Study**

Boulton (1983) and Oakley (1974, 1979, 1984) state that research is needed which looks at the very nature and quality of women's experiences as mothers, the way the role has been institutionalised, and the social conditions impinging on its rewarding performance. However Nicholson (1986) observes that the insensitivity of objective data and of the accompanying theoretical positions, amplifies women's oppression and makes invalid assumptions concerning women and motherhood. For these reasons, a qualitative, feminist, women-centred research methodology that attempted to enable women to define the nature of their

experiences of motherhood in their own terms, that afforded the greatest flexibility, and that used different strategies to elicit rich data without being constrained by contemporary assumptions, was considered most appropriate for this research (Oakley 1974,1981a).

Moreover it seemed imperative to undertake research where the research methodology upheld the dignity and worth of women and gave validation to their experiences. This principle is particularly appropriate to social work research and, indeed, is merely incorporating and reflecting the major values upon which social work is firmly grounded. (Rubin and Babbie 1989, Royse 1991, Compton and Galway 1979). In particular the Australian Association of Social Workers (AASW) Code of Ethics (1989) states "social workers engaged in research will be guided by the conventions of scholarly inquiry and will consider carefully its consequences for human beings" (1989,4).

Therefore it is considered that the methodology of this study, which incorporated the use of qualitative, feminist research methods, and which included the use of in-depth interviews and the verbal administration of several scales was highly appropriate for the aims of this research.

### **Aims of the Research**

The aims of this research were

- to explore, and gather rich and meaningful data concerning the previously little researched experiences of adoptive mothers during the process and the event of adoption, and at significant points across the adoption lifecycle.
- to examine a full range of the thoughts and feelings of new adoptive mothers, including the joys, and also including any stresses following the arrival of a new baby.
- to document adoptive mothers thoughts, feelings and opinions concerning the demands and expectations of adoptive mothering, and the demands and expectations inherent in the socially constructed mothering role in this society.
- to explore any assumptions in contemporary thinking concerning the experiences of new mothers.

- to document the feelings and emotions of adoptive mothers who have assumed the mothering identity for a lifetime, and have undertaken the mothering role for many years, and who have subsequently faced, or who may soon face, the dilemmas associated with the availability of identifying information, and the prospect of, or the experience of their children's search and reunion with their birth families.
- to identify the needs of adoptive mothers during significant times across the adoption lifecycle.
- to provide empirically grounded knowledge for informed adoption policy development, and to highlight the needs of adoptive mothers for improved adoption practice and improved service provision.
- to provide data which could highlight possible directions for future research.

## **The Sample**

### **The Unit of Analysis**

The unit of analysis for this study was adoptive mothers. The sample consisted of fifty women, nineteen who were mothering adopted babies and young children, and thirty one women with older adopted children who were nearing, or already at an age where they were able to receive, or indeed had received, identifying information concerning their origins.

Adoptive mothers are, by the very nature of their differences from and similarities to other mothers, a somewhat hidden group of women, and hence, access to such a sample was not without difficulty. In the recruitment of the adoptive mothers of young babies and infants, gaining access to the sample through avenues open to other researchers of new mothers, such as ante-natal clinics, women's hospitals or hospital records, were not available sources for this research. Additionally, adoptive mothers with older children, adopted under an earlier legislation where remaining hidden in the community was merely adhering to the policies of the time, were equally obscured. To anonymously "raise the child as if born to you" were the strict instructions given in previous decades and consequently adoptive mothers were indistinguishable from other mothers in the community.

Identifying information concerning adoptive mothers, as with information concerning all parties to adoption, is strictly confidential and only available to identified relevant persons. The only authorised adoption service in Queensland is that service provided by the Department of Families, Youth and Community Care (formally the Department of Family Services and Aboriginal and Islander Affairs, and also referred to in this thesis in brief as The Department) and permission to access identifying information was not a possibility. Therefore, the gathering of a random sample for this study was not an available option. However through various means outlined below, a non random sample of 50 women was secured.

Of the total number of adoptive mothers in this study ( $n=50$ ), seven women had adopted children from a cultural background different to their own. This represents 14% of the overall sample. Of these cross-cultural adoptions, five orders were made under Queensland legislation (10% of the overall sample). Of interest are the statistics for non-relative adoption orders made in Queensland in 1993-94, where 25% of the adoption orders were for overseas born children (Zabar and Angus 1995). Two women who had adopted cross-culturally, together with three others in the sample, adopted under the legislation of another country, or another Australian state, before relocating with their family to Queensland, this representing 10% of the sample.

All participants in this study adopted children between the years 1960-1994. All women except two adopted their children as babies under 12 months at the time of the adoption order. One infant was aged two and a half years at the time of the adoption order, and two children in a family of other adopted and biological children, were adopted after being fostered for many years. The vast majority of women in this study adopted under Queensland legislation (90%), all of the mothers in this study are adoptive mothers of non-relative children at least one of whom was a baby or infant at the time of the adoption order, and all are living permanently in urban or rural centres throughout Queensland.

### **Negotiating Entry**

Although bound by confidentiality, the Department of Families, Youth and Community Care (Adoption Section) was instrumental in securing a number of mothers with babies and infants who were willing to participate in the study.

Negotiations began in January 1993 with the Adoption Section in Brisbane. Initial written correspondence and telephone communication were directed to outlining my qualifications, my previous research, and my current research proposal. Continued communication and several visits to the Adoption Section in Brisbane throughout 1993 resulted in permission being granted in January 1994 for my Letter of Introduction concerning the research (Appendix I) accompanied by a letter from the Department (Appendix II), to be forwarded by the Adoption Section to a group of adoptive mothers.

I had proposed during the negotiations that introductory letters be forwarded to all those adoptive mothers who had adopted in the past three years. Due to the fact that it is not the policy of the Department to have further contact with adoptive parents after the adoption order is complete, they stated that only adoptive mothers who were also on the waiting list to adopt another child could be contacted. To this I agreed. However, it happened that some mothers who were not on the list to adopt again, did become participants in this research after receiving an introductory letter. In total approximately fifty letters were forwarded to recent adoptive mothers in Queensland. This method of recruitment proved quite successful, securing ten adoptive mothers of young babies and infants, residing in a number of locations in Queensland.

Additional participants were secured by means of descriptive material about the research being distributed by myself to several identified members of the Queensland adoptive parents community with whom I had previously become acquainted, and through local and wider-reaching print media. This included placing items in newsletters produced by an adoption group, and by adoptive parents groups in Brisbane and Toowoomba (Appendix III). It also included accessing the more formal print media, by means of a press release, forwarded to the editors of a Townsville and a Brisbane newspaper (see Appendix IV). This resulted in an item concerning the research appearing in the Townsville Bulletin. The local (North Queensland) media coverage was successful in securing fifteen women from around North Queensland. A number of participants were secured through accidental, or through snowball sampling, where participants or interested persons from regional and city centres shared information with acquaintances or with family members about the research, and together with the adoption newsletters and previous contacts, the remaining twenty five participants were secured from around Queensland.

All of the women who initially expressed their interest and availability during the sample recruitment phase were included in the final sample. A sample of fifty was considered most appropriate to meet the aims of the research, using the chosen feminist methodology.

One participant was ill on both occasions I visited her hometown and whilst remaining keen, she withdrew from the research. Several women contacted me after I had secured my sample of fifty, and after I had returned from completing the second round of interviews in southern locations. One of these women, an adoptive mother in North Queensland, was secured as a replacement participant. The replacement participant was selected because of geographical convenience, and because this participant was the mother of younger children, this group being underrepresented in the study. Those remaining interested women who had contacted me at the time when data collection was almost completed unfortunately could not be included in the sample. I did encourage these women to write to me and make comment on any chosen aspect of the adoption process or adoptive motherhood, therefore encouraging them to make a contribution to my understanding of the experiences of adoptive mothers, and to the research in a more informal way. Such resultant external contributions were few.

### **Method of Data Collection**

Two semi-structured tape recorded interviews were conducted with each participant wherever possible. Predominantly qualitative, descriptive data was generated using feminist research methods. To supplement this data, three standardised scales were introduced to participants, although, as explained below, the use of one was discontinued following early interviews.

Rubin and Babbie (1989) define a semi-structured interview as one in which the interviewer has a general plan but not a specific set of questions that must be asked in specific words in a particular order. Boulton (1983) describes a minimally structured interview as one which is a more fruitful means of obtaining information, and she argues that severe limitations inherent in traditional methods of research would not allow the gathering of rich data in a mother's own terms. Bearing these characteristics and limitations in mind, the interview schedule used in this study consisted primarily of a general plan of question areas (see Appendix V), designed to

obtain an in-depth account of these adoptive mothers' experiences of adoptive mothering. The development of the schedule had been, in part, directed by the findings of a previous smaller study undertaken by myself (Gair 1992).

Because this was essentially a theory building study, detailed attention was given to facilitating and maximising the range and depth of response by providing open ended questions. Discussion, for the mothers of young babies and infants, proceeded from this point to focus initially on topics related to the time prior to the arrival of the baby (for example infertility, the length of the waiting period, formal procedures, and any preparation undertaken), and then proceeded to centre around the early years following the baby's arrival.

For adoptive mothers of older children, discussion began at a similar point to that of the mothers of younger babies, before centring around topics concerning the later years of the adoption lifecycle. Such topics included recent legislative changes, the availability of identifying information about their child/ren's origins and birth parents, and how the possibility of, or the reality of a search and reunion, impacts on their lives, and their families. For some of these mothers of older children, the important times were the later years, and they quickly skimmed over my inquiries about the early years, to direct the focus of the interview onto the impact of recent legislative changes. Interestingly, at later points during these interviews, some older mothers would recall quite vividly the high and low emotional times of the early years, before returning to more recent years and their current concerns. This participant-led movement of the interviews from skimming over early issues, to focus on current issues, followed by revisits to early years, and then a return to present issues, created a sense of the present being very much embedded in the past. This pattern of movement between past and present was evident in many interviews with mothers of older children.

The areas for discussion for the mothers of older and younger children were not mutually exclusive areas of exploration, and often the interviews covered many experiences, thoughts and beliefs, and aspects of adoption across the adoption lifecycle. Where necessary minimal direction was given to generate discussion on issues identified on the interview schedule. Incorporated into the second interviews were the three standardised scales which introduced a more structured segment to the research methodology.

### **The Scales**

It has been considered that there are benefits inherent in securing data by other than purely qualitative means (Jayarante 1983, Mies 1983). Furthermore it has been recognised by some that introduction of research tools and strategies commonly used in more traditional, positivist research need not be in conflict necessarily with qualitative or feminist methods, and there may be "distinct advantages" in combining such an approach (Brown, Lumley, Small and Astbury 1994,16-17, Jayarante 1983, McCracken 1989). In this research the scales were not introduced to directly verify or validate data collected during the semi-structured interviews. Rather it was considered that the scales would extend and enrich the research data, and extract additional, different data. Therefore during the second interviews conducted with each participant, after a research relationship had been established, and in order to document the widest range of experiences and emotions and secure additional specific information, three standardised scales (see Appendices VI, VII, and VIII) were initially introduced (for adherence to Copyright see below). These scales were the Edinburgh Postnatal Depression Scale (EPDS, Cox, Holden and Sagovsky 1987, minimally adapted and only introduced to the mothers currently with babies and young children), the Social Readjustment Scale, often more commonly referred to as the Holmes and Rahe Life Event Scale (Holmes and Rahe 1967) and the Interview Schedule of Social Interaction (ISSI, Henderson, Byrne, and Duncan-Jones 1981). Subsequently, the use of the Interview Schedule of Social Interaction (ISSI) was abandoned (see section on pages 197-198). For those with whom second interviews could not be undertaken, the relevant scales were included in correspondence with participants. The decision to abandon the ISSI scale was made prior to material being forwarded to participants unable to attend second interviews, therefore the ISSI scale was not included in correspondence with them.

It was considered that data gathered as a result of the standardised scales would act primarily as complementary data, making contribution to an accurate picture of motherhood for these adoptive mothers.

