

Adapting to Adoption

Adopted kids generate scientific optimism and clinical caution

By BRUCE BOWER

Welcome to the adoptive family, where home life takes on a decidedly different look depending on whether it is refracted through the lens of mental health clinicians or behavioral researchers.

For more than 40 years, psychiatrists and others who treat emotional and behavioral problems have noted that adopted children and teenagers make up a disproportionate number of their patients. About 2 percent of children under age 18 in the United States are adopted by unrelated parents, but they make up 5 percent of children in psychotherapy, 10 to 15 percent of youngsters in residential treatment and psychiatric hospitals, and 6 to 9 percent of those identified in schools as suffering from various learning disabilities. An estimated 1 million children in the United States now live with adoptive parents.

Clinicians have focused on the roadblocks to an adoptee's healthy development. According to various mental health workers, adoptive parents and kids often struggle to form strong emotional bonds. The parents tend to ruminate about a child's biological parents; the children begin to realize at age 5 to 7 that one set of parents rejected them and to struggle with a sense of loss and bewilderment about their biological roots. Their self-esteem drops; they cannot seem to make close friends. Adolescent adoptees show a propensity for delinquency, depression, and a confused self-image.

Search movement advocates, who lobby for giving adoptees access to their adoption records so they can seek out their biological parents, take this position further. Adopted people need information about their genetic origins in order to feel whole and secure, they argue; those who lack this knowledge stumble through life feeling isolated and incomplete. Some in the search movement press for the elimination of adoption.

Yet in the past decade, a growing body of research on adoptees who do not receive psychological help indicates that parents usually develop warm and secure

relationships with their adopted infants, whose emotional health and self-image throughout the school years equal those of children living with biological parents. Rates of psychological and behavioral problems rise in youngsters adopted after infancy, probably due largely to neglect, abuse, and multiple changes in caretakers before adoption, according to these investigators.

Organizations representing adoptive families consider such findings a refreshing antidote to the clinical emphasis on adoption's inherent problems and to the widespread unease about parents raising children conceived by others, especially children who come from different races or nations.

"This issue is a tangled ball of yarn, and adoption research is only in its infancy," asserts Anu R. Sharma, a psychologist at the Search Institute, a Minneapolis-based organization that studies children and teenagers.

"Useful guidelines for adoptive parents are in short supply, while the adoption process itself has become more diverse," adds Steven L. Nickman, a psychiatrist at Massachusetts General Hospital in Boston. "Adoption is a highly political issue."

Consider interracial adoption. In 1972, the National Association of Black Social Workers branded the adoption of black children by white parents "cultural genocide," a position it still holds. Most adoption agencies try to place children with same-race parents and avoid interracial matches. About 500 black children get adopted by whites annually.

In the case of the approximately 10,000 children adopted annually from abroad by U.S. residents, officials in their countries of origin often confront home-grown pressures to bar this practice.

Some countries allow international adoptions for a short time, then suddenly withhold children from foreigners, as happened in Rumania. South Korea, the major source of babies for international adoption over the past 40 years, plans to phase out such placements by 1996.

On the domestic front, an Illinois Su-

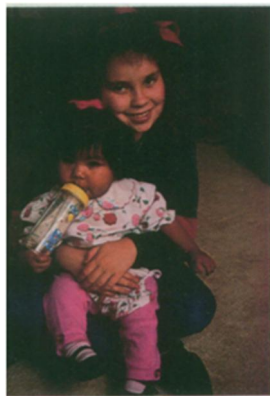
preme Court judge last month ordered that a 3½-month-old boy be taken from his adoptive parents, who had raised him from the age of 4 days, and given to his biological father, who argued that the adoption had occurred without his knowledge or consent. The adoptive parents plan to appeal the ruling to the U.S. Supreme Court. For now, the boy remains with them.

