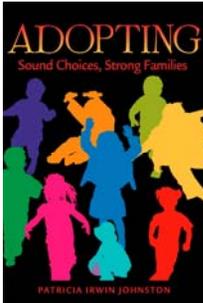




ADOPTION EDUCATION, LLC



This course has been adapted by Patricia Irwin Johnston, MS from Chapter 10 and other sections of her 2008 book ***Adopting: Sound Choices, Strong Families*** (Indianapolis: Perspectives Press, Inc.)

Adopting was awarded the 2009 Benjamin Franklin award from IBPA as the best new book in the field of self-help and a 2010 Mom's Choice gold medal.

OPENNESS IN ADOPTION

1. Introduction
2. A Little Background
3. Should Adoptions Be Open?
4. How Does Open Adoption Differ from "Closed" Adoption?
5. But Does It Always Work?
6. Working Ethically with Expectant Parents
7. Birthfathers' Rights
8. So, When Is He Yours?
9. Full Disclosure
10. The Commitment
11. A Case against Artificial Twinning
 - a. The Issue
 - b. How it Happens
 - c. The Ethical Questions in Virtual/Artificial Twinning
 - d. The Professional View
 - e. A Kids-eye View...
 - f. So You've Already Got Pseudo-Twins. Now What?
12. Parallel Expectancies
13. The Need for Education and Ongoing Support
14. At Issue
15. A Perspective after Living It Both Ways
16. Resources
17. Quiz

TO ACCESS THE QUIZ FOR OPENNESS IN ADOPTION:

After reading this course, please sign back on to www.adopteducation.com. Go to the table of contents and click on the last section. Go to the final page of this section to take the quiz. Click the NEXT arrow at the bottom of the last page to begin question 1 of the quiz.

Openness in Adoption

by Patricia Irwin Johnston, MS

Stop! Don't decide not to take this course because you've already decided that open adoption is not for you or you've chosen intercountry adoption for that very reason.

I've got news for you. That "out" is no guarantee that you aren't going to hear from, or about, a birthfamily. It isn't going to stop "searching" on your child's part either. More and more families are indeed meeting their children's birthfamily members in their countries of origin; more and more young adult adoptees are returning to their countries of origin (often with their adopting parents' support) to try to make contact with birth relatives; and more and more adoptive parents are finding, after their children have been home with them for a while and they are all feeling "entitled," that they wish they knew more, so they are initiating intercountry searches. Funny, how time and experience can change a person's point of view.

You'd better stop now and learn more about openness in adoption, because it may very well be a part of your family's future.

After living with adoption for so long, when I use the word openness in the context of adoption, I may actually be talking about two different things. That's true of many of us who have been working and/or living in adoption for a long time, and that could confuse "newbies" to the adoption world.

The first way I use openness is to describe the concept of families' abilities to communicate without barriers, to their having developed family cultures where children feel that they can ask their parents anything without fear of hurting parents' feelings, or having Mom or Dad dismiss their fears or their discomfort as unimportant. The extent to which families are able to do this is tied into the development of each individual's sense of entitlement (which may be a fluctuating thing) as well as to how successful the parents have been in consistently acknowledging that adoptive relationships and adoptive families are different from families whose connections are by birth (Chapter 4 Adopting: Sound Choices, Strong Families).

The other way that the term openness is used in the context of adoptive family life is to describe the degree to which adoptive families and birthfamilies are in communication with one another—or at the very least have some knowledge of one another.

Because issues around contact between birth and adoptive families remain one of the things that most worry those who are considering adoption (not quite as much as attachment, but close), I suspect that this second use is what most readers are thinking about as they start this course. So that's the type of openness we will be learning about here.

A Little Background

Let's begin with a discussion of the history of adoption and some philosophical debates going on today in order to be prepared to discuss the question of whether you are prepared for an open adoption.

You may be surprised to know that confidential adoption (sometimes called *closed adoption*)—the kind of adoptions where birthparents and adoptive parents have virtually no identifying information about one another and are expected never to contact one another—is actually much newer than is open adoption.

For centuries, in nearly every culture around the world, children in need of parents were cared for by extended family members or someone else known to them in close-knit communities. There was no secrecy about the issue of being

fostered or adopted then, primarily because “everyone knew” who the birthparents of these children in need were and there was no attempt to try to hide the fact that these children were not the genetic children of the family raising them. Social custom was what linked these families, not law. Adoption still works this way in most tribal cultures around the world, and indeed much about this traditional approach to adoption in western culture is like the practice of *kafala* in Islamic culture, in which children in need are taken into guardianship by caregivers. [Huda, about.com's](http://Huda.about.com) guide to Islam, describes the relationship like this.

The guardian/child relationship has specific rules under Islamic law which render the relationship a bit different than what is common adoption practice today. The Islamic term for what is commonly called adoption is *kafala*, which comes from a word that means “to feed.” In essence, it describes more of a foster-parent relationship. Some of the rules in Islam surrounding this relationship:

- An adopted child retains his or her own biological family name (surname) and does not change his or her name to match that of the adoptive family.
- An adopted child inherits from his or her biological parents, not automatically from the adoptive parents.
- When the child is grown, members of the adoptive family are not considered blood relatives, and are therefore not muhrim to him or her. “Muhrim” refers to a specific legal relationship that regulates marriage and other aspects of life. Essentially, members of the adoptive family would be permissible as possible marriage partners, and rules of modesty exist between the grown child and adoptive family members of the opposite sex.
- If the child is provided with property/wealth from the biological family, adoptive parents are commanded to take care to not intermingle that property/wealth with their own. They serve merely as trustees.

These Islamic rules emphasize to the adoptive family that they are not taking the place of the biological family--they are trustees and caretakers of *someone else's* child. Their role is very clearly defined, but nevertheless very valued and important.¹

Customs about caring for orphans began to change in western culture with the advent of the Industrial Revolution. As families moved from an agrarian existence to an industrial one, they also moved away from their extended family—leaving rural areas to find work in rapidly growing cities. It became increasingly common for immediate family groups to be isolated from the support common among extended families. Living in close quarters, in filthy conditions, with contaminated water and food supplies, disease rapidly moved through the quarters of industrial workers. People worked in unsafe conditions, so that both parents and children were at substantial risk of being killed on the job. For the first time, western society saw a need to “do something” about growing numbers of orphaned children.

Orphanages and work houses were the first tries, but conditions in orphanages and workhouses were so bad that “do-gooders” soon intervened, looking for ways to move these children into families. The result, during the first years of the 20th century, was the birth of charities which became child welfare agencies. This was the time of the orphan trains in America. Orphaned children from eastern cities were sent west on the new railroads, stopping at cities and towns along the way, to be “put up” on the platform in hopes that families who had been notified by telegrams to their pastors might adopt them. Some of the subsequent adoptions produced wonderful relationships. Others were little more than indentured servant/owner relationships.

But this trial seemed successful enough that, over the course of about twenty years, adoption became a structured social service with laws in each state which governed how it worked. Parents were matched with children previously unknown to one another, and thinking

1 Huda. “Adopting a Child in Islam” About.com <http://islam.about.com/cs/parenting/a/adoption.htm>

began to change. The new way of looking at things first suggested that children be transplanted from one family to another and not even know that they had not been born to the parents who raised them. This approach seemed to “solve” two social problems: the stigmas of illegitimacy and infertility.

After twenty or so more years, it was decided that children did need to be told of the adoption, but that, in order to protect both adoptees and birthparents from the shame of illegitimacy and to protect the wounded egos of infertile adopters, birth certificates would be amended to pretend that adopters had given birth to these children. Under this system, in order to prevent competition between parents and confusion in children, adoptive families and the birthfamilies would never meet one another, nor would they have identifying information about one another.

This was the way adoption grew for about half a century. Even as societal changes made the stigma surrounding both infertility and illegitimacy all but disappear, the majority of adoption agencies continued for decades to support the idea that birth and adoptive families should not be in communication with one another throughout the child’s growing up years.

At the same time there was a slowly shifting attitude about whether or not adult adoptees should have access to identifying information about their birthparents. Beginning in the 1950s with adoptee Betty Jean Lifton and her organization Orphan Voyage, a gradually increasing number of people—adult adoptees, adoptive parents, birthparents, and professionals—began challenging the wisdom of maintaining secrecy and anonymity in adoption across the life span. They pointed out that many adoptees experienced significant confusion during their adolescence, and later as they struggled to understand who they were and why adoption was planned for them. By the 1970s, this led to ongoing discussions about whether there was a need for more openness in adoption. Although the debate often got muddled, in reality there were several separate issues involved here.

One issue came out of the research revealing confusion among adopted children and related to David Kirk’s Shared Fate theory (*Adopting: Sound Choices, Strong Families*, Chapter 4). Families forge stronger, more empathic relationships when they acknowledge differences in adoption with relative consistency. This calls for establishing an open communication style--a family climate where asking questions and talking about feelings and fears is encouraged and supported. This element of the openness debate has certainly reached maturity. Open communication is universally accepted by experts and taught to adoptive families.

A second issue related to openness in adoption was (and remains) the debate over access to records for adult adoptees and/or to birthparents of adult adoptees. This debate has been raised in legislatures throughout the U.S. for 50 years now, with very slow progress. In most states “progress” on this issue is represented by the establishment of rather restrictive, difficult to use, and poorly advertised mutual consent registries, which require that all parties to an adoption register their consent to and interest in contact before records can be opened, and then only after the adoptee has reached majority. Even now, 25 years after open adoption began to grow slowly more common only one state legislature, Illinois’-- has even been willing to declare that records will be open to future adoptees and birthparents after X year.