### **The Location of the Interviews**

My role was primarily that of interviewer. After the initial contact, in which the main aims of the research were discussed, mutually suitable interview

times and locations were arranged. The interviews were conducted in eight different locations around Queensland, with participants residing in or near Brisbane, Toowoomba, Rockhampton, Townsville, Ingham, Tully and Cairns. Several of the participants were interviewed in small rural centres. These remain unnamed in order to preserve confidentiality. Travel was undertaken to most centres however several participants undertook to travel in order to participate in the research.

Interviews were conducted at venues and times most suitable to, and chosen by the participant. Options suggested by me as possible sites for the interviews included my home or my accommodation, an interview room at a university (permission to use office space at the University of Queensland, and the University of Southern Queensland was pre-arranged, and an office at James Cook University was available), their own home, or a more public setting. It was considered that such a range of interview location options would respect the needs of the participants. Most participants chose their own home, but some interviews were conducted by telephone (twice when no other arrangements could be made), at my accommodation when I was travelling away from home, at my home in Townsville, at the University of Queensland, at James Cook University, and in the coffee shop of a shopping mall. One interview was conducted in a Queensland country hospital with a women who was extremely keen to participate. Despite my protesting that I did not want to undertake the interview under such intrusive circumstances, this adoptive mother assertively insisted she be interviewed in hospital.

### **Interview Timetable**

The two interviews with participants were conducted between May and December 1994. Interviews lasted between three quarters of an hour and six hours, with an average interview of approximately two hours duration. It was initially envisaged that there would be a time lapse of 6-8 weeks between the first and second interviews. This was to allow the researcher to transcribe the interviews, to reflect on the research and interview process, and to detect some initial themes, key words, and issues to be further explored. This was also to allow time for the participants to reflect on the interview process, and consider any of their own recommendations for the research. Participants were encouraged to consider documenting, in whatever form they chose, any thoughts triggered by the interview process.

It was envisaged that this material could be introduced into the second interview. This process of encouraging participants to engage in introducing their own agenda into mine, began with my encouragement for them to introduce into the first interviews their thoughts on any related matter or their reasons for participating. However I considered that this additional encouragement provided further opportunity for participant-generated input. This was found to be particularly useful by at least two participants, one of whom forwarded to me five poems about her adoption experiences. She had written these poems over a period of years and the subject matter included the very recent arrival of her adopted daughter. Another women commented that "you said just jot it down so I did" and produced a list of eight items she wanted to discuss.

The second interview also provided an opportunity for participants to receive and comment on information about emerging findings from the first round of interviews. Interviews were spaced two to four months apart in most instances. With interviews at various sites around the state, the original time frame of six to eight weeks between first and second interviews proved somewhat difficult to manage. Some second interviews with some participants were outside the earlier time frame and a number of interviews could not be conducted for various reasons including clashes in available times between participants and myself, participant ill-health, vacations taken by participants and budget constraints. On two occasions the first and second interviews were conducted during the same appointment because a further appointment would not have been as convenient. In all, 86 personal interviews were conducted, two telephone interviews, and written material was forwarded to eleven participants, of whom one failed to reply, despite several follow-up letters. Sadly, one participant passed away during the time period shortly after the first interview. This older women had been very keen to participate, and interview data from the first interview has been included in the analysis. Data from the first interview with one participant who failed to respond to the second interview material has also been included.

#### Tape Recording of Interviews

Permission was sought from participants to record interviews, in order to allow for a greater degree of concentration and participation from the researcher during the interview, and for the necessary thorough, complete and in-depth analysis of the qualitative data. Several participants were

initially unsure about the use of the tape and were reassured, as were all participants, that the tapes were for transcribing only and would not be used for any other purpose. They were informed that taping could be curtailed if the participant preferred. Several interviews were not taped, or were partially taped, due to participants' requests that taping be discontinued, or edited, when they had inadvertently spoken more candidly than they had otherwise intended and felt uncomfortable as a result. Such requests occurred on five occasions. Several interviews were only partially taped due to minor technical difficulties. Handwritten notes were taken during all interviews.

### **Participant Rights and Confidentiality**

Participants were assured of confidentiality and the issue of confidentiality was one which remained foremost throughout the research. Sensitivity to the very personal nature of the information being requested and the historical context in which the participants' experiences of adoption lay (for most participants the policy of absolute secrecy had applied at the time of their adoption order), ensured ongoing respect for issues of confidentiality, and for maintaining privacy for the participants and their families.

A commitment to confidentiality was expressed in all initial material which described the proposed research, for example the press releases, and the letters forwarded by the Department to adoptive mothers. At the time of the first interview a verbal commitment was expressed concerning confidentiality, and this was further confirmed on the consent form/contract signed by myself and the participant at the time of the first interview (see Appendix IX). The signing of the contract at the time of the first interview was considered to signal my intention to adhere to the agreement conditions. Participants were assured that it was their inalienable right to refuse to discuss any issues or to withdraw from this study at any time should they so wish. Thus the participants had confirmation that they could negotiate and also renegotiate their own levels of participation (Cummerton 1986). Infrequently participants sought reassurance that small segments of the interview material would not be used, and this material has not been included in the thesis.

At all times the participant's welfare was considered, and in the event of any distress, I was committed to give whatever support was necessary to

reduce the distress. All of the above is in accordance with the Australian Association of Social Workers (AASW) Code of Ethics (1989,1994) which states that

"the social worker engaged in research will be guided by the conventions of scholarly inquiry ..... will ascertain that consent of participants in research is voluntary and informed, without any implied deprivation or penalty for refusal to participate and with due regard for participants' privacy and dignity .... (that) the social worker engaged in research has a responsibility to protect participants from unwarranted physical or mental discomfort, distress, harm, danger or deprivation", and that "identifying information obtained about participants in research will be treated as confidential" (AASW 1994,2).

During the interviews many of the participants became tearful, and many cried. For some this occurred when speaking of one, or of many miscarriages, of the pain of infertility, or of the death of a child. Many also became tearful or cried when recalling the day the Department rang to say the long awaited baby was available and when the baby was brought home to meet the family. Several adoptive mothers became upset when speaking of the legislative changes, their feared or actual distress attributed to these changes, and their emotions around the time of contact from a birth mother or birth family member. For others it was different and these events were "just life,..... you get on with it". My professional counselling skills were invaluable and enabled the comforting of those participants who became tearful or openly wept. Participants were assured that they need not proceed with the interviews, nor with any particular topic. The participants acknowledged this, however all wanted to proceed, appearing, in many instances, to either move quickly to another part of their story, or to have a need to tearfully continue to describe their experiences. There were no instances where it was considered that the participant was in a distressed state at the completion of the interviews.

### **Validity**

Oakley (1981) and others, consider that researchers undertaking qualitative research need not constrain the data with quantitative criteria for validity and truth. They further state that the validity of a measure can never really be proven, nor is there ever any one truth, but many (Rubin and Babbie 1989, Mies 1983, Marshall 1986, Reason and Rowan 1981). Marshall

(1986) argues that the traditional concept of validity needs to be recast to apply it productively to qualitative research. She further states we need to redevelop the idea of how true a piece of research is, to where validity becomes how well the data is used to enhance understanding and create further knowledge (Marshall 1986). Marshall and Rossman (1989) agree, also stating that an in-depth descriptive study, embedded in the data, cannot help but be valid.

However Eisner and Peshkin (1990) query whether, even if validity traditionally has been concerned with establishing and verifying truth and qualitative research concerned with understanding meanings and seeing the "sub text" as well as the "text", the concept of validity should be totally dismissed? They "think not" but rather suggest that what may be needed is a reconceptualisation of validity, in order that "we need not be constrained by standards that we developed for another game during another era" (Eisner and Peshkin 1990,98,99). Rubin and Babbie (1989) believe that for greater understanding and clarity of the data, considering validity could be useful.

Thus, several types of validity discussed by Rubin and Babbie (1989) are considered here. This is not an attempt to authenticate the data, or to validate the experiences of the participants. Their stories need no such verification from a more "reliable", "superior" source (Brown, Lumley, Small and Astbury 1994,5). Nor is this research constrained by traditional validity measures. Rather what follows is intended to recast the traditional concept, to use it productively in qualitative research (Marshall 1986). What are offered for validation are the methods used and the reasons for using the selected research tools. What this validity section also provides is an opportunity for the informed challenging of the interpretations made of the participants' meanings and reality.

### Internal Validity

#### **Face Validity**

An in-depth interview (also referred to as a "depth" interview, Jones 1985, Walker 1985) which enabled women to define the nature of their own experiences, and in their own terms, appeared best suited for the exploration of the experiences of adoptive mothers (Minichiello, Aroni, Timewell and Alexander 1990). In conjunction with these interviews,

several scales were introduced. These scales were the Edinburgh Postnatal Depression Scale (EPDS, Cox, Holden and Sagovsky 1986, minimally adapted and only introduced to the mothers currently mothering babies and young children), the Interview Schedule of Social Interaction (ISSI, Henderson, Byrne and Duncan-Jones 1981) and the Social Readjustment Scale, often commonly referred to as the Holmes and Rahe Life Event Scale (Holmes and Rahe 1967). Brown, Lumley, Small and Astbury (1994) state that a key advantage of using standardised scales is that the extent to which they measure that which they were designed to measure has already been investigated. The Edinburgh Postnatal Depression Scale, the Holmes and Rahe Life Event Scale and the Interview Schedule for Social Interaction were verbally administered and were introduced as complementary research tools to the in-depth interviews.

According to Henderson, Byrne and Duncan-Jones (1981) the **Interview Schedule for Social Interaction** (ISSI) had reasonable reliability. Further it is considered that the scale had demonstrated face validity in its ability to measure the desirable constructs; that is, attachment, social integration, and the perceived adequacy of social relationships. The authors suggest that the use of the scale with general populations or with special demographic, cultural, or other groups promises to lead to increased knowledge about social relationships (Henderson, Byrne and Duncan-Jones 1981,52). According to Rosenberg (1992,51) it is possible that adoptive mothers are "not afforded the same kinds of cultural goods and supports as biological parents". Therefore the ISSI Scale was administered in order to gain information concerning the availability of social support, and to explore issues of social integration and attachment for adoptive mothers in new motherhood, and during the later years. However this scale was abandoned during the fourth interview. Feedback from participants in the first three interviews was that they found it repetitive. Moreover it was found that the scale was not necessarily securing the type of data that had been envisaged. During the fourth interview the scale appeared to irritate the participant, who did not want to continue answering the questions on the scale because she saw them as irrelevant. This scale also appeared to threaten the sense of friendly openness that had been strived for during the interview. A combination of the emerging personal thoughts of the researcher about the scale, feedback concerning the scale, and a commitment to ethical, feminist principles of research practice to

allow women to negotiate and re-negotiate their participation and to collaborate where possible over their own rights of participation (Cummerton 1986), led to the decision not to use this scale in future interviews. This outcome is not necessarily a reflection of the inability of the ISSI scale to measure social support, but rather, that some participants in this study did not appear to connect with the scale, nor did they see it as a means to convey their unique story.

In a recent study on motherhood where researchers combined interviews and standardised scales (five scales) the researchers commented that "the only obvious disadvantages were that they (the scales) were sometimes perceived by women as boring, frustrating or repetitive" (Brown, Lumley, Small, and Astbury 1994,26). Several topic areas covered by this scale, such as perceived available supportive relationships, continued to be pursued in the semi structured interview to a much less focused degree.

The **Holmes and Rahe Social Readjustment Rating Scale** consists of forty three ordered events according to their estimated stressfulness. According to Holmes and Rahe (1967) the scale had been used systematically between 1949 and 1967 and the method of assigning a magnitude to the items has provided

"a high degree of consensus (and) a universal agreement between groups and among individuals about the significance of life events under study that transcends differences in age, sex, marital status, education, social class, generation American, religion and race" (1967,217).