Still, societies around the world allow, and in some cases encourage, the transfer of children to nonbiological parents. Adoption as either a legal or an informal method of incorporating new members into a family extends back to the earliest centers of civilization, including Rome, Greece, India, China, and Babylonia.

Systematic efforts to understand the emotional adjustment of adopted youngsters have emerged only in the past 25 years. The latest study, conducted by the Search Institute and released in June, finds that teenagers adopted as infants generally have positive self-concepts, warm relationships with their parents, and psychological health comparable to that of nonadopted teens.

"This flies in the face of many clinical reports that adopted teenagers have all sorts of problems," contends Anu Sharma, who participated in the project, directed by institute psychologist Peter L. Benson.

With the help of public and private adoption agencies in Colorado, Illinois, Minnesota, and Wisconsin, the researchers recruited 715 families with teenagers who had been adopted as infants. A total of 1,262 parents, 881 adopted adolescents, and 78 nonadopted siblings completed surveys on psychological and family characteristics.



Photos of adoptive families and children by S. Wurrow





Most adopted teens regarded their adoption as a fact of life that made little difference in how they viewed themselves; about one-quarter reported that adoption loomed large in their self-views. Adopted girls cited more struggles with identity and self-esteem than adopted boys; however, such sex differences prove difficult to interpret because teenage girls find it easier to express their feelings than teenage boys.

Nearly two-thirds of the adopted youngsters noted an interest in meeting their biological parents, mainly to see what they look like, to tell them "I'm happy," or to find out the reasons for their adoptions. At the same time, only 9 percent reported missing or longing for biological parents.

In addition, adopted adolescents cited emotional attachments to their parents as strong as those of their nonadopted siblings. Close ties to both parents emerged for 54 percent; another 30 percent had a deep bond with one parent; 16 percent reported the lack of a strong attachment to either parent.

Nearly all parents — 95 percent — said they experienced a strong attachment to their adopted child.

Families displayed considerable skill in communication and discipline, as well as a low rate of parental divorce and separation, perhaps partly reflecting a successful preadoption screening process at most agencies. Parents typically maintained a delicate balance in discussing adoption with their children, neither denying its existence nor overplaying it.

On measures of psychological adjustment, nearly three-quarters of the adopted teens showed good mental health. Measures included tobacco, alcohol, and illicit drug use; sexual activity; depression and suicide attempts; delinquent and violent acts; school problems; and bulimia.

A slightly smaller percentage of good mental health — assessed in a similar survey conducted by the Search Institute since 1990 — appears in 51,098 teenagers attending public school in the same four states in which the adoptees live, Benson and Sharma assert. Another research team found a slightly higher proportion of good mental health in a national sample of 1,719 teenagers, studied with a battery of clinical scales in 1989, who had not received mental health services or required special academic help.

Reasons for these small differences remain unclear, although Sharma con-

siders similarities in mental health across the three studies more significant.

One-third of the adopted teens had received counseling or psychotherapy, although most of those reported good mental health. Adoptive parents may seek out such services more willingly than other parents, Sharma notes. Also, parents and teachers may assume that adopted adolescents are more prone to emotional problems and refer them for counseling sooner than they do other teens.

The 289 interracial adopted adolescents in the Search Institute survey — most from Korea — displayed psychological health and identity formation comparable to those of adoptees in same-race families.

Adoptees reported much more involvement in churches and in volunteer and community organizations than comparison groups, notes psychologist Matthew K. McGue of the University of Minnesota in Minneapolis, who is participating in further analyses of the data. This may reflect a particular emphasis on such activities by adoptive parents, he says.

Rumination about biological parents tended to occur in adopted teens who showed the most signs of depression or anxiety, McGue adds. "For them, adoption seems to be one more thing to worry about," he holds.

Despite its intriguing glimpse into the lives of adopted teenagers, the Search Institute project contains some important limitations. Half the adoptive families originally contacted for the survey declined to participate, yielding a non-random sample; a nonadopted control group given the same survey was not included; and researchers failed to establish how much security teenagers derived from their reported sense of emotional attachment to adoptive parents.