A third issue pertained to just how much information families should be given about birthfamilies and the earlier life experiences of older children who are being adopted. Law has now established that agencies are bound to share all information to which they have access (short of identifying information) with adoptive parents of waiting children. Failure to disclose important information has been the basis for several successful wrongful adoption lawsuits.

The fourth issue is the debate over whether birthfamilies and adoptive families should be in communication from the beginning of an adoption and perhaps throughout a child’s growing up years. In order to deal with the last issue, which is really emerging as the predominant style of domestic adoption, we need to give careful thought to the other issues. While extremist proponents of one view or the other often see these issues as one and the same, many adoption

educators—and I am one of them—feel that, while they are interconnected, they are indeed separate, and that it is possible to feel quite differently about each matter.

Opening adoption records to adults continues to feel uncomfortable to many people, including adoptees and birth parents. The central concern is no longer the fear that there is something intrinsically harmful to anyone in the adoption triad when they have contact with one another as adults. Contacts have been made outside of the system and records have been opened in some official way in several countries and in some U.S. states for a long enough period of time now that there are some things we know. We know that the majority of adoptees and birthparents living in places where records are accessible to them if they wish do not choose to make use of this access. But we also know that for the adoptees who do wish this access and are denied it, the ramifications of this lack of control over an issue as basic as the facts about their genetic identity can sometimes be overwhelming and almost disabling. We know that in the overwhelming majority of meetings between adult members of birth and adoptive families not only has there been the relatively successful formation of new relationships, but also that the relationship between adoptee and adoptive parent has been more often strengthened than impaired. On the other hand, we also know that there are birthparents who do not wish to have contact with their adopted-away children, who have been promised privacy and wish to keep it, and who may not even have told anyone else (parents, husbands, subsequent children) about the adoption.

All of which leads us to the question most debated of all.

Should Adoptions Be Open?

There are so many myths about open adoption. Let's look at some.

MYTH: Open adoption is co-parenting. I don't want anyone else to interfere with my family.

FACT: Open adoption is not offered as an opportunity for birthparents to continue to parent their children. Once an adoption is finalized, the adoptive parents are legally that child's only parents, able to make all decisions on behalf of their children without interference. In this regard, open adoption has nothing at all socially or legally in common with co-parenting agreements when parents divorce. Instead, open adoption is based on the goodwill belief of two families that the best interests of a child are served when he has access to information. Healthy, well-planned, and open adoption has clear boundaries which have been discussed and agreed upon by birth and adoptive parents with the support of experienced professionals.

MYTH: Open adoption solves all children's adoption-related problems and ends the birthparent's feelings of grief and loss.

FACT: Open adoption is not a panacea. Nothing can "stop" feelings of loss other than healing support. Adoption is a unique family structure with its own challenges. Open adoption may help children answer some of their questions about their identity, but, as in all family relationships, access to birth families doesn't mean that relationships with them are always easy. Relationships take work.

MYTH: Open adoption confuses children about who their "real" parents are.

FACT: All adopted children must at some point grapple with the fact that they have two sets of parents and two families—one by birth and one through adoption. Research over a full generation of open adoptions demonstrates that children rarely are confused by having relationships with members of their birthfamilies and that adoptive parents, too, have fewer fears about birthparents when they are known to them.

MYTH: Seeing her child, and knowing where we live, will just deepen a birthmother's grief and make her likely to want her child back.

FACT: Birthparents make adoption plans because they want what is best for their child. Having information, pictures, and contact, as opposed to fantasy, can only reduce curiosity and deepen a sense of reassurance that the plan was a good one and the child is doing well.

How Does Open Adoption Differ from “Closed” Adoption?

For nearly 30 years now—a generation and a half—a handful of pioneering agencies scattered from Michigan to Texas to California have been offering varying degrees of communication between birth and adoptive families in what has come to be called open adoption. As their system proved popular and successful with birthparents, who had begun to abandon adoption planning under the closed system, other agencies followed the trend. Even now, however, the spectrum of openness ranges from a one time exchange of letters without identifying information to what the experts in the field define as *continuing open adoption*: the ongoing back and forth sharing of information between an adoptee and his families of birth and adoption, designed to foster communication and cooperation for the adoptee’s benefit throughout the lifespan.

As openness has matured over time, researchers have been watching to see how relationships work, and most are doing fairly well. In domestic infant adoptions today, it is almost a minimum standard that most birthparents examine profiles of prospective adopters and then have an opportunity either to meet them face to face or to speak with them over the telephone. Once that connection is made, it almost always continues for the remainder of the pregnancy. That’s where things might begin to follow several different paths.

- Some birthparents believe, in their grief, that ongoing face-to-face contact with their child would be too hard on them. Most of these don’t just disappear, though. Instead, they elect to ask that periodic updates and pictures be sent to them via the intermediary. Sometimes the adoption continues like this for the child’s entire growing up years, or at least until the child begins to ask for more information. Sometimes, after having time to heal, the birthparent(s) may come back to the intermediary and suggest that they’d like to reconnect with the family.
- Some participants in open adoptions feel confident about continuing the relationship on their own and commit to staying in touch—mostly by letters and emails or telephone—for years. They do so in a casual, not particularly close, way. Many ebb and flow. Since contact doesn’t feel intimate, these kinds of relationships tend to offer any participant not feeling fully satisfied by or valuable to the relationship “easy outs.” “Well, she never answers my notes or responds to the pictures, so why should I keep sending them? She must have moved on.” Or “The family just seems so busy! He doesn’t have much to say to me when I call, so maybe, since he’s doing fine, I should just let him decide when he wants to talk to me.” Based on purely anecdotal evidence from the many agencies I have worked with and the many families I know, I suspect that most open adoptions right now are pretty much like this.

Advocates of open adoption would say of the two styles above that it’s great to see adoptive parents and birthparents in contact with one another, but that no adoption is genuinely open unless the children themselves are actively involved. That usually works like this.

Extended family relationships are those that most advocates for open adoption would say are the ideal. In these open relationships, families really do merge, at least to a noticeable extent. Birthfamily is invited to birthdays, adoptive family is invited to graduations and weddings, and even extended family members know one another well enough to chat comfortably at gatherings they both attend. Most of the time, these relationships wind up with birthparents being a lot like favorite aunts and uncles in genetic families, and while half siblings sharing a birthmother but not an immediate family rarely see themselves as “brothers and sisters” in the classic sense, they are at least as close as first cousins. As in all families, there can be disagreements. Teen years can be especially challenging, since teens don’t even want to be with their moms and dads on weekends when visits typically get planned; they’d prefer to hang out with their friends.

What’s most interesting to know about this generation and a half of open adoption is what the researchers who have been following families over time have found. Drs. Ruth McRoy of the

University of Texas and Harold Grotevant (originally from the University of Minnesota and now at University of Massachusetts Amherst) and their grad students have been following a sample of families in diverse geographic areas and serviced by more than one preparatory placing agency since their children were placed. They've interviewed and surveyed birthparents and adoptive parents several times, several years apart. What they've found is that most everyone feels the kids are doing fine and, beyond that, *almost all birthparents and adoptive parents are satisfied with whatever level of openness they personally chose and agreed to*—whether really open, or not so much so.² Being well-counseled and feeling empowered seems to have worked for these families.

But Does It Always Work?

Though you have probably heard them referred to as *closed adoptions* more frequently, adoptions which involve no sharing of identifying information between birth and adoptive families are called *confidential adoption* by their supporters.³

Proponents of confidential adoption⁴ argue that not all birthparents and adoptive parents would be able to form successful relationships, and that is certainly true. Unless both families have been well-counseled, both families have respect for boundaries, and unless birthparents are emotionally healthy and are not abusing substances, there can be serious problems with openness. Mediators cannot be accessible to help deal with emotionally needy or mentally unbalanced people 24 hours a day. This is another reason to use well-trained professionals when planning adoptions. Experienced professionals are in the best position to determine whether openness can work with a particular situation.

Some children come to adoption from dangerous, abusive, or neglectful situations. Certainly unless those problems have been solved, it could be unsafe for these children to have their birthparents involved in their lives. On the other hand, it is often possible for the adoptive families of these children to forge important supportive and productive relationships with extended birth family members of the child—grandparents, aunts, uncles- much to his or her benefit.

After a full generation of practicing openness in adoption, we do know that it is working for most families who have been well- prepared and supported. Careful objective analysis may at some point in the future give us clearer answers about the long-term effects of openness on children, birthfamilies, and adopting families. As previously mentioned, the work of professors Ruth McRoy (University of Texas) and Hal Grotevant (University of Minnesota, now University of Massachusetts Amherst) is ongoing. Preliminary findings seem to indicate that families operating in the mid-range of openness tend to be more satisfied with their arrangements than are the families on either end of the spectrum. On the other hand, Marianne Berry's study suggests that, while adoptive parents are often uneasy about open adoption, those who practice it feel more settled over time and, in fact, the more direct and the more frequent the contact, the less worried the adoptive parents are about being entitled to the child.

What is important for each parent to keep in mind while sorting through whether openness or confidentiality are appropriate for your family, is that what is best for the child who will be adopted needs to be central to the decision. Frankly, it matters little whether birthparents would like an open adoption if it is not in the child's best interests. It matters little if prospective adopters want to put the birthfamily behind them and pretend that they don't exist if it is not in the child's best interest. Children are the most important clients in adoption.