Typically researchers use the scale to measure the amount of life change experienced by individuals over a given time period. Respondents most often indicate the life events they have experienced in the previous twelve months (Thoits 1982, Sugarman 1986,140). It is conceded that other life event scales have been developed which may be considered to be better suited to the Australian context (for example Tennant and Andrews 1976, or Henderson, Byrne and Duncan-Jones 1981). However, according to Henderson, Bryne, and Duncan-Jones (1981,66) the Tennant and Andrews Life Events Inventory was "a hybrid of lists constructed by Holmes and Rahe (1967)" and the Tennant and Andrews scale "modified" by Henderson and his associates in 1981. Thus both scales have their origins in the Holmes and Rahe scale. Both of these scales are lengthy and therefore time consuming to complete (the Tennant and Andrews scale consists of 67

items and the Henderson, Byrne and Duncan-Jones scale 73 items and 11 categories).

The Holmes and Rahe forty three item Social Readjustment Scale has on many occasions been used in professional and more mainstream literature, demonstrating its perceived usefulness and convenience in the collection of general life event data (Henderson, Byrne and Duncan-Jones 1981, O'Hara 1995, QAMH 1992, Sugarman 1986, Tanner 1976). In the adoption area, in a study with relinquishing mothers, Winkler and Van Keppel (1984) introduced an abridged version of the Holmes and Rahe Social Readjustment Scale. It is considered that in light of the fact that a life event scale was seen as desirable as a means to facilitate discussion of life events, and to consider adoption as a life event (adoption rarely featured as an individual event on life event scales) rather than to specifically secure a social adjustment score, the Holmes and Rahe Scale was an acceptable, convenient life event scale to use in this instance.

The inclusion of a life event scale according to some, represents further recognition of those factors previously identified in the literature as impacting on the lives of women, and in particular on the lives of mothers (Brown and Harris 1978, Paykel, Emms, Fletcher and Rassaby 1980, QAMH 1992, Thoits 1982, Dennerstein, Varnavides and Burrows 1986). This scale received mixed reactions. Quite a number of women were interested in considering adoption as an important life event, while other participants appeared frustrated with the many items on the scale not relevant to their lives or conversely, with the many life events in their lives which were not featured on the scale. There was no provision on the scale to accommodate additional events nominated by the women.

**The 10 item Edinburgh Postnatal Depression Scale (EPDS)** was administered to nineteen adoptive mothers of children aged five and under. This was in order to illicit data concerning a full range of emotions which may have been experienced by these new mothers in the period following the arrival of a baby, and to enable comparison of the experiences of these mothers, as compared with those attributed in the literature to many new mothers.

The 10 item scale was developed in 1987 by Cox, Holden and Sagovsky who claim it has a most satisfactory face validity (Cox, Holden and Sagovsky 1987). They also claim it establishes the existence of postnatal depression, and is ideally administered in the first few months after the

arrival of the baby (Cox 1986). Whilst the scale has been criticised by some for not readily measuring the severity of the condition (Arizmendi and Affonso 1984), Harris, Hockle, Thomas, Johns, and Fung (1989) describe it as a valuable screening test. According to Cox (1986) after the development of the original 13 item scale, validation studies showed that mothers who scored sixteen (16) or more on the scale were likely to be suffering from a postnatal depressive illness of varying severity, and that non depressed mothers did not usually score above this cut off point (Cox 1986:85). A corresponding threshold of 12/13 has been used in conjunction with the more recently revised 10 item Edinburgh Postnatal Scale (Cox, Holden, and Sagovsky 1987).

However Brown, Lumley, Small and Astbury (1994) suggest that a cut off point of 12/13 is a conservative cut off point because although

"it identifies a group of women who are all depressed or on the borderline of depression. In doing so we know we will have missed some women who are depressed" (1994,122).

They suggest that a cut off point of nine is recommended for clinical settings since this will miss fewer women with depression. For this research the more conservative threshold of 12/13 was considered when observing the distribution of scores from this study. The decision to use the more conservative threshold was based on the reasons for the collection of the data which were of a research, and not a clinical nature.

In terms of time frame and recommended candidature, it is acknowledged that in this research the scale was not administered under the conditions recommended by its British developers. However according to Brown, Lumley, Small and Astbury, (1994) this scale has received formal validation for use in Australia, it has been used with "mothers of older infants and toddlers", and has even been used with "fathers of toddlers" and in those circumstances "was highly acceptable" (1994,121,122). For this study the scale seemed especially well suited to assisting in the revelation and exploration of range of feelings and emotions of adoptive mothers in the post adoption period, which previously had been little explored.

### **Content Validity**

The rich content of the data and the degree of success in meeting the aims of the research was in part assisted by the undertaking of two interviews.

Laslett and Rappaport (cited in Oakley 1981a,44) consider that a one-off interview has disadvantages when facilitating the exploration of personal information. Greater confidence in the range of data can be ensured with a second interview, where different strategies can also be employed. In this research the more specific questions of the EPDS and the discussion surrounding the Social Readjustment Scale, which both occurred during the second interviews, appeared to act as triggers for disclosure of further details of participants' experiences. Thus both triangulation of research methods, and the inclusion of a second interview could be considered to have enhanced content richness.

Aveling (1990) states that for feminist researchers the discovery of patterns is a ongoing process which needs constant checking and refining. She states that whilst such flexibility could be valid criticism, it does allow researchers to

"probe issues and elaborate emerging concepts and thereby construct cultural accounts that, however partial and idiosyncratic, achieve the contextuality, depth and nuances unattainable through more remote research methods" (1990,14).

Given that perhaps some women conceptualise their experiences differently, this researcher was better able, in later interviews and after constant interaction with the data, to trigger further responses by using combinations of emerging key words or phrases (Royse 1991).

Boulton (1983) states that greater rapport developed after the tape recorder was switched off, when participants relaxed, and when the researcher was encouraged to informally exchange motherhood stories. In this research this was not found to be evident. As previously stated some participants were apprehensive concerning the tape recording of the interviews. The fact that it is a precise and correct recording of the interview, the very reason for its use, may have inhibited the responses of some participants. However it seemed that in this research shared conversational interactions were evident during the taped interviews, with some women appearing to become oblivious to the tape, as evidenced in one women's comment when she wondered " is your tape working? I forgot it was even there".

What may have been an influence to consider here with reference to content validity is the issue of participants giving socially desirable "best face" responses (Cornwell cited in Cotterill 1992,595, Nicholson 1986,

Boulton 1983, Komarovsky 1988). It may be that there is a need for women to conform to the expectations and the myths of new mothers in this society, and to proclaim the rich rewards and fulfilment of motherhood. The desire to appear to be a perfect mother may be particularly so for adoptive mothers (Small 1987, Rowe 1983). Therefore this could have resulted in some mothers giving socially acceptable responses, rather than admit to less than perfect behaviours or reveal perceived differences, peculiarities, or aberrations.

It did appear to me that in some interviews the participants erred on the side of caution when discussing their feelings of new motherhood. In later interviews the sharing of broad themes emerging from accumulating data of previous interviews may have helped to counteract this to a certain degree. It may have served to validate a broad range of emotions experienced by the participants, and may therefore have acted to generate the expression of more intense and personal, yet perhaps less acceptable, emotions and experiences. However, for several participants who did speak very honestly about behaviours and thoughts that could be interpreted as breaching the patriarchal norms of mothering, such revelations later produced anxieties that were only put to rest with the withdrawal of such comments from the useable data.

Brown, Lumley, Small and Astbury (1994) comment that a strong criticism of their research with recent mothers was that it unconditionally assumed that participants' subjective reports of events were reliable and acceptable "without corroborating evidence from a superior source" (Brown, Lumley, Small and Astbury 1994,5). This criticism of content validity was particularly strong where women were depressed. Yet Brown, Lumley, Small and Astbury (1994) assert that in women-centred research, women are acknowledged as active, conscious intentional authors of their own lives. It is this position, that considers women's own words and interpretations as a true account of events in their lives, that guides feminist research and that has guided this research.

#### **Construct Validity - The Interview Schedule**

The interview schedule, consisting of a list of items and broad themes, directed the semi-structured interview. It was considered most appropriate and effective to elucidate the experiences of adoptive mothers. The final

inclusion of items on the schedule was a result of the literature review, and the findings of an earlier small Honours study.

### **Construct Validity - The Scales**

The Interview Schedule for Social Interaction (ISSI) was included as a scale appropriate to gather data concerning social supports and attachments in the Australian context, and with this sample, however this scale was subsequently abandoned.

A suitable life event scale which featured adoption as a major life event did not appear to be available. The Holmes and Rahe scale was incorporated to facilitate discussion concerning life events which had occurred in the lives of adoptive mothers, and discussion of adoption as a life event impacting on the lives of adoptive mothers.

A scale which measures postnatal depression (Edinburgh Postnatal Depression Scale, EPDS) may be thought by some to be an inappropriate, invalid or at the very least an unusual scale to administer to mothers who have not given birth to their babies, but rather have adopted them. However this view fails to address or challenge the basic assumptions or inconsistencies in contemporary thinking concerning new motherhood, and also fails to acknowledge the full range of feelings of adoptive mothers. This research sought to acknowledge such dangers, and to resist taking a narrow restricted focus based on readily accepted assumptions, which may have resulted in the exclusion of, or failure to uncover, some feelings or experiences. This study, in part, sought to highlight the huge range of external factors influencing a new mothers' transition to motherhood, including the many structural, societal and environmental factors impinging on this transition. More importantly, it sought to highlight the less than fully acknowledged experiences of adoptive mothers. Related to the exploration of new mothering issues, the absence on the EPDS of any questions concerning the feelings of the mother towards the baby was identified. Yet some researchers suggest that a baby's temperament, the "goodness of fit" between mother and baby, and the feelings experienced by a mother towards her baby, may be important indicators, and risk factors of maternal stress, and depression (Kraus and Redman 1986, Clarke-Stewart, Friedman and Koch 1985, Searle 1987, Levitt, Weber and Clark 1986, Welburn 1980, Boyce 1988). Attempting to incorporate into this study a

new mother's feeling toward her baby, a final question asked, at the completion of the EPDS and following the final question on the EPDS, Question 10 "Did you ever think of harming yourself?" was the question "Did you ever think of harming the baby?".

The interview schedule and the selected scales were considered useful in helping to elucidate many issues thought to be relevant, and considered appropriate to the aims of the research.

### **Triangulation of Research Methods (Crystallisation)**

"Once a proposition has been confirmed by two or more measurement processes, the uncertainty of its interpretation is greatly reduced" (Webb, Campbell, Schwartz and Sechrest 1966,3).

One method of gaining an alternate or broader perspective on the topic under exploration is the research method of Triangulation. In principle this recognises that there may be a need for the introduction of more than one source of data, to attempt to corroborate and to validate the data (Rubin and Babbie 1989, Walker 1985, Royse 1991). Richardson (1994,522) criticises the use of triangulation which is "valorise(d)" in traditional research. Richardson recommends that to *crystallise* is to reflect "multidimensionalities" in the data, not to validate the data. In this research the use of triangulation was not to corroborate or validate the data, rather to extend the data, to facilitate a more wholistic understanding of participants' experiences, and to increase researcher confidence in the interpretations made from the data.

Such methods, making use of standardised scales in conjunction with semi-structured interviews eliciting descriptive data, have been successfully used in previous research, with particularly relevant examples including research with mothers (Crnic, Greenberg, Ragozen, Robinson, and Basham 1983), research with mothers using feminist research principles, (Brown, Small, Lumley, and Astbury 1994, Wearing, Rutland, Koenig and Noble-Spruell 1990), and importantly research in the area of adoption (Humphrey 1969, Levi-Shiff, Bar and Har-Even 1990, Winkler and Van Keppel 1984).

Also included were data from other more diverse sources, both gathered by myself, and given to me by research participants. These included diary entries, poems written or treasured by participants, and letters to the editors of newspapers written by research participants or members of their family.

Also collected by myself or passed on by participants or interested persons were several videos (including one which had been produced with the assistance of several participants in this study), a tape featuring a song about adoption, and a range of newspaper and magazine clippings. Written and personal communication was also made with a wide variety of persons with an interest in the research area. All of these sources of data provided material which assisted me in attempting to understand and capture the experiences of adoptive mothers.