Moreover, the researchers looked only at parents who worked with agencies that provided education and support after the adoption. It remains unclear whether the findings apply to independent adoptions — now the majority of unrelated domestic adoptions.



Several other studies support the positive cast on adoption provided by the Search Institute survey.

In Sweden, psychiatrist Michael Bohman at the University of Umeå directed a longitudinal study of 164 infant adoptees, 208 children raised by biological mothers who had registered them for adoption and then changed their minds, and 203 children placed in foster homes (where

many were adopted by age 7).

At age 11, about 20 percent of boys and girls in these three groups exhibited serious emotional and behavioral problems, as rated by their teachers. A much smaller proportion of their classmates got tagged as "problem children."

But at age 15, adopted children rebounded. Teacher ratings of their social, emotional, and academic skills equaled those given their classmates. Youngsters living with biological mothers who reneged on adoption plans and those in foster homes lagged considerably behind the adoptees on these measures.

Infant adoptees continued to do well at ages 18 and 23, but higher rates of alcohol-related problems and criminal behavior, as well as lower scores on intelligence and psychological tests, characterized the other two groups.

Bohman and a colleague describe these findings in *The Psychology of Adoption* (D. Brodzinsky and M. Schechter, eds., 1990, Oxford University Press).

In the same book, Janet L. Hoopes, a psychologist at Bryn Mawr (Pa.) College, describes a study of 50 adopted and 41 nonadopted teenagers age 15 to 18. All adoptions had occurred by age 2.

Extensive interviews uncovered no differences between the groups on several measures of identity formation, as well as in family and peer relations, school performance, and self-esteem.

The 16 adoptees interested in finding their biological parents showed slightly more difficulty in identity formation, Hoopes says. As a group, "searchers" more often reported unhappy family relationships and perceived themselves as more strikingly mismatched with adoptive parents in physical appearance.

However, adoptees unanimously considered their adoptive parents as among the most significant persons in their lives; none placed his or her biological parents in that category.

A 20-year study of 204 white families with adopted children, most of them black, also documents healthy emotional development. As the youngsters matured, they developed a clear sense of racial identity, says Rita J. Simon, a sociologist at American University in Washington, D.C.

Youngsters in that investigation included 157 interracial adoptees, 42 white adoptees, and 167 biological children of the adopting parents. "Adoptees didn't have worse or different problems than their biological siblings," Simon says.

Around age 11, about one in five adopted children — mainly boys — began stealing money or possessions from family mem-



bers. But as in the Swedish study, this behavior stopped by age 15 and may have represented a testing of family affection and commitment at a time of increased awareness about the meaning of adoption, Simon contends.

She and Howard Altstein, a social worker at the University of Maryland in Baltimore, describe their project in *The Case for Transracial Adoption* (1994, American University Press).

Although scientific measures of identity, racial or otherwise, contain much room for improvement, these studies document the overall success of interracial adoptions, holds psychiatrist Ezra E.H. Griffith of Yale University.

Still, political opposition to interracial adoption remains strong, Griffith says. Only Texas forbids a focus on placing children with parents of the same race. Child-welfare workers often hold minority children in foster or institutional care for years rather than place them with white parents. Legislation approved by the U.S. Senate and pending in the House would prohibit delaying or denying adoptions on the basis of race.

Meanwhile, clinicians who treat adoptees and their families agree that this family arrangement generally works well, especially for those adopted as infants. But in their view, the Search Institute survey and related research gloss over the complexities of identity development with which all adoptees must deal. These heighten the risk of psychological problems in late childhood and adolescence.

"As joyous as adoption is, adopted teenagers need to make sense of the more complicated circumstances that led to who they are," contends psychologist Joyce Pavao of The Family Center in Somerville, Mass. "They have to acknowledge and deal with a sense of loss for their biological parents and the issue of physical dissimilarity to adoptive parents and relatives." Pavao regards these as typical concerns and says that clinicians have tended to "pathologize" them.