² Grotevant, Harold D. and Ruth G, McRoy. *Open Adoption: Exploring Family Connections* (Sage Publications, 2000)

³ McRoy, Ruth G. and Harold D, Grotevant *op cit*

⁴ Critics prefer to use the more negative term *closed adoption*. In a parallel action, opponents of open adoption refer to it as *experimental adoption*. In this course, in both this instance and elsewhere, I have tried myself to use whichever language the proponents of a system prefer. I believe this is the fairest way to promote communication and discussion of an issue. In the same vein, were I writing about abortion, I would use the terms *pro-life* and *pro-choice* as the terms self-selected by those sharing each of these philosophies, rather than to label groups *anti-abortion*, *anti-choice*, or *anti-life*.

Working Ethically with Expectant Parents

Those exploring adoption hear these days about scams which allege that women claiming to be birthmothers victimize desperate would-be adopters. A number of media outlets have covered stories about these kinds of scams, both domestic and intercountry. The scenarios include

- Women who are not pregnant, but are claiming to be pregnant, who scam one (or more) set of prospective adopters for support money. (Often adopters are later told that there has been a miscarriage or neonatal death.)
- Women who really are pregnant, but who have no intention of making an adoption plan working (almost always long distance) with several agencies, facilitators, or attorneys and collecting support money from all.
- Scammers from foreign countries (frequently African, or Asian or Eastern European nations) claiming to be needy birthparents interested in placing children in the U.S.
- Scammers from foreign countries claiming to be American expectant mothers and identified as foreign only by careful examination of the hidden headers which track their email.

This is unconscionable behavior, but it is real. These people, however, are not a norm. Later sections of *Adopting* discuss how to avoid such scams.

There is little public discussion, though, about adoptive parents who misbehave. We're going to talk about that here.

Birthfathers' Rights

A case from the media involving birthfather rights (among other legal issues) will be familiar to many readers.

A couple from Michigan (where independent adoption is not legal) feeling that the agency process was too long, decided to go to Iowa—a state which not only allowed independent adoption, but also allowed non-residents to finalize their adoptions there—to adopt a newborn privately. They were matched with an uncounseled birthmother who had decided that she did not want the father of her child, with whom she had broken up, to know about the pregnancy and the adoption. She named another man as the father and signed her consent 40 hours (rather than Iowa's required 72 hours) after the baby was born. The adoption attorney (who was representing both clients) accepted these decisions without question.

Within days, the birthmother had a change of heart. The adopting couple would not return the baby and fled to Michigan. The grieving birthmother contacted another attorney, who recommended that she contact the baby's actual birthfather and have him file a fraud action, since he had not been notified of the pregnancy.

A court battle ensued, during which time the adoption was never finalized, but custody of the little girl remained with the Michigan couple. Nearly three years later, after court decisions and appeals, the child was finally ordered returned to her birthfather, who had married the child's birthmother and had another child with her.

Print and visual media coverage plastered pictures of the screaming child "ripped from her adoptive mother's arms" and taken away by her birthfamily. No matter whose "side" they were on, the general public could only agree that we were witnessing a genuine tragedy.

Both sets of parents eventually divorced. This child now lives with her birthfather and her sister. She appears to be doing well.

For years in many locations it was common advice from lawyers and social workers counseling birthmothers who were strongly against bringing their child's birthfather into the decision-making process to follow the letter, but not the spirit, of laws granting birthfathers rights in an adoption. By claiming not to know who the birthfather was or where he was, and by attempting to avoid letting him know about the pregnancy, birthmothers could enable adoption facilitators to use legal loopholes that allowed for all but anonymous and all but buried "advertising" for birthfathers to come forward if they wished to claim their parental rights. Some birthmothers, as in the case above, were allowed—or even encouraged—to go so far as to lie, naming a cooperative friend or duping another man into believing he was the birthfather so that he could sign off, leaving the birthmother to make the adoption decision without the actual birthfather's knowledge. This approach is neither ethical nor child-centered, but it has continued to occur, and it puts adoptions at risk.

Sure, birthmothers might feel at first that it would be "easier" if they could decide about adoption without involving the birthfather at all. This becomes especially true when a large part of what has led a birthmother to explore adoption has been that she feels betrayed or abandoned by her child's birthfather. But the child's needs for permanency now and his possible need for information later demand that each birthparent's parental rights be transferred in a straightforward and honest fashion. Not to deal directly with the issues of a father's parental rights creates shadows which may loom over the adoption for a long time to come.

To deal with these risks, and acknowledging the difficulty of contacting fathers who do not stay with their sexual partners or may have had an extra-marital affair with a married woman who becomes pregnant, several states have established *putative father registries*, which outline a legal process by which men who may have impregnated a woman and want to protect their parental rights, can insure that they are notified when a sexual partner has given birth and is considering an adoption plan. These laws vary from state to state, and it is wise for would-be adopters to be aware of how they work in any state touching their agency or independent adoption.

Adoption practitioners who are child-centered would never suggest an end run around either birthparent's parental rights, and yet there are adoption practitioners who do so routinely. One western state is known to have particularly relaxed attitudes about termination of parental rights. According to a 2004 column in the *Chicago Sun-Times* by Mary Mitchell⁵ every year hundreds of birthmothers are flown to this state at agency expense to terminate their parental rights in a state which does not require contact with the birthfather unless he has established a relationship with the mother and the child. Indeed some adoption attorneys and agencies in other states have been encouraged to "run adoptions" through an attorney in that state even in circumstances where nothing about the adoption—not the baby's place of birth, not the birthparents' or the adoptive parents' places of residence—are in this state. Birthfathers in at least five states have lawsuits going in this state. If any adoption provider suggests looking outside the states where you and a child's birthparents live to avoid "adoption unfriendly" laws, I hope that you will run, not walk, to another service provider!

Because most of these cases make news headlines, eventually the children at their centers will need and want more information about them. How does an adoptive parent explain to a young adult their rationale for having created an unnecessarily lengthy period of limbo in his life? For having felt such disrespect for the rights of his birthparents as to have held him hostage in hopes that a court would disregard the law to allow them to "keep" him?

⁵ Mitchell, Mary. "Utah's adoption laws ensnare poor parents here." *Chicago Sun Times*. January 15, 2004.

So, When Is He Yours?

Making adoption permanent as quickly as possible is definitely child-centered thinking. What's less clear, however, is how to make that happen while still protecting the parental rights of genetic parents. Adoption does involve emotional risk for those who would become parents in this way. The bottom line is that adoptive parents do not and cannot become legal, permanent parents until both birthparents' legal rights have been cleanly terminated—voluntarily or by court revocation.

Recognizing that children are best served over a lifetime by having made as few caregiving and attachment figure transitions as possible, public agencies have been recruiting foster-to-adopt families for some time now. Since many of the children served by public agencies are toddlers and older, removed from situations of abuse and neglect, these hopeful parents take the substantial emotional risk of parenting these children while their birthparents are given the opportunity to rehabilitate themselves and reclaim their parental rights. More and more public agency foster parents are fostering in hopes of adopting.

Not wanting to accept the emotional risk inherent in such a situation is one of the reasons that many readers of this book look instead at either private agency or independent domestic adoption, or at intercountry adoption. These options are often less emotionally risky for parents-to-be, but they put children at substantial risk. Here's why.

Practitioners of genuinely child-centered rather than adult-centered adoption know that pregnant women considering adoption (and their partners, when available) need a minimum of several weeks of careful counseling by an adoption-experienced trained mental health or social service professional, and sign voluntary termination of the parental rights only after they are clear about their ultimate decision. Then follow-up with these mothers is needed to provide post-placement grief counseling for those who made placement plans. When birthparents approach their chosen adoption practitioner at least by the end of the seventh month of their pregnancy and take advantage of these counseling services, the period between birth and irrevocable termination of parental right can—and should be very, very brief—a matter of mere days, not weeks. These optimal situations result in direct placements and avoid the confusion of foster care (sometimes called cradle care) for the baby.

Sometimes, however, women experiencing an untimely pregnancy put off investigating adoption, making a first contact with a placement professional days before giving birth or even after delivery, often through a hospital's social service staff. Most often these last minute adoption decisions happen because these mothers have hoped against hope that they could avoid making this difficult choice. Perhaps the birthfather will step forward and propose marriage. Perhaps new grandparents will agree to support mother and baby. Perhaps she will find a way to support herself and her baby alone. In these situations, because birthparents have not had time to avail themselves of needed counseling about their options and the aftermath of any of the decisions they make, ethics should demand that this mother have professional counseling and support for a time after her baby's birth before terminating her parental rights.

But what happens to the baby? Sometimes the stressed birthmother and/or her family care for the child during this period. Sometimes, (mandated in the state of Wisconsin, but offered by few agencies in other states) the child goes to an experienced cradle/foster care home. Ideally, in a child-centered adoption, that trained foster care would be provided by agency clients hoping to adopt a newborn—this newborn—should her birthparents make an adoption plan.

Most often in these situations, however, the child is placed with an adoptive family and birthparents are given little to no counseling. The result can be an adoption at risk. When such adopters don't understand the value of—or even deny the reality term of that “change of heart” or “cooling off” period before termination of parental rights, they can be thrown completely off kilter by a change of heart. In crisis, they are prone to accepting the advice of less than ethical professionals to refuse to relinquish the child and take the battle to court. And even when

adoptive parents do “understand” the concept—it can still be emotionally devastating to handle a change of heart.