Triangulation (crystallisation) of research methods allows for the extraction of additional data, and facilitates analysis and discussion of the ability of one or another form of data collection to extricate information which accurately captures the reality for the group represented in the study. It could also be considered that triangulation of research methods makes a contribution to the principles of qualitative research, by enhancing the development of accurate concepts and propositions, leading to the construction of theory which does emerge from the data (Lupton, Short and Whip 1992).

With reference to the adjustment of new adoptive mothers, their concerns or distress, and their anger or displeasure over inadequate services or changes to policies or legislation, one alternate source of information considered was the Department of Families, Youth and Community Care. However informal discussions with several workers concerning any difficulties expressed by adoptive mothers to Department workers, revealed that such an occurrence was quite rare. It had previously occurred to me that adoptive mothers may be reluctant to return to the Department with any concerns, perhaps understandably in view of the Department's dual role of care and protection, and also the Department's power to give or withhold a second child. Therefore this did not present an avenue for additional data collection.

Overall the use of the scales, and other sources of data whilst not primarily used to establish a higher level of reliability and validity, did provide an opportunity for expanding and enriching the data, and for assisting in confirming or disconfirming researcher interpretations of the data.

### **Sample Size**

It is acknowledged that some would argue a small study is not strong in the area of general validity, nor particularly sensitive to replication. However Rubin and Babbie (1989) suggest that significant advances to knowledge do not necessarily require large scale studies, while Walker (1985) confirms that volumes of rich meaningful data can be obtained from a limited number of individuals. Indeed, Rubin and Babbie (1989) consider that important contributions can be made by innovative studies using flexible methods and smaller samples. Boulton (1983), and others agree that when the intention is to explore patterns and themes, small studies are most appropriate, and that such studies have provided invaluable, rich, meaningful data giving insight into participants' lives (Walker 1985, Oakley 1974, Boulton 1983, Nicholson 1986).

In the area of adoption quite a number of studies across the adoption spectrum that have made a significant contribution to the literature and to policy developments in adoption have been smaller studies. These include research by Schechter with a sample of sixteen adopted children, by Hoopes with fifty four adoptive and biological families, and influential research by Triseliotis, who secured a sample of seventy adoptees. Additionally, McWinnie recruited fifty eight adoptees as research participants, Kaye and Warren compared the experiences of forty adoptive families, and Sorosky, Baran, and Pannor undertook pioneering research with thirty eight birth parents (Hoopes 1990, Iwanek 1989, Kaye 1990, McWinnie 1967, Sorosky, Baran and Pannor 1984, Schechter 1960, Triseliotis 1973). Therefore this study of fifty adoptive mothers is a comparable size to other, significant adoption studies.

### **Flexibility**

According to Marshall (1986) the use of qualitative research allows a considerable degree of flexibility within the research process. Further Marshall and Rossman (1989) state it is important that a research design must have built-in to it an openness to the unexpected, and the ability to foster the exploration of the variations and complexities of experiences.

In this study each interview was approached with the same number of selected topic areas to be covered (Interview Schedule Appendix V) however relevant issues which emerged as important to the participant

were further discussed. As previously stated, topic areas arising were incorporated into later interviews as appropriate, therefore serving to further enhance the data, and validate this important feature of qualitative research methodology (Marshall and Rossman 1989, Royse 1991, Marshall 1986, Boulton 1983, Aveling 1990).

Rubin and Babbie (1989) do state there is a danger that when positive empathic responses are given to participants' disclosures this may lead to further disclosures on similar issues, perhaps then giving the researcher that information for which they were looking. However they state that being aware of such a possibility may help reduce its occurrence. On one occasion concern was felt on a similar issue to this when a participant made the comment twice during the interview "oh I'm sorry I don't think I'm saying what you want". While the participant was reassured that whatever she wanted to answer was very acceptable, she appeared unconvinced. In future interviews an effort was made not to appear to be looking for certain responses, as it had appeared to this participant.

### **External Validity**

#### **Reliability**

Minichiello, Aroni, Timewell, and Alexander (1990) define Reliability as when a measure or a study consistently gives the same result, however Marshall and Rossman believe that qualitative research "does not pretend to be replicable" (1989,148) but rather concentrates on recording complexities, and diversity of experience. Replication of the study described in this thesis may be difficult due to the unique nature of its location in the evolution of adoption in Queensland, and this unique time in the lives of participants. Supporting this, Marshall states there is a danger in looking for permanent replicable truth within the "shifting transitory phenomena" we are studying (1986,208).

However, Rubin and Babbie (1989) consider that reliability problems other than replication do occur, and that individual researchers may obtain different answers as a result of their attitudes and demeanours. Taking a structural perspective, as a woman I may have shared with the participants some experiences of the inequalities of this society; as a mother similar joys, frustrations, fears and anxieties also may have been experienced.

However I am not an adoptive mother and therefore may have made incorrect interpretations or assumptions.

Cummerton (1986) states that when research is used to focus on one aspect of the lives of women, members of that particular group must be involved in the research. This research did not involve collaborative scholarship; no members of the focus group were involved in the planning or the analysis of the data to any significant degree. I did, however, actively strive to seek out all members of the adoption circle in order to increase my knowledge in a wholistic way concerning the experience of adoption, and I consulted on many occasions with several persons who were both knowledgeable, and were personally experienced in the area of adoptive mothering. I also strived to maintain an interactive, non-hierarchical, reciprocal relationship with the participants at all times, and sought their ideas and recommendations in order to maximise their contribution to the research. Consultation with some participants was also sought during the analysis stage. I contacted several participants to clarify some of their meanings or comments of which I was unsure, and I used the opportunity to ask for their thoughts on my current line of thinking. Prior to the submission of this thesis participants were given a summary of the findings, and further feedback and comments were encouraged.

### **Generalisability**

Schofield (1990,202) points out that most, although not all qualitative researchers have actively rejected generalisability, and that one contributing factor to this position was the work of cultural anthropologists with "exotic cultures", for which generalisability was not applicable. However she states that in the last 10 years, with a recognition of the potential of qualitative research in many areas, qualitative researchers have begun to recognise the importance of generalisability, and of shedding light on issues generally, not just as they are experienced at one site. She further calls for qualitative researchers to consider their research, and generalisability in terms of "what is, what may be, and what could be" (Schofield 1990,209), while Becker calls for recognition for the generalisation which is already occurring with qualitative research, as "what we're doing, and recognise it as perfectly okay to do it" (1990,241). Lincoln and Guba (1985) suggest that if only a rationalistic, scientific definition of generalisation is legitimate, then case studies have little to

contribute. They discuss whether an effective way of adding to understanding is to provide information from which individuals can draw naturalistic generalisations, and they conclude that it is possible "that samples need not be representative in the usual sense to render generalisations warrantable" (Lincoln and Guba 1985,128).

The conclusions drawn, and the recommendations suggested as a result of this study could, based on a traditional definition, only be applied to those women participating in the study. This would be considered particularly so in view of the method of sample selection, that is, an unbiased sample is not and cannot be claimed. However it is suggested here that the results of this study need not necessarily be viewed with such narrow application.

In Queensland, as with many other Australian states and overseas countries, there are very comprehensive criteria and rigid assessment processes which apply to adoptive parents. These include strict guidelines concerning marital status (de facto relationships are not generally permissible), age, health, abilities, psychological and marital stability, fertility, (the requirement of infertility was introduced in practice in the early 1970's and into legislation in 1987), weight, social habits, medical history, criminal history, and the number of present adoptive or relative children in the applicant's custody. Also carefully considered are religious affiliation, employment stability, lifestyle, personal values, social habits, extended family values, and parenting styles and attitudes. In addition to this, it appears that adoptive mothers are actively encouraged to resign from their employment. New adoptive mothers are most often full time mothers with no employment outside the home, at least in the early post-adoption period.

Considering the existence of these criteria, adoptive mothers may be, overall, a more homogeneous group than would have been previously acknowledged, this notwithstanding the heterogeneity existing in categories or groups. Although this sample of adoptive mothers is a non-random sample, there appears little to indicate that these adoptive mothers, drawn from urban and rural centres, differ greatly from non-participant adoptive mothers, particularly in Queensland, or that a wider audience than this sample could not draw "naturalistic generalisations that will prove to be useful extensions of their understandings" (Lincoln and Guba 1985,120).

### Limitations

- As previously stated, a prime quality of feminist, interpretive, qualitative research, is that the researcher must locate herself and her personal history within the research. Therefore I bring to the research, and the analysis a personal history which may shape, in unseen ways, the outcome of the research.
- This research has been undertaken in a specific time period and era. According to Denzin (1989,138) there have been at least four epochs in the capturing of human history. Now in the fourth epoch this era is marked by a individual self interest, and personal gain, whilst at the same time, massive levels of anxieties at the social level exist. It is a time of individuals being submitted to postmodern influences, and a time of personal unrest. Denzin suggests that interpretive interactionism sits within this historical moment; so too does this research.
- Whilst an extensive literature review was undertaken of the English language literature on the topic area, I cannot claim that the literature review is completely exhaustive. In the main the literature reviewed is from the social sciences.
- Bernard (1973) states that particular sensitivity is needed to identify biases when working in the field, where researchers may document selected information. Similarly Opie (1992) writes that the analysis of qualitative research involves the selection of quotations from thousands of lines of transcripts, and the principles for selection must be defined. During this research most interviews were tape recorded, extensive notes were taken, and triangulation (crystallisation) of methods undertaken, this perhaps helping to minimise selective data collection from the field. As far as I am aware, the selection of quotations represents my attempt to give the reader clear examples of the range of responses made, or to exemplify a point repeatedly made. Biases may exist that are unseen to this researcher, although the presentation of large numbers of quotations, which were often extended rather than brief quotations, may have assisted in alleviating biases in the presentation of the data.
- While feminist qualitative researchers have spoken of their research allowing women's voices to be heard (Brown, Lumley, Small, and Astbury 1994, Cheryl Hyde 1994, Opie 1992), the very location of the

researcher within the research suggests that the researcher's voice (my voice) will be clearly present.

- Adoptive mothers who volunteered to participate in this research do not constitute a random sample of adoptive mothers in Queensland. Mothers in this study represent a sample of adoptive mothers who were willing to identify themselves to the researcher as adoptive mothers. Researchers in the past may have been limited by the secrecy surrounding adoption. Similarly, in this study those adoptive mothers who personally desired to, and who desired that their family, remain inconspicuous in the general community, would be unlikely to have contributed to this research.
- This research is located in a unique point in time in the development of adoption policy in Queensland.

### **Ethical Considerations**

Oakley considers that ethical considerations and dilemmas are generic to all research, and they may be "greatest when there is least social distance between interviewer and interviewee" and "social distance may be minimal where gender, socialisation, and life experiences are shared" (1981,55).

Finch (1984) states this raises one of the major considerations for research when interviewing women. She argues that women, and perhaps in particular mothers, are well used to being asked probing personal questions by doctors, midwives, social workers, and health clinic sisters, and they may be naive, and vulnerable to exploitation by researchers. Therefore it is considered most important by feminist researchers that they do not sanctify the power relationship between researcher and participants, by inappropriately appearing to represent a professional body. Rather they need to represent themselves, a researcher eagerly yet humbly undertaking to learn through a non-hierarchical relationship of the experiences of women (Finch 1984, Stanley and Wise 1983, Wilkinson 1986). This researcher actively aimed for such a relationship.

I was acutely aware of issues of confidentiality while undertaking the research. It was acknowledged and appreciated that in the first instance, by expressing interest in participating in this study, these mothers had undertaken to identify themselves. It was also realised that for those

participants agreeing to conduct the interview in their own home, not only were they identifying themselves as adoptive mothers, this also meant maximum identification of their homes, and in some cases also their children. Whilst confidentiality was assured to the degree possible, and conscientiously adhered to, as were other ethical considerations for professional research, a sensitivity to, and great apprehension over this issue remained with me throughout the study.

All procedures were in accordance with the Australian Association of Social Workers (AASW) Code of Ethics (1989,1994).

The study was given approval by the James Cook University Experimentation Ethics Review Committee (Approval No. H 375).

### **Copyright**

Copyright requirements for each of the scales used in this research were investigated and permission for their use sought.