This scenario has been repeated several times in the last two decades—always in situations where parental rights were improperly terminated and/or in which birthparents and adoptive parents received less than optimal professional services!

In 2006 a single woman from a Mid-Atlantic state decided that she had waited too long for a parenting partner and did an IVF with donor sperm. She then developed a medically and emotionally debilitating pregnancy-related condition called hyperemesis gravidarum which kept her in pain and bedridden throughout her pregnancy. After a difficult birth, and possibly in a state of post-natal depression, she signed a voluntary relinquishment of her parental rights in favor of an open adoption with a family introduced to her by a friend. Twelve hours later, she asserted that she had done the wrong thing.

The adoption was done in a state different from the one in which the birth and adoptive parents live. Then the birthmother was charged with international kidnapping after taking the children—while on an allowed visit—to Canada. The kidnapping case has had the birthmother in jail without bond for over six months, and the adoption case had continued in dispute for over two years as I wrote *Adopting*.

In 2007 an Indiana couple adopted a baby from Ohio in a situation where the birthmother was married but had conceived the child outside her marriage. Despite knowledge of the circumstances of the conception, the attorneys and agency involved did nothing more than have the “legal” father (the birthmother’s husband) sign off. The birthfather came forth to assert his rights well within the time frame of the putative father registry, and a different court gave him custody of the child. The adopting family continues in October 2010 to fight the ruling of the Ohio Supreme Court that the child be gradually returned to his birthfather.

Despite their claims (and perhaps even despite their heart-felt beliefs) adoptive parents are not really acting in a baby’s best interests when they fight such a case. No matter who wins a legal battle in such a situation (and it is most often the would-be adopting parents), it is the child who is likely to suffer most.

Though some advocates have been outspoken in their opinions about how hard a move from their known home with adopting parents back to their birthfamily will be on a child, little has been written about the possible long term impact of such a battle on a family when the adopting parents ultimately “win.” These cases are never decided swiftly. They create many months or even years of emotional limbo. Adopting parents are under a great deal of stress and pain. They may feel anxious and even desperate. Such stress in the family is nearly impossible to hide from a young child, even when parents think the child is too young to understand what is going on.

Might not children at the center of such Solomon-and-the-two-mothers scenarios be best off in objective foster care while the outcome is decided? Without access to the child, might both sets of feuding parents see things more clearly and from a more child-centered view? Most of all, should not judges in such cases behave more like the biblical Solomon, deciding the case quickly?

Full disclosure

Child-centered thinking demands that adoptive parents be completely honest with birthparents. A profile need not and should not contain lies or half truths. An agreement about confidentiality or openness should be heartfelt and honest.

As the single parent of a toddler, my friend, Moira, made the courageous choice to plan an adoption for her second child. She did a lot of research first. Since she

was already parenting a child, Moira knew what it would be like to parent again and she felt she couldn't handle two children as a single mom. She also realized that she could never choose a babysitter for her toddler sight-unseen, and so it became clear to her that she would not be able to live with an adoption plan for her coming baby unless she had a hand in selecting her baby's parents-to-be.

At a time when open adoption was still very new and agencies in her area were not doing it, Moira chose an attorney who would help her to find a couple willing to maintain a confidential, but communicative (through the attorney), adoption. Neither Moira nor the adopters had counseling, but they met several times (sharing no last names) and Moira was convinced that they shared common goals.

After her baby's birth and placement, things went well for a while, and, despite her predictable grief, Moira continued to feel that adoption had been the best choice for herself, her new baby, and her older child. But soon the adopting parents who had promised letters and pictures began to default, using as their excuse that they wanted to control what Moira did with any pictures and letters they sent (specifically, they wanted to tell Moira whether or not it was okay to share these with the child she was parenting). Later they made it clear that they had not been sharing Moira's annual letters with their son, and—despite their preplacement agreement—did not intend to do so until he was 18.

When their son was about 6, Moira convinced his adoptive parents to go to a mediator with her to try to work these disagreements out. The mediation did facilitate some communication, all right... it enabled the adopting parents to share even worse news: they had known that they were pregnant when they adopted Moira's baby, but had chosen not to tell her because they had feared that she would change her mind about adoption. Subsequently they had given birth to other children, but, because their letters and pictures had been carefully edited to exclude these siblings, Moira had always believed (with some sadness) that her son was an only child.

Moira was shocked and dismayed, not by the fact that her son had siblings—she had hoped that he would have siblings someday—but that for several years the people to whom she had entrusted her baby had been carrying on an elaborate fiction with her. She felt betrayed.

In competing to get a baby at any cost these adopters had created a far worse problem than they realized. In the name of protecting their son and defending their parenthood they planted a land mine. The son they love and who loves them learned about their deception of his birthmother and her resulting shock and pain when he made contact with her in his 20s. He was furious. He, too, felt betrayed.

His adoptive parents had not been not well-prepared for what adoption itself means in the lives of all who are part of it. Their lack of good education and their fear led to one lie after another, and the accumulation of their own lies was responsible for a nearly irreparable rift in their family.

Moira's situation is far from unique...

Joanne's second child was born with a chromosomal abnormality. After much agonizing she and her husband decided that they were simply unable to meet his needs. They decided on adoption and soon met, interviewed and selected a couple who agreed to openness which included letters, phone calls, and visitations. Four years or so into the adoption, after many months of attempting to arrange a visit, Joanne was told that the adopting parents had no intention of

having any further visits, and that in fact they did not intend to tell their children, including Joanne's son, that he had been adopted.

Joanne had absolutely no recourse. Agreements in open adoption are not, in most states, legally enforceable (though, thank goodness, most families consider them morally obligatory). Today Joanne's regrets involve her older child. She had expected that she could be honest with this child about the baby for whom adoption was planned.

Though we hear only one side of these stories, I have great difficulty understanding how adopting parents can betray the trust of birthparents and expect to remain unscathed. Though the explanations in most such cases claim that these parents are working in the baby's best interests, it's hard for most of us to understand how betraying the trust of a functional and cooperative birthparent is in anyone's best interest. Too many of the cases like this that I've heard about or observed involve no ongoing professional support for the two sets of parents and the child they have in common. Realistic preparation of birthparents and adoptive parents by well-educated, experienced adoption professionals and the commitment of such professionals to ongoing education, mediation, and support services is a vital part of child-centered adoption.

The Commitment⁶

What's wrong with this picture?

Bob and Alice met through a popular dating service. Each had signed up—a bit reluctant at first—at the urging of friends. Each worked carefully on a “personal profile” to be posted for others to see. Each was “matched” a few times; sometimes those matches “clicked” and sometimes they didn't. When Alice emailed Bob in response to his profile, and he returned her email promptly, she considered this one a “clicker” and so did he. They emailed for several days, graduated to phone calls, and decided to meet. The meeting went well and led to several months of casual dating while each dated others as well. Then came a moment of truth: Bob and Alice decided that they loved one another and were meant to be together. They decided to marry and set a wedding date several months in advance. Each worked on the details of their coming wedding—there were bookings to be made, a caterer to choose, invitations to order, living arrangements to decide, and more. One day, however, Bob was shocked to discover that Alice was continuing to date others! When he confronted her, her surprised response was, “Bob, I'm so surprised at your lack of understanding about this! I'm 40-something and the clock is ticking for me. I've had one marriage fail already. Surely you don't expect me to put my partner-finding hopes on hold because we're engaged. What if you change your mind before the wedding or right after? I'd be back at ground zero. Besides, I'd be very happy to have both a husband and a lover. Why is this a problem for you? Our life will be wonderful.” Bob broke the engagement. Alice was stunned.

Now make a minor adjustment or two and read the anecdote again.

A pregnant woman and would-be adopters met through a popular matching service. Each had signed up—a bit reluctant at first—at the urging of friends. Each worked carefully on a “personal profile” to be posted for others to see. Each was “matched” a few times; sometimes those matches “clicked” and sometimes they didn't. When these particular would-be adopters emailed this pregnant woman in response to her profile, and she returned their email promptly, they

⁶ “The Commitment” first appeared as an article in *Adoption Today* magazine's January, 2001 issue.

considered this one a “clicker,” and so did she. They emailed for several days, graduated to phone calls, and decided to meet. The meeting went well and led to several weeks of conversation while each talked to others as well. Then came a moment of truth: this pregnant woman and these would-be adopters decided that theirs was the right match for the coming baby. They decided to plan an adoption. Each worked on the details of the pending birth—there were doctors’ appointments to go to, baby-arrival arrangements to be made, classes to take, post-adoption planning, and more. One day, however, the expectant mother was shocked to discover that the adopting parents were continuing to circulate their profile online and were continuing infertility treatment as well! When she confronted them, their surprised response was, “We’re so surprised at your lack of understanding about this! We’re 40-something and the clock is ticking for us. We’ve had multiple miscarriages and a failed adoption. Surely you didn’t expect us to put our baby-finding hopes on hold until after you give birth. What if you change your mind before the birth or right after? That would put us back at ground zero. Besides, we’d be very happy to have two children. No problem for us. Why is this a problem for you? We’ll have a wonderful life.” The birthmother broke the adoption plan. The would-be adopters were stunned.

Interestingly, though readers would almost universally criticize Alice, and understand Bob’s position and decision in the first anecdote, many would-be adopters—and even a very few adoption service providers—would have a hard time seeing the parallel in the adoption anecdote. Yet the problem with each picture is the same—two vulnerable people in crisis think that they’ve made a permanent commitment to one another, and the failure on the part of one party to fully commit to the other has led one party to feel irreparably betrayed.

I’ve been putting myself on the line for years with my child-centered position. It is important for would-be adopters to do their basic adoption decision-making as early as possible in the infertility treatment or family-planning process and to put adoption itself and then various styles and approaches to adoption in or out of the mix while still in treatment. Then, no matter how large they hope that their family will actually grow, to actively pursue (the key word is “actively” here) only one family-planning option at a time. Engage in treatments. Plan a private adoption. Accept an intercountry referral. But do so one at a time.

The core of my beliefs on this topic is this: Every child deserves to be wanted, to be dreamed about, to be prepared for, for who he is and will become, not as a substitute for a child one might have had, not as a prize in a race to see how quickly one can become a parent against great odds. The biggest difference between the two anecdotes shared above is not with the adults involved at all; the adoption story would be just as applicable to single adopters as to coupled-adopters. Instead the most important difference between these anecdotes is that the various possible outcomes of the adoption story each put an innocent child at substantial, and completely avoidable, risk. At risk how?

- At risk physically because of the hormonal effects (increased cortisol and other stress-produced hormones) on his prenatal environment of this confusion and betrayal to his already-stressed expectant mother.
- At risk because his adoptive parents didn’t “believe” enough in his coming to fully prepare themselves (through a psychological pregnancy), their home, lives, and their family and friends for him and him alone, and so they may be slow in developing a comfortable sense of entitlement and/or attachment.
- At risk for the negative effects of being “artificially twinned” (see section which follows)—parental stress and divided attention for the first few months after birth are obvious, but artificial twinning carries potential long-term problems, too.
- At risk because his birthmother may or may not be able to resolve this crisis in his best interests over either the short or the long term. What if her sense of betrayal leads her to decide that the falling apart of a carefully made adoption plan means that adoption itself

was the wrong choice; will she be prepared to parent effectively when she didn't think she was before? Even more, might she feel powerless, in the face of crisis, to change her mind and feel "forced" to place her baby with people she no longer trusts? What if she does say no to the first couple and follows through with a plan for adoption; will she have enough time and support to find another couple without feeling "pushed into it"? Will the second-chosen adopters have enough time to prepare adequately? Will the birthmother regain her ability to trust?

Many of the most important developments in the lives of adults require sacrificial commitment, but none more so than parenting. Parenting requires putting the short and long term needs and best interests of a child far above the short-term wants and conveniences of the adults in his life. Birthparents who choose adoption certainly recognize that, and in doing so set aside short-term emotional and physical comfort during pregnancy and their long-term emotional desires to parent for the long-term best interests of a baby born when they simply were not prepared to parent that child effectively immediately. Because they are thinking in a child-centered way, birthparents choose a permanent solution to what, for them (but not for Baby) may well be a short-term problem.

Adopting parents must be prepared to make similarly difficult choices. They must risk experiencing devastating emotional disappointment by preparing for a single child's arrival in their lives. Once matched with a particular pregnant woman or having accepted the referral of a child waiting for them in another country, unless they are able to set aside treatment (at least until they and their child are both ready to add a sibling to their families), and set aside other adoption possibilities to focus on this single opportunity, they are not committed to adoption. Adoption is not about the wants of adults. It's about the needs of children. When those wants and needs come together unselfishly, we have commitment.

A Case against Artificial Twinning⁷

While we're talking about what ways parents-to-be use to increase their odds of adopting children faster, I'm going to open an unpopular subject among family-challenged people trying to build a family. This is a subject often met with angry defensiveness by people who have already built their families in exactly the manner I argue against here. Given that for a long time now I've been seen by most advocates of the infertile and many couples themselves as a hero of sorts—one of those outspoken and visible few who can be counted upon to defend and argue the position of infertile people facing a world which doesn't "get it"—it was not easy for me to decide to become so public on an issue of such controversy. While I'm used to having professionals in the fields of infertility and adoption occasionally mad at me when I take them to task in their treatment of their clients, to have family-challenged people—no matter how few—react angrily is more difficult to accept.

But the topic at hand is an important one. And the reality is that, having struggled through the thicket that is challenged family building, I'm far enough into the completely different journey that is parenting that I've come to believe that the best thing I can do as an advocate for you is to be, first and foremost, an advocate for the children you will someday parent.

So, dear reader, be prepared as you read what follows to experience an intellectual "itch" about the subject of artificial twinning that will demand that you "scratch it" by thinking carefully

⁷ "Instant Family? A Case against Artificial Twinning" appeared in articles in *Adoptive Families* magazine, Pact Press, and Serono Symposia USA's newsletter *Insights into Infertility* before becoming part of *Launching a Baby's Adoption* and then this book.

about why it upsets you so much. That kind of deep thinking is what helps us really to understand ourselves and to build our personal convictions. While you read what follows, I urge you to try to do so not with attempted objectivity...objectivity is the opposite of my point here...but instead to listen with subjective compassion for the children you so very much want to parent.

The Issue

Artificial twinning, false twinning, virtual twinning, and pseudo-twinning are synonymous terms coined to describe the increasingly frequent situation of genetically unrelated children born very close in age (less than eight months apart) to different birthparents being raised as siblings by the same social/legal parent(s). Though this definition can include children of any age, this article is about unrelated healthy infants who are raised as siblings from their very first year of life.

Let me be absolutely clear: This section of *Adopting: Sound Choices, Strong Families* is directed specifically at prospective parents; I've no intention of scolding families who have already made the choice to adopt two newborns during the same year (and indeed I have some positive advice for them later in this section). Moreover, I am not talking here about families who propose to adopt a toddler or older child whose age happens to match a child already born to or adopted by the family many months before. I'm not speaking to families whose children are close, but are more than nine months apart in chronological age. Nor will we talk about prospective families who want to adopt a close-in-age birth-sibling group, or about interim care givers of special needs babies who decide to adopt their charges. Neither is this section directed at those families who travel abroad to adopt and bring home two close-in-age toddlers or older children at the same time (though I do direct it at families traveling abroad to adopt two unrelated children under the age of nine months).

Not that families like the above don't have issues. They do. But my position against pseudo-twinning focuses narrowly on the unique issues of genetically unrelated healthy infants—babies less than nine months apart in age, who, during the cognitively, physically, and emotionally crucial first year of their lives, become “twins.” My goal is to help parents-to-be see that creating families in this way is not in either baby's best interest.

How it Happens

The goal of parents who artificially twin babies is almost always the same, no matter how these babies arrive: instant family. It is a logical, understandable goal, born out of great frustration, long-term disappointment, and pain. But pseudo-twinning is usually not a carefully thought through or researched goal and it comes from self-centered thinking rather than baby-centered thinking. Most of the time it reflects parents' nearly desperate need to regain control over their family planning and to “get” a child. Would-be parents who have “failed” in so many ways during infertility treatment, for example, are often unable to believe in their potential for success in becoming parents to an extent that allows them to think in the baby-centered way that is the heart of effective parenting. They simply don't know about or understand the need for emotional and practical preparation through a psychological pregnancy with each of their children unless adoption professionals take extra, careful time to explain the concept and its benefits to them.

Actually, most people enmeshed for a long time in a quest to become parents have great difficulty projecting beyond having a baby placed in their aching, empty arms. Partially because medical providers often have not insisted that patients think about and communicate about anything beyond today's test and next month's treatment regimen, infertile couples who get to the point of exploring adoption and find the waits long, the qualifications and costs creating barriers, and that adoption professionals want them to end treatment and take up more precious time thinking, talking, and questioning rather than just to follow a series of steps and “get the baby,” find it just too much.

The result is that many would-be adopters are inclined to look for ways to avoid “the system” of institutionalized, licensed agency adoption and to hedge their bets when looking for a child to parent. Sometimes they avoid agencies altogether, other times they work with two

adoption agencies or facilitators but tell neither about the other's existence. Caught up in the kind of uninformed, surface thinking that produced treatment-related questions like, "Well, why not put in all eight embryos? We'd be real happy to have triplets!" These couples may also think that it's a good idea to do their "last couple" of ART attempts while actively working the phone lines with expectant parents responding to their ads, or to make plans and commitments with two different pregnant women simultaneously. They often make such comments as, "Well, so what if we do get a couple of kids close together? That will be great! Instant family."

Rarely do already-experienced parents (people dealing with secondary infertility, or couples who have already adopted once) artificially twin two babies under nine months of age. This is because most people who have already had the opportunity to parent a newborn understand from experience the unique intensity of the first year of life: the vulnerability and the rapid cognitive, physical, and emotional changes that make a six-month-old extraordinarily less similar to a four-month-old than the same children will be at thirty- and twenty-eight months of age.

Pseudo-twinning of babies most often does not reflect an understanding of the needs of newborns and under-one-year-olds or the realities of parenting and family life with an infant. Indeed among the most common reactions to earlier versions of this material have been those from parents who had themselves artificially twinned newborns and who felt angrily defensive about what I had to say on the one hand, but on the other hand said that they would never recommend that others do what they had already done.