For the Holmes and Rahe Social Readjustment Scale, permission for its inclusion in the research was granted by the Journal of Psychosomatic Research, Elsevier Science Ltd, Pergamon Imprint. Oxford, England.

In the case of the Interview Schedule for Social Interaction (ISSI) the copyright notice states that:

"the Appendices may be reproduced by research workers who wish to use the ISSI in the course of their investigation. These Appendices may be reproduced without permission of the publisher, provided proper credit is given by including the following notice on the first page of each appendix reproduced: Copyright 1981 by Academic press Australia Reproduced from Neurosis and the Social Environment".

This copyright notice was complied with and further permission was not sought for use of this scale.

In the case of the Edinburgh Postnatal Depression Scale, copyright lay with The British Journal of Psychiatry, and written permission for its use in this research was sought and granted.

## Terminology

Whilst in the literature and in the community there appears to be a generally accepted term for those parents taking on the parenting role of a child not born to them (adoptive parents), this does not appear to be so for the parents to whom the child was born. Terms used to describe the parents, or the mother to whom the child is genetically linked, include first or original parents, natural or real parents, biological, genetic, or birth parents, and relinquishing or surrendering parents. In this thesis the term adoptive mother or parents is used to describe those individuals parenting an adopted child, and the term birth mother or birth parents favoured to describe those to whom the child was born. However, in direct quotes from the literature or from the data, the terms used have been retained.

## BRACKETING - THE DATA ANALYSIS

According to Denzin (1989) during this phase of the interpretive process preconceptions identified during the deconstruction (literature review) remain suspended, in order for analysis to occur unimpeded. In "Bracketing

"the researcher holds the phenomenon up for serious inspection. It is taken apart and dissected, and its elements and essential parts are uncovered, defined and analysed' (Denzin 1989,55).

Bracketing further involves the location of key phrases and statements which speak directly to the phenomenon in question, interpretation of the meanings of the phrases as an informed reader, and inspection of the meanings for what they reveal.

### The Qualitative Data

Royse states that data analysis is the stage where data begins to "come alive" (1991,173), where patterns and commonalities are detected, and

where insights emerge. Further, Rubin and Babbie (1989) argue that in addition to the data analysis revealing findings which will validate the research inquiry, analysis will also yield unanticipated findings that go beyond expectations, and which may initiate further cycles of inquiry.

The beginning stages of this analysis process proceeded rather haltingly, and created more than anticipated anguish. According to Marshall and Rossman (1989,122)

"data analysis is the process of bringing order, structure, and meaning to the mass of collected data. It is messy, ambiguous, time-consuming, creative and fascinating process. It does not proceed in a linear fashion; it is not neat".

This appears to be an apt description.

Difficulties emerged soon after analysis began. Perhaps being more a task than process orientated individual in such circumstances as these, I found myself both committed to follow the interpretist "emerging themes" prescription of grounded qualitative research (Strauss and Corbin 1990), yet constricted, even immobilised by its very tenets, which appeared to dictate a seemingly directionless data analysis journey to discovery. I began to consider that this emerging theme prescription confusingly involved positivist thought to a certain degree, seemingly suggesting that one could arrive at the point of research data analysis, free of *a priori* concepts. Indeed the principles of qualitative research propose that the dynamic, interactive, and constantly evolving nature of such research will generate concepts during the data collecting phase.

Strauss and Corbin do suggest that during the data analysis, if the analyst is not able to readily find evidence of a process, the analyst can turn to "deductive thinking" (1990,148), and hypothesise possibilities, and then go back to the data for evidence to support, refute or modify the hypothesis. Further Hyde describes the process of making order out of chaos as being facilitated by the use of "analytical induction" (1994,174), where "*a priori* propositions and emergent themes are compared and contrasted" and where

"there is continuous movement between data and competing theories as the researcher engages in an analytical dance that is both deductive and inductive" (1994,174).

For progress to occur at this point I believe I needed to consolidate my thinking and to create a plan. This was in order to begin to identify and

unite the common threads of adoptive mothers' experiences. Jones (1985) stated that she finds it most useful in analysis, when trying to understand the way in which the participants "make sense of their world" (1985,61), to create a map of the interview and a series of notes based on the concrete concepts of the participants. I considered that this idea of mapping the interview was not exactly what I wanted for my analysis, but an overall map indicating and encompassing movement of the interviews, through a process of deconstruction and examination, and perhaps including some tentative *a priori* categories, might provide a beginning for me.

I began making some sense of the chaos by spreading before me a large sheet of butcher's paper and dividing it into sections. I decided that Section One would be concerned with demographics. Continuing on, it was apparent that in the interviews, a pattern in the description of events often emerged after the participant was invited to tell me a little about how they came to adopt. This event sequence was governed in part but not totally by the sequencing of subject areas on the interview schedule. Most participants in the early mothering group began speaking about the reasons for adopting, often including information concerning infertility, or reproductive or health difficulties which had resulted in miscarriages and/or neo natal and infant death. The adoption application process, the adoption workers and waiting to adopt were often the next issues to be discussed. Following on, participants made comment on the contact from the Department to say a baby was available, the celebration of the baby's arrival and on the many tasks of mothering. The above topics (for example infertility, the waiting time, the application process and the baby's arrival), were thus flagged, and noted on the butcher's paper, as early categories for the data analysis process.

Similarly sequenced, the interviews with mothers of older children fell into a pattern which began with the reasons for adopting however often quickly moved to topics such as the legislation changes, search and contact, vetoes to information, and intergenerational family matters such as grandmotherhood, with some movement between early and more recent experiences and concerns. Overall the interview schedule and interview process allowed the apparent natural time-sequence of adoption life cycle events to emerge and to guide the interviews. It seemed appropriate to allow the headings and this movement to also guide the data analysis. At this time I realised that the interview schedule topics and the headings readily identifiable in the interviews, fitted with the framework offered by

Rosenberg (1992) concerning the tasks of adoptive parents. Thus Rosenberg's model was utilised to form the skeleton of Sections Two and Three of my tentative map for analysis, into which the identified *a priori* and emerging topic headings could be accommodated.

My growing familiarity with the literature, coupled with my developing awareness during the interviews of differences, and commonalities of experience, highlighted in my mind the need for a consideration of a number of theoretical concepts which may, or may fail to, explain the experiences emerging. Sections Four and Five of the butcher's paper map therefore consisted of notations and some definitions of the theories (see Chapters Three and Five) to be considered in the concurrent theoretical analysis and theory development during analysis. Section Six included the scales, data concerned with the actual interview process, and that data which did not easily link to the initial headings. This, in the first instance, being a sub-section entitled Miscellaneous. It was a humble beginning.

Next, I transferred the headings and sections from the butcher's paper to loose sheets of paper contained in a binder. This was in preparation to begin the coding process, with the transference of relevant segments of the interview data to the headed topics and sections. Text would be inspected in light of the comments of other adoptive mothers under the headings. I considered that these sections and headings could easily be relabelled or manipulated as required.

Overall this process was in order to begin bringing life to the data through identifying the degree of commonality or difference of experiences, to deconstruct the data and allow the groupings of the data around themes both already identified and emerging. It would highlight the range of experiences, and identify that data which appeared to exemplify, or contradict the feeling of others. The collapsing of sections, or developing of new sections or sub-sections to accommodate that data which could not be accommodated in the initial sections would be governed by the text.

Having reached this point, I was suddenly overwhelmed by feelings that my qualitative analysis toolkit was too meagre (Cheryl Hyde 1994), and I felt uncertain about just how to proceed in order to gauge the meaning, of, and give voice to the data. The qualitative research texts from which I sought help at this time appeared to make use of the appropriate terminology, but appeared to shed little light on the actual process of seeking out the differences, capturing the richness and the meaning, ascertaining the

commonalities, discovering the patterns, and identifying and labelling the clusters. I knew what I needed to produce, but I still felt at a loss as to how I could produce it.

At this time I considered using a computer package (Nudist) for the analysis of the qualitative data. However my confidence in such a move was not bolstered by a brief look at Nudist (one day workshop), and I believed that manually sifting through the data was better suited to my ideas of qualitative data analysis. The words of Minichiello, Aroni, Timewell and Alexander (1990), that a computer program will not replace the analytical thinking processes underpinning qualitative research, were confirming. However the words of Richards and Richards (1988,3) that:

"Taking indexed text and sifting, comparing, combining categories, tracking down threads of meaningful connections, (and) finding confirmations and counter examples, simply stretches most researcher's abilities and patience" ,

certainly became filled with meaning for me.

At this stage, while I felt my preparation thus far (butcher's paper map or plan, and transferred heading) was useful, I still felt unable to move into the analysis in any committed way. Wishing to remain true to the principles of grounded research, as far as was possible for me, I turned to Strauss and Corbin (1990) who suggest that part of the selective coding process is to firstly write a few sentences containing the essence of your (research) story; a few sentences containing a short general descriptive overview (1990,119). I wrote:

"This study was conducted to explore, document and work towards achieving an understanding of the experiences of mothers of adopted children at points across the adoptive life cycle. Significant points include deciding to adopt, the waiting period, the early post adoption period, the transition to motherhood, and the early and primary years. They also include their children's young adult and adult years when decisions are made about accessing information, and/or searching for biological family members".

Strauss and Corbin suggest that emerging from this general descriptive overview would be one core category (1990,120), a "central phenomenon" which is able to encompass that which has been described in the story; a story line. My attempt to achieve this part of the selective coding process resulted in this story line:

"Negotiating adoptive motherhood: the event and the process of taking on and maintaining the mothering role across the adoptive life cycle".

With this statement in print I somehow felt happier to continue the analysis process feeling thus far, I was still on track.

I was very aware that in this process I was establishing, the deconstruction of the data for general theme identification, there was a danger that the integral theme of each particular interview could be lost. While maintaining the use of Denzin's model, McCracken (1988,42) appeared to offer assistance with a five stage process to the analysis. These five stages include:

1. Examining the utterances in their own terms, and ignoring its relationship to other aspects of the text,
2. Taking these observations and developing them:
  - a) by themselves,
  - b) according to evidence in the transcript and
  - c) according to literature and cultural review,
3. Looking at the interconnection of the second level observations (a, b, and c), with the focus shifting away from the transcript, to observations with references to the overall transcript made now only to check ideas as they emerge from the process of observational comparison,
4. Taking the observations generated at previous levels and subjecting them to collective scrutiny, and looking for consistency and contradiction,
5. Taking these patterns and theme and subjecting them to a final process of analysis.

According to McCracken this five stage process inscribes a movement from the particular to the general. This appeared to connect well with the qualitative analysis process with which I was grappling. It provides a designated opportunity for examination of the utterances in the data themselves and in relation to the context of the transcript (the particular), and provided for the deconstruction of the data, and reconstruction as collective data (the general). It also provided for the examination of the data in relation to the literature (theory) at different stages of the analysis

process. Attempting to proceed through this process would also help to reduce my fears of losing the participant's construction of the story and their meanings during the analysis process (2 (b): evidence in the transcript).

To further address this particular point of maintaining the participants' construction and meaning, I decided that I would document what I perceived had been the integral message of the interview, and capture it in field notes beginning "This interview has a sense of.....". Although these field notes were inevitably my voice, and my own and not the participant's interpretation, I believed they nevertheless may contribute to retaining a sense of the participant's experience as it had been presented to me, and as it had impacted on me during the interview; that sense which was evident prior to deconstruction, and that which was set in its own context.

According to Wax (1971,45) organising, analysing and reporting on fieldwork data can be "a grim task" and I found this, at times, was an apt description of the process I was engaging in. Analysis proved a long, and energy-draining process for the most part, however the process appeared otherwise to work well.

Each interview transcript was read and re-read several times. Segments from the interviews were transferred (handwritten) from the interviews to the headed sheets in the binder. Those segments which did not easily fit under the original headings, were stored under the miscellaneous sub-section. The rapid and continuous growth of the miscellaneous sub-section, while some of the *a priori* categories attracted few responses, confirmed the overall grounded nature of this data analysis process. The Miscellaneous sub-section data was routinely grouped, collapsed and new codes applied. While new headings frequently emerged, the emergence of patterns in the data was frustratingly slow, however gradually I found myself wondering about common themes, and examples which failed to fit such themes.