Most often artificial twins are the children of different birthmothers adopted by one family using two separate adoption facilitators. After all, think couples pursuing two adoptions at once, birthparents have changes of heart so often that this way maybe at least we'll end up with one child. People still in treatment often think similarly—well treatment hasn't worked so far, but adoption is risky too. Why not save time and pursue both routes to parenthood, hoping one or the other works? Such couples stay in treatment and become pregnant while at the same time working with an already pregnant birthmother to adopt her child. A third route to artificial twinning involves parents adopting a newborn knowing that they are already pregnant, but having little faith that the pregnancy will result in a successful live birth. Finally, there are the small but growing numbers of never-before-parents seeking to adopt healthy newborns who travel overseas to countries where the media tells them that otherwise healthy babies who just need a little love and attention currently languish in orphanages. They travel not to adopt a baby that an agency and a foreign government have already identified as their child-to-be and prepared them to adopt, but intending to shop from orphanage to orphanage for the healthiest infants, hoping to bring back two. Their explanation to both self and others is that they want to "save" these babies but can afford to make such an expensive trip only once.

Parents of exceptionally close-in-age babies who protest that they didn't do this on purpose (and many do take this position) are kidding themselves. Adoption doesn't happen accidentally in the way that birth control fails. Getting the word out that you want to adopt and/or applying with agencies and contracting with facilitators is a very deliberate act. So is treatment for infertility or continuing to have unprotected intercourse.

When you know that you are pregnant or when you are offered the opportunity to adopt two close-in-age infants from separate sources, you *can* say no. We are, after all, talking about healthy babies here, and healthy babies have long lines of as many as one hundred prospective adopters waiting to learn about them. If you say no to the opportunity to adopt a healthy baby, he will not go unparented. Artificial twinning is deliberate, and the fact is that it reflects the needs of parents more than the needs of children.

The Ethical Questions in Virtual/Artificial Twinning

Today, as would-be parents—especially well-educated, two-income professional couples of advancing age—delay longer and longer the decision to become parents and then spend extended periods of time pursuing a lengthening menu of treatments which includes a variety of

quasi-adoption, medically assisted alternatives like donor eggs, gestational care, and surrogacy, artificial twinning is becoming every bit as much of an ethical “problem” for medical treatment providers to address as it has been for adoption providers for quite a while now.

Artificial twinning has long been of concern to adoption professionals, who argue that it is not in babies’ best interests. Avoiding artificial twinning and promoting the need for a psychological pregnancy are the main reasons that many agencies require that couples end treatment before beginning a parent preparation process. It’s understandable why patients not provided with careful and thorough counseling and guidance around these issues would have a difficult time understanding a requirement like this, and it behooves professionals to do a better job of explaining the need for such a mandate.

The ethical problems already of concern to adoption professionals closely parallel some of the ethical concerns about the 63-year-old mother-through-egg-donation whose deception of her doctors (and, indirectly, her child’s donor mother) by lying to her ART clinic about her age was splashed throughout the world media several years ago. Couples who adopt an infant while still in treatment or couples who adopt two babies a few weeks or months apart almost never do so through agencies that are aware of what they are doing, or from countries which have long-standing intercountry adoption programs, and rarely do they adopt through the same independent intermediary for both placements.

Perhaps even more troubling, rarely do these “artificial twinings” happen with the knowledge and approval of the adopted babies’ birthparents. Adoptive parents who artificially twin often do so by behaving less than truthfully and honorably with their children’s birthfamilies in fully confidential adoptions or in adoptions expected to be communicative only until the child is placed. These would-be parents assume that deceptions by omission can have no future impact on themselves or their families. But they are wrong.

Birthparents deserve more respect than they get from adopters who are not honest with them about their intention to artificially twin newborns. After experiencing the trauma of an untimely pregnancy and courageously pursuing adoption, birthparents are likely to receive little support from the world at large. In making an adoption plan they present an adopting couple with a priceless gift. Birthparents given the power to do so select their baby’s adopters with great care, looking for the parents they believe to be the most likely to appreciate this gift and treat it with utmost love and respect. While they do often wish that their children will be placed with a family who will offer them the possibility of a sibling, the majority of birthparents are put off by the perceived baby greed of families intent on adopting two babies at once. And they have every right to feel this way.

Though a few birthparents will agree to artificial twinning—especially those who have not been well-counseled to feel confident about their own “worthiness” to make careful, best-option decisions on behalf of their newborns—most birthparents who know that the possibility of artificial twinning exists with a prospective family will not agree to such a placement. Even if thinking only of themselves, birthparents legitimately worry about whether would-be parents working on two separate babies-to-be at a time could be expected to be fully committed on an emotional level to both options. So, could birthparents seeking a solution to an overwhelming crisis fully depend upon such a couple to remain committed to them no matter what the outcome of their own treatment or pregnancy or the adoption of an earlier-born baby? Additionally, given the fact that there are so many couples waiting to adopt, it’s important that infertile couples ask themselves the question why would any expectant parent—or an egg or embryo donor, for that matter—deliberately choose a couple already pregnant or hoping to be any day, a couple who would be distracted by a second needy infant genetically unrelated to the first and at a slightly different developmental stage?

Try thinking about it in a framework similar to the anecdote about Bob and Alice shared earlier... suppose you fell in love with two suitors. Each asked you to marry, but you weren’t quite sure which one would work out in the long run. How logical, how ethical, or how loving does it seem that you “solve” the dilemma by hedging your bets, accepting both proposals, setting

wedding dates, and beginning the financial and emotional preparations for marriage with both suitors? Is it reasonable to expect that either one would accept this situation if the truth were known about the existence of the other suitor and parallel wedding plans? Probably not! In order to follow such a plan, then, one would have to lie to both suitors right up until making a final decision.

Twinning “on the sly” often creates worries for adopters (and it should) that the birthparents will “find out” and attempt to disrupt the adoption. They also worry (and they should) that they will eventually have to explain and justify a deception to their teen or adult children who hear of it from birthparents who search for them (and they likely will). Such situations add that much more pressure to adoptive parents’ ability to feel confident, authentic, and fully entitled to their parenthood.

The Professional View

Though most adoption professionals want to offer appropriate support and education to families already created, I have found no responsible adoption providers who encourage pseudo-twinning of newborns or argue on its behalf. Few willingly engage in it. Still, there has been no professional call to have artificial twinning banned by law, and there is unlikely to be one. Rutgers researcher and clinical professional Dr. David Brodzinsky cautions that if children are raised as if they are twins there can be drastic consequences, and he advises against artificial twinning in general. But he points out something very important for us to hear: that when parents of back-to-back children are realistic in their expectations and are well supported, most families appear to function quite well.

Child therapist Michael Trout, an expert on infant attachment issues and director of the Infant-Parent Institute in Champaign, Illinois, believes that healthy preparation for parenting in adoption can’t happen when adopters’ don’t give themselves the unencumbered opportunity to experience a psychological pregnancy, but instead the adopters’ focus is on “getting the baby out of there (away from the birth family).”

“This is unnatural,” writes Trout in an issue of *Pact Press*, “and it makes people manipulative, dishonest with themselves and incomplete,” reminding us, “A pregnant woman does not begin pregnancy thinking only of how to get the baby out of there (away from her uterus). She and the baby’s father get to linger over the separateness and reality of the baby in this place they cannot touch. They get to ponder all the ways their lives will be changed and they get a chance to fantasize running away, as well as to fantasize the wonder of opening their space and their hearts to this new, separate and mysterious new person.” Trout joins me in advocating for a psychological pregnancy for adopters—an almost impossible task for would-be parents hedging their bets by “working all the options.”

According to Joyce Maguire Pavao, a well-known family therapist specializing in adoption and who was herself adopted, artificial twinning should be avoided. “It’s difficult, if not impossible, to fulfill both children’s needs,” she states in an interview with the *New York Times* (December 26, 1991), noting also that adolescence may be a particularly difficult time for artificially twinned adoptees.

The consensus of professional opinion seems to be that adopting two children at once, adopting while in treatment, or pursuing treatment while actively working on an adoption are bad ideas for everybody: for would-be parents, for birthparents and gamete donors, for the professionals who care about each of these clients, and, most of all, for the children.

A Kids-eye View...

It’s hard enough to be one of a set of twins or triplets genetically related and born together. Though most gestational multiples are very much wanted and ultimately they and their families do very well, from the beginning of their lives their families are under unusual stress and

scrutiny. Gestational multiples compete for their parents' arms, time and attention, as well as for all other family resources. Their early months are often marked by overworked and overtired parents or—perhaps even worse for children— by inconsistent, and therefore unpredictable, care from a variety of well-meaning “helpers.” Multiples are at risk for an early awareness that they are not the center of the universe during a time in their emotional lives when they should be. Families of gestational multiples fight for privacy amidst a public fascinated by multiples. But at least genetic twins are matching age-mates and so are likely to have the same developmental needs, not to mention often having similar natural paces, rhythms, and personalities. They share one set of parents whose attention is focused upon them.

Pseudo-twins, on the other hand, are likely to be strikingly different from one another both temperamentally and physically. The fact that they are almost never born in the same month—let alone on the same day— means that throughout their first two years of crucial and dramatic growth and change they will be at vastly different developmental stages every single day of their lives. At no other period of human development beyond the vulnerable and dependent first year of life are cognitive, emotional, physical, and motor changes as rapid as they are in the first twelve months after birth, when changes are so dramatic as to be observable and measurable on a daily basis. The rapidity of these changes is one of the things that makes this first year so stressful on parents, as well, as they struggle to stay alert to new needs and new dangers produced by new skills and awarenesses. The differences between children who are two and five months apart in age or who are nine and eleven months apart in age are obvious, whereas the same two children will seem much more similar by the ages of 24 and 27 months. The result is that, unlike genetic twins, pseudo twins will be on different eating, sleeping, waking, and playing schedules, making it impossible for their often sleep-deprived parents to take advantage of synchronized schedules most common with genetic multiples to relax and refresh themselves.

Because at least one or both of them will have joined the family by some form of adoption, quasi-twins' parents' attention will be diverted either by a combination of their own recovery from pregnancy and birth and the psychological, social, and legal details of the adoption or by two sets of differing adoption-related details and concerns. Pseudo-twins will share social and legal parents but not genetic parents, and, in these days of increasing openness in adoption, the non-parenting genetic parent of at least one of these age-mates is increasingly likely to be part of the lives of their shared parents.

To a greater extent than is the case with differing aged children adopted into the same family, pseudo-twinning puts children's adoption status front and center. Being of differing genetic backgrounds and not quite the same age will make these children's unusual situation something they can never escape, placing them in the social position of being compared and questioned by teachers, peers and perfect strangers throughout their childhoods, despite the unlikelihood that they are athletically, socially, psychologically, or academically—and sometimes racially— similar.

None of these down sides for children who are pseudo-twinning can be made up for by the sole argued benefit for these children: having close-in-age playmates.

The truth is that artificial twinning happens in order to meet the needs/desires of parents, not children. As advocates for children, we should work to insure that parents-to-be understand that every child is a unique gift deserving to be wanted and cherished for who he is, not as a second-best substitute for the child one “really” wants, not as a stop gap, not as insurance against “failure.” Families who do understand this also understand the importance to every baby of having the opportunity to be the center of her parents' universe for at least the amount of time nature would take to bring a pregnancy to a live birth. Professionals and advocates should help adopters-to-be understand the value of experiencing a psychological, if not a physical, pregnancy for each of their children, and the value to each child of finding and having his own place in the family's life.

So You've Already Got Pseudo-Twins. Now What?

A word of caution: Families of separately arrived, close-in-age children who arrived *beyond* the infant stage may find some, but not all, of the advice here of value. If your similarly-aged children have arrived in the family several years apart (for example one as a newborn and the other as a toddler), your own and outsiders' inclination to twin these children may be significantly less pronounced. The advice offered here has been designed specifically for those parenting two children six to seven months or less apart in age, both of whom arrived in infancy.

OK, so maybe upon reflection you agree with this article that artificial twinning is not the best idea, but it's too late...you're already parenting two children less than nine months apart in age who each arrived as an under-one-year-old. What should you do... give one back?

Of course not. No one would advocate that. In fact, as pointed out earlier, even those professionals with the strongest feelings against pseudo-twinning agree that families who acknowledge its difficulties and address them head-on are likely to raise healthy, happy children.

If you make your babies' individual needs paramount, without a doubt, your family's life will be more complex than most, and your work as a parent will be significantly more complicated than that of parents of children nine months or more apart or that of parents of gestational multiples, but you can do this.

You are simply going to need to be even more adept than most parents by adoption must be at walking a tight rope of issues peculiar to your family's situation. The fact is that you don't want to lump your children together as an inseparable pair (neither do the parents of genetic twins), but you don't want to drive a wedge between them either.

Here are nine practical strategies for parents of very close-in-age siblings who arrived as babies.

- People are fascinated by multiple births and will expect your family to want to do “twin things” because they think twinning is neat and desirable and because they presume that lumping twins together is “easier” on parents. You will need to go to extra lengths to refuse to allow yourself or anyone else in your children's lives—daycare providers, teachers, grandparents, etc.—to “treat” your children as twins. Dress them differently, give them individual toys (and rooms, if possible), acknowledge birthdays separately, etc. No matter how close they are in age, treat them not as a twinned pair but as you would treat children born at least a year apart.
- Become acutely tuned in to your babies' age-related developmental differences, particularly during their first two years of life when change and growth is rapid, and be individually responsive to these differences. As they grow older, be especially observant supportive of your children's individual interests and talents while at the same time fostering their sibling interactions.
- Remain aware that in all families parents and others have a natural tendency to “lump” close-in-age children together even when they are not twins. This is more often about accomplishing the tasks of family life as efficiently as possible than about not wanting to see children as individuals. In your family this issue becomes more important than in families whose close-in-age children are genetically related.
- The common fascination with multiples also means that you will need to be particularly aware when your children are babies of the need to establish family privacy boundaries concerning who really “needs” detailed information about the unusual beginnings of your family. As your children become older, help them to develop their own scripts about how to respond to the curious.
- Being artificially twinned is likely to be harder on same-sex siblings than on opposite sex pairs. If your children are the same sex, you'll need to work even harder not to twin them.
- If your children are of the same race, the assumption that they are fraternal twins will be even greater than it will be if they are of opposite sexes or racially/ethnically different. On the other hand, close siblings of differing races may draw even more questions from the curious, causing the children to feel awkward and uncomfortably “different.”

- As your children grow, support their close friendship but discourage what could be their inclination to become “twin entwined” as exclusive friends who are frightened of separation from one another.
- Give serious consideration to planning from preschool forward to separate your children in school by more than just different rooms and teachers for the same grade. There are two ways to do this: you may decide to hold one back from the beginning (boys in particular often benefit from starting formal kindergarten at 6 rather than 5) or, if the cognitive development of both children makes it in their individual best interests to start school at the same time, you might consider sending them to separate schools.
- If there was a birthparent deception involved in one or both of your babies’ arrivals, honor your child and his genetic parents by fixing the lie as soon as possible. Allowing this potential problem to exist unaddressed can and will begin to feel like a sword hanging over parents’ heads. Furthermore, the longer you wait, the more likely your child’s birthparent—and eventually your child himself—will feel betrayed. Consider engaging the help of a professional social worker or other mental health professional with mediation training to assist you in sharing this information with your child’s birthparent and establishing a more honest relationship.

Above all, give yourself credit for having had the best of intentions in being so eager to build a family that your children arrived close together. Be the best parent you can be to your individual children. If you acknowledge and address your family’s unique issues, allowing yourselves to reach out for support or help when you need it, your family will do very well!

Parallel Expectancies

If you will be adopting a newborn from the U.S., the chances are very good that you will be in direct contact with that baby’s first mother (and perhaps other birth relatives) during the last several months of her pregnancy and your expectancy period. This is going to be hard.

Frankly, I consider this one of the few real negatives in open adoption—for everyone. Why? There are three reasons.

To begin with, there are far too few really well-trained, experienced, and fully competent adoption counselors who can work effectively with these two client sets with such different needs and expectations, supporting the needs of both, and helping each to maintain enough emotional distance to retain their objectivity. In the 25 years that openness in adoption has been growing to become the new normal, I’ve not seen this changing as much as it should have. Schools of social work and psychology are not offering more courses in adoption counseling. No professional association has set any real standards for this kind of counseling. Open adoption has not become a common continuing education topic.

Second, pregnancy is such a sensitive period to begin with—loaded with hormonal shifts—and an untimely pregnancy is especially difficult emotionally. Ambivalence should be expected in these last weeks and thoroughly experienced, without embarrassment or guilt. That’s hard for an expectant mother to do when she’s being hovered over by eager would-be adopters she’s come to like very much. How dare she disappoint them?

And while it’s important that adopting parents understand and appreciate the extremes of ambivalence experienced by a pregnant woman considering adoption, it’s also very important that they allow themselves to feel excitement and joy in their own anticipation period. That’s very hard to do when faced with another’s looming loss and grief and one’s own possible bitter disappointment.

I see no imminent solution to these three concerns.

So it remains that prospective adoptive parents must walk a tight rope, urging themselves to feel expectant, but accepting that the child they are anticipating has only one set of parents—parents by birth—until after he has been born and a final decision has been made. Careful and

realistic language is part of the respect due families facing the difficult choice to plan an adoption and using this language helps to support this factual state of limbo. An expectant mother should **never, never, never** be thought of or described as “a prospective birthmom (PBM)” which seems to describe her as a commodity. Nor should she be described or thought of as “our birthmother,” which seems to imply that prospective adopters possess her in some way. She is, plainly, simply, and realistically “an expectant mother considering adoption.” After delivering her child, she will be, simply and realistically, “a mother.” Finally, she will need to make a decision about whether she can parent her baby herself. If she cannot and she chooses adoption, then, and only then, may you say that she is “our child’s birthmother.”

The Need for Education and Ongoing Support

Most openness arrangements work quite well. Of course there are awkward moments, and Berry’s research indicates a clear need for the continued involvement of professionals serving in a mediating role. In agreeing to an ongoing relationship, adoptive families and birthparents are creating a new kind of extended family relationship. In some ways, a fully open adoption is like a marriage. It demands respect for one another and a commitment to maintaining a positive relationship. But marriages are hard work and usually they involve two people of similar ages, backgrounds, and value systems.

In fact, adoption often matches people who would not have much in common if it were not for the adoption. The two sets of parents are almost always of significantly different ages. This can be particularly difficult when the expectant mother begins to see the adopting couple as surrogate parents for herself. Sometimes this goes unnoticed when the adopting couple, so focused on the excitement of the coming baby, fail to understand the tenor of the relationship as viewed by the expectant parent.