Kidder and Judd (1986) and others, assert that what makes qualitative research systematic is not standardisation but negative case analysis (Lincoln and Guba 1985). One example of such negative case analysis is that after examination of some of the interviews with mothers of older children, while many of the mothers seemed shocked and perhaps a little resentful at the unexpected legislative changes and the sudden possibility of contact, several appeared very accepting of their child's contact with the birth mother and birth family. I wondered why?

Was it because the mother had other biological children, a variable considered by other researchers (for example Midford 1994)? Looking at two women who seemed exceptionally open to reunion, one had biological children and one did not. Was it influenced by attitudes towards birth mothers? Neither of these women had questioned a birth mother's entitlement to contact her child, or had commented on "inappropriate" behaviours of single mothers, while quite a few such comments were made by other adoptive mothers. Was a very painful or an easier adjustment to infertility a factor? One of these women was diagnosed as being infertile and she spoke of living with and coming to terms with infertility.

Was it a strong belief in hereditary or environmental influences? Both of these women spoke of personal attributes of the children; one spoke of being curious about her adopted child's biological inheritance concerning his negative social behaviours, the other spoke of talents her child possessed, and mentioned her corresponding abilities to teach in this area. Perhaps each had reasons for wanting to shed light on hereditary or environmental influences?

Was it the age of, or the life transition being experienced by, the parents or the adopted child that made adoptive mothers more open or more anxious about contact? Was there any links between the sudden Queensland legislative changes, the age of the adoptive parents or the adopted child, the simultaneous experience of an important life event, life stage or life transition for an adoptee or adoptive mother, and their responses to contact? These more open mothers were not really close in age (one was 50, the other approximately 65), and concerning the children's ages, one was the mother of children aged 10 and 18, the other the mother of children aged in their thirties.

Was the attitude of the parent a reflection of the attitude of the adoptee, for example, an adoptee's felt sense of threatened privacy, or a sense of curiosity about the past? Perhaps these two mothers had attitudes to contact that fitted well with those of their children? Other participants had spoken of being curious themselves, or feeling compassion for the birth mother when their child was not necessarily keen for contact to occur, so shared attitudes between the adoptee and the adoptive parent with relevance to contact may be a factor. For one of these two women there did appear to be a curiosity which fitted that of her child (as gauged from this adoptive mother's comments).

All of the above emerging thoughts and questions kept returning me to the interview data for confirming or disconfirming data concerning adoptive mothers' attitudes toward the seeking of information and contact with birth families by their children.

During some of the second interviews, questions were introduced which hitherto had not been asked, these being asked as a direct result of emerging themes or recognised key words (Aveling 1990), or a recognition that a question had become conspicuous by its absence. For example, one comment made to me on a number of occasions during casual conversations when I revealed my topic of research, was "oh I know someone who wasn't told they were adopted". After several participants made similar comments during the second interviews, I introduced a question into subsequent interviews asking whether participants personally were aware of any persons who were adopted and not told. This question was asked of many but not all participants.

Another example of questions introduced as a result of an emerging theme in the later interviews involves several women's comments about past attitudes, and their feelings that they were somehow condemned. One woman perceived "adoptive parents are attracting condemnation, it was a different social climate then", while another woman reflecting on media coverage concerning the coercion of birth mothers to give up their child for adoption, commented that she didn't think "adoptive parents should be thought of as the meanies". One other adoptive mother felt adoptive parents had "gone from ordinary parents to bad people". In subsequent interviews I shared these comments, and asked women if they had ever had feelings of being a victim of changing social attitudes. This analysis in progress helped to increase my confidence that I was gaining a broader and more informed understanding of the participants' experiences, thoughts and perceptions. This is confirmed by Marshall and Rossman who observe that "data collection and analysis go hand in hand to promote the emergence of substantive theory grounded in empirical data" (1989,113).

The list of statements reflecting my "sense" of the interview also began to offer themes, for example a strong sense of "family building" appeared to be a sense emerging in the field notes written after each interview.

As guided by McCracken's model (1988), completion of a primary process of examining statements individually, led to secondary level observations being made (engaging further with the individual text segments, developing

ideas and categories in the context of other evidence in the transcript, and beginning consideration of the data with respect to the literature context). Tertiary level observation were then made of collective meanings across different interviews. The use of participants' words as codes at this level in the coding process assisted in bringing life to the data. New theoretical concepts with relation to this data began emerging at this level.

This ultimate stage of the analysis process, of a final examination of similarities and differences, and of the emergence of patterns, themes and concepts and new theory was still incomplete when I began the writing up of the thesis. However I felt that this final examination could be completed effectively during the writing up, as I further drew on, reflected upon, and captured in quotes, that which exemplified meanings as I perceived them. Marshall and Rossman maintain that writing up the report on qualitative data cannot be separated from the analytic process, and in fact it is central to that process,

"for in the choice of particular words, to summarise and reflect the complexity of the data, the researcher is engaging in the interpretive act, lending shape and form - meaning - to massive amounts of raw data" (1989,119).

I began writing up the findings while analysis continued. All of the interview data had been coded and thoroughly examined, however the negative case analysis continued throughout the writing up of the findings. "Taking the identified patterns and themes and subjecting them to a final process of analysis" is the fifth and final stage in the McCracken model. This facilitated the development of several conceptual models (constructions) which attempted to offer explanation for the reality for adoptive mothers (see Chapters Ten and Eleven), and the development of a contribution to the professional, theoretical knowledge base in the area of adoption (see Chapter Twelve).

## **The Scales**

### **The Interview Schedule for Social Interaction**

As previously stated this scale was abandoned during the fourth interview, however the three completed scales were reviewed, and are considered in conjunction with interview data concerning social supports.

### **The Holmes and Rahe Social Re-adjustment Rating Scale**

This scale was not introduced to calculate scores or diagnose vulnerabilities (although several participants undertook to calculate their self rating). Rather the scale was introduced to facilitate discussion around adoption as a life event, and to consider if the experience of adopting a child is comparable with other life events. How other life events and life experiences may impact on the experience of adoption was a further consideration. Many comments were made during the discussion of this scale, including comments on the inability of the scale to accurately reflect the life experiences of many adoptive mothers. These comments are examined in conjunction with the semi-structured interview data.

### **The Edinburgh Postnatal Depression Scale**

As previously stated it is acknowledged that the scale was not administered strictly under the conditions recommended by its developers, in terms of recommended respondents, although evidence of a wider application has been suggested in the literature (Brown, Lumley, Small and Astbury 1994). Nor is it considered appropriate to assume that a calculated score alone has the ability to detect and diagnose a condition. However it was considered that examining the scored scales (for summary see Appendix X), particularly in conjunction with the emerging themes of the interview data, would facilitate greater understanding of the experiences of adoptive mothers in the early mothering phase. The responses to the scales were examined, and any corroboration of, or incongruence with the interview data observed.

## **Conclusion**

In this chapter I have detailed the principles guiding this research, the research methodology, the rationale for the methods and principles, the aims of the research, and the means by which the sample was secured. A discussion of issues of validity was also undertaken and the methods used in the qualitative data analysis and the emerging analysis process were explained. In the following chapter details of my personal biography as the researcher, and of my subjective experience of the research process are presented.

**CHAPTER SEVEN**  
**FRAMING THE RESEARCH:**  
**THE RESEARCHER'S BIOGRAPHY**  
**A Tale Of Beginnings, Ponderings And Processes**

### **Introduction**

Denzin (1989,49) describes the step of "framing the question" as including the researcher locating their personal history within the research process, and the researcher "working outwards from their own biographies".

Similarly, Cummerton (1986) and others also state that research within a feminist perspective would include a description of the researcher's personal involvement, including awareness and discussion of the researcher's own experiences during the process of research (Stanley and Wise 1983, Wilkinson 1986, Marshall 1986).

### **The Beginning**

As previously stated, my initial interests in this area arose from my personal experience of temporary infertility, and my experiences of becoming a new mother, of the hard work of mothering, and of the discrepancy between the fairy tale of mothering and the unspoken reality. Encouraging results, yet frustratingly little recognition or change emerging from my initial small inquiry (Honours research) examining the early post adoption period only, provided the primary stimulus for the undertaking of further larger research.

In my Honours thesis I had explored and revealed the experiences of adoptive mothers, which had included a full range of emotions, behaviours and needs in the early post adoption period. Such revelations, I believed, provided a clear challenge to the physiological/hormonal/birthing theories of women's postnatal emotional dysphoria, including postnatal depression, and highlighted the social, environmental, cultural, and political aspects of many women's experiences. However it also highlighted a major void in current knowledge of the adoptive mothers' perspective, and of their lives and experiences, and a void in service delivery to adoptive mothers in

North Queensland. These women had been through a rigorous process where they must prove they thoroughly understood the very clear differences between adoption and raising a biological child. They then collected the child and began their new role of adoptive mother with little if any professional support services to support and acknowledge this important different yet similar role and all its forthcoming challenges. Their needs seemed little recognised in adoption practice, where, subsequent to the arrival of the child, it was claimed that the role of adoptive mother was very similar to that of all mothers and therefore no further contact or support was necessary.

### **The Frustrations and Limitations**

Upon completion of my Honours research project I immediately sought some recognition for adoptive mothers' unique yet also very similar mothering role, and sought improved service provision for adoptive mothers. I approached the Department of Families, Youth and Community Care on several occasions. Understandably, the reduced number of babies available meant that new adoptive mothers are a small and scattered population. With the relentless battle for economic rationalism, realistically, new services would be unlikely. However, disappointingly, the small and localised nature of the study apparently provided insufficient evidence for existing services to be reviewed in order to better meet the needs of adoptive mothers to any great degree.

At this time I made repeated attempts to have information from the study published in the popular literature, believing many women had ready access to such material. However, once again, in this quest for recognition of these adoptive mothers' stories and needs, I was unsuccessful. Such mothering stories from an adoptive mother's perspective did not attract any social interest as gauged by editors of women's magazines (Women's Day, New Idea), and as evidenced here in these comments from The Australian Women's Weekly editor in March 1993:

"Thank you for your letter and for offering us the results of your study of adoptive mothers. I must say I think it fairly unlikely that we could place it in the Weekly; we have written often and at length about the adjustments new mothers need to make, ..... and with few babies available for adoption these

days we feel that such an article would have limited appeal for our Australia-wide readership".

A brief review undertaken by myself of the Women's Weekly during the year previous to my receipt of the above letter, revealed several stories of adoption reunion from the perspective of the adopted person, and the birth parents. (Of interest, a review of Australian Women's Weekly between 1993 and November 1995 revealed at least seven adoption items concerning reunion or contact, from the perspective of adopted persons or birth parents appeared in the Women's Weekly, and on two occasions these items received three page coverage. The adoptive parents were rarely if ever mentioned).

At this point I had briefly wondered if, in the eyes of others, adoptive mothers' stories were seen as less than worthy of consideration or validation, and that the massive social and political shift concerning the entitlement of single mothers to keep and raise their own children, meant that the adoptive mother's perspective was now undeserving of any interest. It was perhaps even inappropriate to offer them a voice.

According to Juliet Harper in her 1990 article "Reflections on Entitlement to a Child in Australian Women's Journals 1947-1987" (Women's Day, and the Australian Women's Weekly), during the 1940's, 1950's and 1960's, there was little compassion for single mothers. The readership of women's journals, and the advice columnists, favoured adoption. However by the 1970's, advice was no longer that adopting the child was "the fairest solution" (1990b,10), letters flooded in from single mothers reclaiming rights to mother their own children, and by the 1980's, stories about searches and reunions were featured in women's journals. Juliet Harper concludes in her article, that by the late 1980's, rather than "relinquishing mothers" being vulnerable, with respect to entitlement issues as reflected in women's journals, "in many respects it was now the adoptive parents" (1990b,11).

### **Reflections and New Beginnings**

At this point I also become very frustrated with the obvious limitations of my small Honours study. There appeared to be little satisfaction for me, or for the participants in my Honours research from a feminist researcher's

perspective. I had not achieved any changes in the lives of participants, nor presented any real challenges for present or future adoption policy and practice, particularly as it impacts on the lives of adoptive mothers. Whilst I had published in a professional journal, current theories of motherhood, and knowledge of factors impacting on the lives of many mothers remained equally unchallenged to any great degree in the public arena. I had pursued, in effect, quite a personal, narrow and specific topic with little outcome for other women.

Very early in the Honours research I had become aware that adoptive mothers had many issues they wished to share, this being evident in the many digressions from the topic areas I had introduced. I was encouraging women to tell me about the early post adoption period, yet they continually talked about broader adoption and family issues; the waiting time, their early grief and losses, happy family events, general events over a lifetime, the children growing up and, for older women, even the clever grandchildren. Other broader issues were positive and negative community attitudes to adoptive families, the birth parents, and concerns over the proposed legislative changes to allow access to previously closed adoption records. I had offered a listening ear, but I also gently but firmly had guided participants back to the topic at hand, my topic. I had been slow to realise at the time that these were their stories as they wanted to tell them, although realistically, to incorporate all such "digressions" was way beyond the limits of that project.

I realised that there needed to be more research undertaken. This was necessary to examine the issues identified by adoptive mothers as impacting on their lives both in the early post adoption period and across the whole adoptive lifecycle. It was also in order to increase professional and community knowledge about the experiences of this important yet seemingly less than fully acknowledged party to adoption; adoptive mothers. After reflecting on the barriers I faced in trying to achieve recognition and validation for these women's experiences, it seemed a natural progression to take up this challenge to capture and reveal more of the experiences of these women across the adoption life cycle as mothers of adopted children. However whilst I felt committed to this research, I did not envisage the journey would be an easy one for me. This speculation proved to be quite correct.

## **Misgivings, Misunderstandings, and Moving Forward**

In late 1992 and early 1993 on missions of purpose to meet with identified people working in the area of adoption, or those whose lives had been influenced by adoption, I travelled to Sydney to visit the Post Adoption Resource Centre, and to Brisbane to meet with staff at the Department of Families, Youth and Community Care and with identified community members. At this time I spoke to social workers, adoptive mothers, an adoptive father, a birth father, birth mothers, adopted persons, and a psychologist currently collecting stories from birth family members for publication. I am indebted to many of those I spoke to at this time for listening to my ideas, and sharing their stories and ideas. However several of those with whom I spoke, particularly those in professional roles, seemed unable to offer positive support for my particular research focus, appearing to remain unconvinced that this focus was different, relevant, necessary or topical. At this time my vision became a little clouded, leading me to question my position, my focus, my purpose and my motivation for this topic.

During the early planning stages many people I spoke to initially misunderstood my topic, assuming I was wanting to undertake research with birth mothers. Upon receiving clarification, some directed me with encouragement to undertake something "more relevant" to current practice than adoptive mothers, such as the impact and outcome for Australia of open adoption legislation, or the outcomes for overseas-born children of the shift towards international cross-cultural adoption, these appearing to be more groundbreaking and topical areas for research. Perhaps there was also a hint from some professionals that the topics they were suggesting were more appropriate.

I continued to struggle with my thoughts as those I met and those to whom I explained my research continued to misunderstand the group I was wanting to research. A very common comment said to me was "do you mean the relinquishing mother"? This was said to me more often than any other comment, and people misunderstood far more than they actually understood. These incorrect assumptions were made about my research throughout the entire time of study. Such comments caused me concern and confusion. I was not in any way setting out to devalue or minimise the painful experiences of past birth mothers, whose stories are very often tragic, and whose feelings of anger and powerlessness have only recently found recognition. However my research was about adoptive mothers.

I felt that many of the comments I received invalidated my ideas. I wondered again why this did not appear to be a topic worth pursuing when there appeared minimal literature on adoptive mothers' experiences. Surely such a perspective was invaluable to those professionals working in the area of adoption. I began to seriously wonder if some groups in adoption were considered "less than"; less worthy of research interest than others. I wondered if, in the current social climate, adoptive mothers were considered undeserving. Such thoughts of mine were subsequently reflected in comments from several research participants in the PhD. research.

"Years ago I think people thought relinquishing mothers were bad and adoptive parents were good ....." (Stella).

"Adoptive parents, we're not politically correct any more....." (Mary).

The PhD task seemed enormous and the thesis journey fraught with difficulties. However I further reflected on the responses from women in my Honours study concerning their needs, on the responses of those to whom I presented the Honours findings, and on the responses from those with whom I spoke during the early planning stages. I felt unable to ignore the important social, political, policy and practice issues arising for adoptive mothers. I felt less than ready but committed to move forward and undertake this challenge.

### **The Research Process**

Reviewing the literature was, I discovered, a mammoth task. Whilst the literature revealing the lived experiences and unique perspective of adoptive parents, particularly adoptive mothers, appeared limited, literature on adoptive parenting did exist, and literature on the broader topics of adoption and of motherhood and all connected areas, appeared endless. The task seemed massive, mind boggling and almost impossible. However, while the review of the literature was overwhelming, it was fascinating, and unearthing obscure articles and discovering relevant books was exciting and rewarding. Unfortunately, twelve months later I seemed no closer to completing the review than when I had begun. The amount of literature I had gathered was mountainous, and in fact there had been a time when I was so earnestly gathering the literature, there had been little time to read it. Seeking out and securing relevant items, writing

to authors, writing to professional workers and recognised experts in the adoption field, and writing to other social work departments in Australian universities to seek other post-graduate students studying in the area, was all consuming. I realised I would need to continue to review the literature but must also begin to organise the project.

Recruiting participants seemed a difficult task. I pondered on the number of participants I needed, and constantly worried about where and how I would recruit them, and how distant I could feasibly travel given my family commitments and my financial constraints. My commitment to feminist research principles meant for me a commitment to "face to face" interviews where at all possible. With assistance from the Department of Families, Youth and Community Care, and with the media coverage and the contacts I had established, my sample was finally secured. This was a challenging but rewarding time for me. I remember, when I had secured my first participant, excitedly greeting my daughter Sarah upon her return home from school with the news "I've got one! I've got one"! I had forty nine to go!

The conducting of the interviews was also rewarding. However the schedule was a hectic one and I found myself very weary toward the end of the interviews.

The analysis was, for me, the most difficult task to actually begin, and an ongoing task for many, many months. At several points during this stage of trying to make sense of the data, I really wondered if I would ever finish, and I wondered how I would know when adequate analysis had been completed. I also worried over whether I would be able to present new meaning and knowledge to the overall picture of adoption, and of mothering and adoptive motherhood.

### **Tears and Reciprocity**

I greatly appreciated, respected and felt humbled by the courage and the openness of participants. These women had seemingly little to gain from opening up their lives and sharing their private experiences of adoptive motherhood with me.

Many women were teary-eyed during the interviews, and some openly cried as they recalled receiving the diagnosis of infertility or the point at which they recognised they were a member of an infertile couple. Some

shed tears as they recalled the great joy of cradling a long-awaited baby in their arms, and for others tears were close when they expressed their thoughts of what the new legislation could do to their child and their family. Some women cried as they spoke of the highs or the lows of emotional events in their lives. Many women even apologised to me for becoming emotional, before continuing tearfully to tell their stories. Offering reassurance and support, I nevertheless often felt uneasy and responsible for their tears. I also felt for them, felt their sorrow and their joy, at times barely able to stop myself from shedding tears at their recollections and their revisiting of times of great elation or of sadness.

When I began transcribing the tapes I realised the power of their emotions, as my own tears appeared upon re-listening to their stories. I worried at the time that such powerful emotions may not survive the thesis process; that they might become lost in its production. I felt a deep responsibility to these women to use this thesis and subsequent writings to convey the strength of their stories effectively, for increased general and professional knowledge of their experiences, thereby broadening community attitudes, and general and specialist knowledge, and informing adoption policy and practice.

My feelings of commitment to reciprocity were only minimally addressed by giving to participants any information or literature that I had access to, and which interested them. I passed on booklets and pamphlets and poems that other participants had found and treasured, and I copied and distributed newspaper clippings. I also shared with them any emerging themes and patterns from the previous interviews. I often spoke about my own family and life events.

During this collecting phase the misunderstanding over my topic, and the associated comments, continued. These included the by now common comments "do you mean a study on relinquishing mothers", plus a written comment from an academic which stated "I don't know why you'd want to do research on them" (her emphasis) and included comments from two birth mothers that they were "the ones who were forgotten" (when an item had appeared in the Townsville Bulletin about my proposed research study including a comment that adoptive mothers were the forgotten ones). Additionally, a query from a student who came to ask me for some help with a presentation on grief, loss and adoption was (concerning adoptive

parents): "why would I want to include them, would they fit, this is about grief and loss"?

The comments from the birth mothers saddened me but this particular study could not include their stories. The other comments irritated me at times, but in some ways they were reassuring; if there was such a lack of understanding of the perspective of adoptive mothers, then more knowledge and awareness must be needed.

### **Integrity and Reflection**

I have strived to portray faithfully the experiences of the participant adoptive mothers as they were conveyed to me, and thereby provide a useful means of better understanding their world. However, as Walker (1985) states, people develop over their lives a personal framework of beliefs, attitudes and values with which to selectively and subjectively build meaning into events. This, I acknowledge, also means myself, and during the course of the research I have recalled and pondered on my own confusing feelings of joy, pride, guilt, anger, and distress concerning motherhood, and the shocked realisation of the hard work of mothering; the bitter/sweet reality of being a mother. I wondered how this had influenced my interpretations of these women's experiences and meanings and how my lack of experience as an adoptive mother was blocking my vision of their reality. I acknowledge that on some level my own reality may have been acting as interference in my ability to really understand.

It was never my intention to in any way bestow professional credence upon the emotions or experiences of those mothers who participated in this study. Their stories did not need my validation. However my quest to document their stories, using feminist research principles, I believe, was validating for many of them. It was my intention that this research would make a contribution to the greater understanding of the experiences of adoptive mothers, to capture their view of motherhood, to highlight the similarities and differences of their experiences to all mothers, and to establish their perspective in the adoption and mothering literature.

However, my belief that feminist qualitative research principles and my approach of understanding and validating their experience, was, in reality, facilitating feelings for them of being understood, could be challenged by the comments of several participants.

One participant commented several times that she was "sorry I'm not coming up with what you want", and although I tried to reassure her, she remained unconvinced that she had been "helpful". Similarly another participant said "I know a woman who adopted, and she would have something to say, and she'd probably make a better subject than me in many ways". Both of these comments appeared to suggest that I had projected my need for certain material, and that they felt they had not come up with such material.

On another occasion I felt appreciation for a participant's willingness to persevere to raise my awareness of the depth of her feeling for her child, and for the situation she perceived being forced upon her and her family. She had spent a long time (the interview continued for six hours) trying to convey to me her meaning, and her story, concerning the legislative changes. I believed I had understood her meaning, and wanted to move on, yet I was aware that she was unsatisfied, and unconvinced that I had really grasped her meaning. Not long after the interview this participant wrote to me saying:

"I do think it is difficult to explain to people who have not experienced adoption what it is in reality. For parents, you love the baby placed in your arms. Perhaps Sue, if you looked at one of your own children, and consider that DNA tests one day reveal that the child is not biologically yours, through a mix up at the hospital where the child was born. Ask yourself questions as to how you would feel towards the child, and would you reject it?, Would you go on as usual?, Would you tell them ? etc."

This was a valuable lesson for me. I did imagine such a scenario. I imagined the initial panic I would feel at the threat of anything that could upset the relationship I had with my children, and my anger at anything that threatened to hurt or affect my children in any way, whatever their ages. I imagined my ambivalence over feeling anger, yet a certain understanding of the other mother's needs, but I also imagined that any such feelings may be heavily outweighed by my sense of fierce protective love for my children, for their world, and their feelings, and of their needs and wants. At this point, whilst I realised I could still only imagine how it may be, I felt I perhaps now had a better understanding of this participant's reality.