Pete and Nancy went through several months of Sandy’s pregnancy with her, driving her to doctor’s appointments and offering her a lot of emotional support. Sandy was far away from home, and she became dependent on the warmth and caring of Pete and Nancy’s friendship. Nancy was her Lamaze coach and was with her when Aaron was born.

But then they were gone, caught up in parenting Aaron and, while grateful to Sandy, much less inclined to spend long hours on the phone with her, have her over for dinner, or listen to her problems at work.

Their caseworker, Camille, played an important role in helping Sandy deal with what really had become two losses—the loss of her baby and the loss of an intimate relationship with Pete and Nancy—and to help all of them negotiate a comfortable relationship for the future.

Question to ponder: If Camille had not been available, how would this set of unmatched expectations have been successfully negotiated?

Sometimes the birth and adoptive families are of different educational and/or ethnic or socioeconomic backgrounds—backgrounds that would not lend themselves to naturally occurring ongoing friendships. Skilled mediators can be helpful in mediating misunderstandings and helping both families develop the tools for building a successful long-term relationship.

At Issue

Because more and more birthparents are requesting openness as a condition of making an adoption plan, some prospective adopting couples are finding themselves feeling that they are being pushed into what feels like an uncomfortable corner, forced to agree to openness or be denied the opportunity to parent. Perhaps nothing about open adoption frightens me more than this. I am meeting more and more parties to adoptions who have in some way failed to live up to the bargains they made in negotiating with the other family in open adoptions, both agency arranged and privately parent-initiated. The great majority of these situations have involved

adopting couples who agreed to some form of openness before placement and then decided at some point after the finalization of the adoption that they didn't want to continue with the communication. Some of these situations have involved semi-openness, where families maintain anonymity and communicate only through an intermediary. Others have involved fully open adoptions, where birthparents and adoptive parents have been in frequent direct contact with one another. In either case, the pain of betrayal felt by birthmothers in such situations is intense.

Max and Cathy adopted through an agency in the Southwest which arranged only open adoptions and would not work with couples who wished confidentiality. They met Marcy during her sixth month of pregnancy, and were thrilled when she decided that the match was perfect. They communicated closely, and were able to be in the delivery room when Jillian (a name the three had chosen together) was born.

After the birth, Cathy and Max were less eager to have Marcy remain a part of their day-to-day lives, but, as the social worker explained to Marcy, this was typical. They were very much involved in claiming this child as their own and building attachments within their newly expanded family. Marcy tried to be patient.

Shortly after the adoption was finalized, both Marcy and the agency were shocked to find that Max and Cathy had moved. There was no forwarding address for their mail, no forwarding phone number. Max's employer refused to give out information about where they had gone. In fact they had moved to Chicago—a plan they had had in mind, and which the large national corporation for which Max worked had agreed to, since just before Jillian's birth. Marcy and the agency had both been betrayed. Max and Cathy had played a game with them and changed the rules after they had possession of the most valuable piece.

There are birthparents for whom confidential adoption remains the best option and birthparents who should have openness. Similarly, open adoption is right for some adopters and confidentiality better for others. Some children will do better with openness and others with confidentiality. The menu of options must remain open to the clients who are empowered to make the choices right for themselves. And key to the success of adoptions is the matching of birth and adopting parents who agree on and choose the same level of confidentiality/openness.

If you decide on an open adoption, do so only if you are absolutely certain that you are able to commit for your lifetime to living up to your promises and working on ways to negotiate through problems. This isn't just a matter of ethical responsibility to your child's birthfamily. It goes much farther than that. What is Dean going to think when Liz contacts him at age eighteen and learns as their relationship progresses that the parents whom he loves and who love him lied to her? What if an adult Jillian searches for and finds her birthmother, only to learn how Max and Cathy betrayed her? No matter how strong the attachments, no matter how fully entitled parents and children feel toward one another, how will these parent-child relationships be affected by such news?

In choosing an open adoption, be prepared for the ongoing changes that must be negotiated in any working relationship. Rather than look upon these negotiations as promises carved in stone, so that you risk being disappointed when either of you are unable to live up to those promises, look at the agreement less as a contract and more as the beginning of a flexible relationship based on trust that is similar to a marriage. Adoption educator and birthparent advocate Brenda Romanchik calls it a covenant. What you and your child's birthparent want and need now may not be what either of you feels you want or need later. Open adoption pioneer Kathleen Silber wrote in an article in *Adoptnet* (March/April, 1992) that birthparents nearly always decide later that they want more rather than less contact with the adopting family than they thought they would during their pregnancies. Therefore, she suggests that it is nearly always better to agree to an arrangement which is more conservative than you feel you could live with

(for example, a birthparent seems to think she only needs one picture a year when you know in your heart that you would be comfortable with more frequent communication than that) rather than one which stretches you to what you believe are your furthest limits.

A Perspective after Living It Both Ways

If any one thing has made me open to the idea that confidentiality may not be the best way to practice adoption, it has been coming to understand that there was a great deal of deception practiced in many old-style confidential adoptions. Birthparents were often given assurances about the adopting family that were not kept. Adopting parents were too often given inaccurate or incomplete profiles on the birthfamilies.

Our first and second adoptions, in 1975 and 1981, were a traditionally confidential one, as were my husband Dave's adoption and that of his sister. Maybe my husband's birthmother had no other choice and lived her life filled with regrets. We'll never know. She died before Dave tried to make contact with her. Maybe my son's and my older daughter's birthmother, now in their fifties, have been unable to manage their grief and move on productively with life. Or maybe all these of these women were confident in the decisions they made. How do I know? Is it important that I know? Is it important that their children know?

On the other hand, I remember the years when I felt a sense of disappointment when we didn't hear from the birthmother of our youngest daughter (adopted openly in 1984) for a while. She was moving on with her life. Did we expect too much from her and of ourselves in trying to maintain contact as our lives diverged and we were all so busy parenting young children?

What I do know is that all three of my children did well in three quite different forms of adoption. We had very little information for our oldest, but we made it clear that we stood ready to help him obtain whatever he wanted to have. So far, he remains relatively uninterested—not an atypical reaction from male adoptees. We have full identifying information about our middle child, though we have never had direct contact with her birthfamily. We answered her questions and shared what we knew—including a picture. To this day—as she waits for the birth of her own first child—this has satisfied her needs. The adoption of our youngest has been continuously open. We are in at-will direct contact. Our daughter knows her maternal half siblings and grandparents and some cousins. She has a more distant relationship with her birthfather, who has not introduced her to his extended family.

All of our adopted children, despite the diverse kinds and amounts of information we had for them, did well. I am convinced that this had less to do with the confidentiality or the openness of their adoptions, than with the commitment we made as their parents to believing in them and in our relationship with them—the degree of our mutual senses of entitlement to one another. We clearly sent the message to our children that without question we consider ourselves a family, that we respect each of them as unique individuals, and that we respect their birthparents and their decisions. Of course they have questions! And we answer them honestly and straightforwardly without defensiveness and with no reservations.

Resources

- Child Welfare Information Gateway. "Openness in Adoption: Bulletin for Professionals." <http://www.childwelfare.gov/pubs/openadoptbulletin.cfm>
- Dorner, Patricia Martinez. *How to Open an Adoption: A guide for parents and birthparents of minors.* (Michigan: R-Squared Press, 1997)
- Gritter, James L. *The Spirit of Open Adoption.* (Washington, DC: CWLA Press, 1997)
- Gritter, James L. *Adoption Without Fear.* (San Antonio, TX: Corona Publishing, 1989)
- Grotevant, Harold D. "What Works in Open Adoption" in *What Works in Child Welfare*, Edited by Miriam P. Kluger, G. Alexander and P. Curtis (Washington, DC: CWLA Press, 2000)
- Grotevant, Harold D. and Ruth G, McRoy. *Open Adoption: Exploring Family Connections.* (Thousand Oaks, CA: Sage Publications, 2000)
- Melina, Lois Ruskai and Sharon Kaplan Roszia. *Open Adoption Experience: Complete Guide for Adoptive and Birth Families—From Making the Decision Through the Child's Growing Up Years.* (New York: Harper-Collins, 1993)
- Pavao, Joyce Maguire. *The Family of Adoption*, revised. (Boston: Beacon Press, 2005)
- Romanchek, Brenda. *What is Open Adoption?* (Michigan: R-Squared Press, 1999)
- Silber, Kathleen and Patricia Martinez Dorner. *The Children of Open Adoption.* (San Antonio, TX: Corona Publishing, 1990)
- Silber, Kathleen and Phylis Speedlin, *Dear Birthmother*, 3rd Edition. (San Antonio, TX: Corona Publishing, 1991)
- Waters, Jane. *Arms Wide Open: An Insight into Open Adoption.* (Bloomington, IN: AuthorHouse, 2005)
- Wolff, Jana. *Secret Thoughts of an Adoptive Mother*, 2nd Edition. (Kansas City, MO: Vista Communications, 1999)



This course has been adapted by Patricia Irwin Johnston, MS from Chapter 10 and other sections of her 2008 book ***Adopting: Sound Choices, Strong Families*** (Indianapolis, IN: Perspectives Press, Inc.)

Adopting was awarded the 2009 Benjamin Franklin award from IBPA as the best new book in the field of self-help and a 2010 Mom's Choice gold medal. It can be purchased in hardcover or Kindle versions [here](#).