## Of Social Workers

It seems that some of the adoptive mothers in the study had interactions in the past with social workers which had left them feeling less than happy. Whilst for some, it appeared to be a matter of "it all depends who you get", others felt unhappy with social workers as a whole profession, as these comments suggest:

"Personally I don't think social workers know what they're talking about half the time, social workers need to be true to their own feelings, to realise people feel differently and that's okay, I think social workers need to have more experience, and cadetting them to an older person, and more life experiences" (Annie).

"They said if you have any trouble, come back, but I never would have, because some people have something about the police, I have something about social workers, and knowing what social workers are like, I do not know less than they know" (Nina).

"I told the social worker I thought that there was a lot more to it than we think, the baby in the womb, and she said 'Oh what rubbish', and at the last interview I decided I didn't like her, and my experience with social workers hasn't been improving, oh there are nice ones like in Brisbane, and you" (Rhonda).

It appeared that whilst the participants knew the area of my professional training, my capacity in this relationship, of researcher, allowed them to voice their displeasure concerning some social workers. The above comment of one participant, acknowledging my profession but proposing present company was excepted by suggesting I may have been in the category of nice ones, did not provide the comfort it was probably intended to provide.

## But Who's the Research Really For?

On several occasions after I had told my story in brief about how I became interested in the research, and how I felt committed to challenging current knowledge, assumptions, policy and practice in adoption, and current theories on motherhood realities, and once the interview was concluded, the parting comments of several participants left me feeling uncomfortable. Two such comments at the conclusion of interviews were:

"Well I hope you are successful and get your PhD",

"Good luck I hope it goes very well for you, it's your doctorate isn't it?, well I'll read somewhere about you, ....about Dr Gair".

Such comments, about my personal success, left me wondering if I had been fooling myself and trying to fool the participants; as if my stated reasons for undertaking the research were not really the reasons at all.

### **I'm Not Really That Nice!**

Quite a number of women commented that they couldn't believe it that someone was really interested in their story, and thanked me profusely for undertaking the research. Such gratitude is evidenced in this comment:

"I couldn't believe it when I saw your article in the paper. I said to Geoff look at this, this is exactly what we've been waiting for, someone interested in us. I couldn't believe it. I've always felt there wasn't anything done, they've neglected the parents. Thank you for bothering to listen" (Madge).

Further comments from other women include "I'm glad we've got someone on our side (Dana), and "thank you for being so considerate" (Helena). Two women gave me books, and written on the inside page of one book purchased for me as a gift was: "with appreciation of your caring, love Mavis". Two women hugged me at the conclusion of the interviews. Reflecting on my discomfort over the previous comments concerning the well-wishes for my success, and on the fact that this project was for my personal career advancement, I felt very undeserving and unworthy of these comments of praise and thanks.

Several other comments were less disturbing for me, suggesting beneficial and perhaps therapeutic elements to the research relationship, without the degree of gratitude present in previous comments. These included

"I've thoroughly enjoyed it, it's the first time I've talked to someone like this, you've let me go on, it's been good for me" (Iris).

"Thank you Sue, sometimes people don't listen, but I felt you did, I could tell you things, it's been good" (Carol).

"I think you are very open and willing to listen" (Beth).

"I think you've done a good job, and I think that scale was a really good idea too, now I come to think of it, no wonder I had a lot of stress" (Rhonda).

Additionally, I received this comment (at the time a little disconcerting) from one woman upon my arrival at the second interview:

"Sue I've invited the woman down the road, the one I told you about, because I said to her, it would be very therapeutic for her!" (Dorothy).

From these comments I concluded that at least some of the women had gained as well as shared during the interviews.

### **Of Rapport, Vulnerabilities, Power, and Friendships**

Some feminist research literature (Oakley 1974,1981a) speaks of developing a non-hierarchical relationship, more a shared position of respect and friendship, and of developed rapport and sharing of lives. Creating a non-hierarchical relationship did not seem too difficult to me, and was in keeping with my commitment to feminist principles, and to social work principles. Indeed, at times I reflected that striving to create an environment of equality assumes that the researcher begins from a superior position to the participants, and at times this did not seem evident to me. However I came to realise that the feminist research principle of creating a relationship where inequality is assumed to be greatly reduced, may in effect fail to recognise the enormity of the power imbalance it serves to reduce, denying the huge degree of power inherent in the research relationship and rendering participants vulnerable. This became crystal clear for me in this research when one participant spoke of the power of the researcher. I commented that I had thought, that if the researcher and the participant were from similar social and professional positions, as we were, and if the researcher was aware of maintaining a relationship of equality as I thought I was, then the hierarchical power structure in the researcher/participant relationship could be minimised. This participant strongly disagreed, stating that in this relationship with me:

"there was a power imbalance, because in *this* relationship I am a participant, and an adoptive mother, and you are the researcher" (Maxine).

Too late I realised that I had fallen into the trap of denying that any power imbalance at all could still be very powerful. Further, that in any of my researcher/participant relationships it could not be denied that I had the power because I had the data at my disposal. I was ashamed that something of which I had been aware, critical and committed to avoid, still had eluded my awareness.

An issue of which I had been a little sceptical, was the integrity of setting out to forge "friendships" with participants. I believed that for some participants this may present the danger of a participant revealing to "a friend" more than they would ever reveal to "a researcher". Such a danger may be evident in the one of the above comments

"..... sometimes people don't listen but I felt you did, I could tell you things, it's been good" (Carol).

After this participant's comment I considered that for her, a certain depth of trust had been established, and that this participant felt she had confided in a friend. Her faith in my integrity was humbling, but in a broader context, perhaps such faith could be inherently dangerous for women who participated in feminist, qualitative women-centred research, or in the words of Finch (1984),

"I have emerged from the interviews with the feeling that my interviewees need to know how to protect themselves from people like me" (1984,80).

I felt that purposely forging friendships may be a dishonest way to increase the "richness" of the data. In this research I had strived for the establishment of a contract between the participant and myself where we engaged in interviews in a friendly accepting atmosphere, and where I adhered as much as possible to all the principles of feminist social work research. I was not purposely seeking to establish friendships.

There were episodes which indicated to me the unusual, friendship-like nature of research relationships. One adoptive mother invited me to come and stay in her house by the ocean and "bring the kids for the weekend" (I did not take up her offer but it was a genuine and friendly invitation). Another adoptive mother telephoned my house six or seven months after the second interview to excitedly announce that she was pregnant. She telephoned me again after approximately the same amount of time had passed to tell me that she and her three day old baby were doing well. I felt in this case I was an important person, perhaps not a friend, but a known, interested person, trusted with important news.

The above is not to say that deeper friendships did not form. A friendship did emerge with one participant, a women who is very interested and informed on adoption issues, and whom I met on my initial mission of purpose to her region in early 1993. We engaged in many lengthy conversations about current and past adoption issues, and she was very

warm, knowledgeable, and supportive. The lonely road of the PhD. research did not appear to enable the fostering of many supportive relationships, and I felt this relationship partially fulfilled this role for me. I also stayed in this participant's home when my accommodation plans failed in the town in which she lives, and she came to stay in my house when she visited Townsville. One other participant with whom I had already formed a friendship prior to the interviews taking place, also engaged with me in lengthy discussions on adoption, and this relationship also falls into the category of a supportive relationship for me. I did consider that there were mutual benefits in these relationships, where I gave support, encouragement and my knowledge to their individual adoption situations when it was sought.

Interestingly however, a situation arose for me as researcher, as a direct result of one of these supportive friendships. At the time that I was transcribing the taped interviews with one of these women, I found myself hesitating before transcribing, and thinking I could even disregard some of this participant's comments. When I became aware of my hesitation, I reflected on why I was tempted to do this, and I concluded it was because I did not want this woman to be criticised for her comments. It was a sense of loyalty to our friendship which was drawing me to present the data from her interview in a different, edited way. I began to realise the difficult challenge of presenting the data in a way which validated the experience, and was affirming of the person, whilst highlighting underlying complexities, ambivalence and anomalies in participant's stories. It occurred to me that in forming friendships with participants, other researchers may also need to be alert to any possible desire to present the data in a edited way.

### **Why They Were Participating**

Several women commented on their reasons for participating. These reasons were often to benefit others, and to add to current knowledge, as reflected in these comments:

"Well I think this is really worthwhile research, I thought if my experience helps someone, .... that's why I'm doing this" (Madge).

"I wanted to be helpful, and quite often there are stories, like in Women's Weekly, about relinquishing mothers, and they all send the same message: 'I'd

never do it again'. It makes me really angry, times have changed and so have procedures"! (Lorraine).

"Well I'm helping you because nothing is written about adoptive mothers" (Dana).

"I looked at the article in the Townsville Bulletin and I thought I'll tell *her* (participant's emphasis) the other side of the story, and I just hope people with problems will feel they can talk about them" (Iris).

Such comments also appear to suggest that current images of the adoption situation may not facilitate accurate perceptions, and that the reality needs to be heard.

Some comments reflect more thought prior to participation in the research :

"I walked around for ages with your letter (distributed by an adoption group), we just wanted to forget it, my girls were very worried. I said will I? won't I?, but I thought no-one has really asked us how we feel, .....and that's why I asked you how old you were, what age group, I wouldn't speak to a young one, what do the young ones know?" (Dorothy).

For one woman, who cried throughout much of the two and a half hour interview, the research was perhaps seen as a way to gain political and personal change, and to gain piece of mind for herself and others:

"The biggest reason for me speaking to you was to see if we can change the rule that says adoptive parents can't get information, you see why I put myself through this ordeal? Because if you're doing a survey on it and you come across others who've had a similar thing. It's not the information. I can't be too definite about that. I'm curious but not that curious. I know a lot of adoptive families who are fearful, we would just like to know if there is a veto. I would die happy if I could find out there was no veto and I could tell my son 'they must want to find out about you, go and look and find out "(Helena).

Whilst this adoptive mother adamantly wanted to participate, and she rejected offers to discontinue the interview, her grief throughout the interview was clear, and in part I felt responsible for her distress.

Overall the above participants' comments allude to perceived anxiety, to prior calculations of the risks, and to a willingness to take the risks involved, in order to pursue personal or collective benefits when becoming a research participant.

## **Of Confidentiality as Promised**

As previously stated the issue of confidentiality was one of which I remained very aware. Sensitive to the very personal nature of the information I was requesting, and the historical context within which the participants' experiences of adoption existed, I was very respectful of issues of confidentiality, and maintaining privacy for the participants and their families. A commitment to confidentiality was expressed by me in any initial material which described the proposed research, for example the press release and the letters forwarded by the Department to adoptive mothers, and was expressed in the contract signed by myself and the participant at the time of the first interview. The enormous degree of trust I was requesting, and received, is well illustrated in this written comment:

"Sue, you did promise not to use our names or any identifying information. We sincerely trust you will adhere to this promise to safeguard the privacy we guarded so jealously,..... I can only reiterate, do not use our names or any identifying information" (Flo).

It appears obvious that for this woman, confidentiality was critical, but, she was willing to place her trust in this research. Recognising such trust led me to consider further that participants were willing to take risks, but as discussed above, participants had their own reasons for this. They had calculated the costs and the benefits. While I was absolutely committed to confidentiality, I realised that I not only was responsible for safeguarding the data, but also I was responsible for the benefits as were calculated by participants to be worth the risk. I sincerely hope that the end result is worthy of participants' trust, but my fears are that perhaps I may not have met all expectations.

## **Conclusion**

Overall I feel very privileged to have engaged in interviews with these women, and to share in their recalling of such personal experiences as those discussed during the interviews. I feel most indebted to them for their willing participation, for their openness and courage, and for their direction, concerning their needs and recommendations. As a result of their willing participation I have gathered very valuable and much needed information which will make a contribution to current knowledge in this area.

Speaking of my own personal experience of this process, I have gained immense satisfaction at various points during this journey. The PhD research road has not always been an easy one to travel. However the enthusiasm, commitment and emotional giving of many participants to the study proved encouraging and supportive. Together with my personal sense of justice (that this group had rights to be heard), and my anticipated sense of achievement at the study's completion, the participants' stories provided me with the determination to complete the writing up of the research.

In the following chapters of Part V of this thesis, the findings are presented and discussed.