Serious emotional or identity problems probably occur most often in children adopted after infancy and by parents of a different race, maintains Steven Nickman of Massachusetts General Hospital. Even kids adopted as infants often get little help in grappling with the special brand of grief sparked by the psychological loss of birth parents they never knew, the Boston psychiatrist says.

"Relatively few parents are equipped to help their kids face the depths of sadness that they often feel regarding this loss," Nickman holds.

Psychologist David M. Brodzinsky of Rutgers University in New Brunswick, N.J., estimates that about 25 percent of those adopted as infants develop serious psychological difficulties by adolescence,

compared with 15 percent of nonadopted youngsters.

A number of factors play shifting roles in the emotional lives of adopted children, Brodzinsky holds. These include the social stigma attached to adoption (such as teasing by peers and awkward "family tree" assignments at school), feelings of loss about biological parents, traumatic separation from one or more caregivers for older adoptees, and genetic propensities for psychological and behavioral disorders inherited from biological parents.

Children who try to avoid thinking or talking about adoption issues, often in concert with their adoptive parents, most often fall prey to emotional problems and identity confusion, Brodzinsky suggests. He expands on this argument in *Being Adopted: The Lifelong Search for Self* (1992, Doubleday), written with psychiatrist Marshall D. Schechter of the University of Pennsylvania School of Medicine in Philadelphia and science writer Robin Marantz Henig.

Shortcomings in the Search Institute survey render it difficult to interpret, according to Brodzinsky.

"This new study is important because it gets people talking about adoption," he

says. "There's still little nonclinical research on adoption."

But more is on the way. A study submitted for publication by Sharma, Benson, and McGue compares 4,682 teenage adoptees recruited from public schools in 35 states with 4,682 nonadopted students matched for sex, age, and race. Overall, adoptees report small, but statistically significant, elevations in legal and illegal drug use, sadness and worry, and aggressive behavior, as well as slightly lower optimism about the future, academic achievement, and parental support and closeness.

Teens adopted as infants display overall psychological adjustment comparable to that of nonadopted controls, Sharma says. Personal and family difficulties increase progressively for those adopted at later ages.

The findings underscore the need to move children quickly out of foster care into adoptive homes, according to the researchers.

Scientists also hope to move quickly toward a better understanding of adoptive families. "These studies are a few chips off a massive block from which we're trying to remove a true representation of adoption," Sharma contends. □

In a Family Way

Adoptive parents—including my wife and I, who adopted our 3½-year-old son as an infant in Paraguay—operate amid changing conceptions of family life. The media pounce on sensational adoption-related conflicts, from switched-at-birth Kimberly Mays to switched-at-toddlerhood Baby Jessica (now Anna), but basic transformations in the nature of families and adoption attract less attention.

For much of the past 10,000 years, village-based families chiefly organized production, education, self-defense, health care, and welfare, asserts James Q. Wilson, a political scientist at the University of California, Los Angeles. Parents needed children to work farms and fields and to support them during sickness and old age.

In these societies, adoption not only served the needs of unwanted children and infertile couples, but supplied older children (usually male) to continue a family lineage or to assume specific agricultural or commercial duties.

In today's urban societies, however, families deal mainly with child rearing. Children create a financial burden rather than bolstering the family's fortunes. Rising divorce rates, a greater number of single mothers, and ambiguity about what constitutes a family have followed.

A family now revolves around "a human commitment designed to make

possible the rearing of moral and healthy children," writes Wilson in *The Moral Sense* (1993, Free Press).

Or as E. James Lieberman, a psychiatrist at George Washington University School of Medicine in Washington, D.C., puts it: "All good parenting requires adoption. Mental health professionals should emphasize the conscious aspects of parenting in order to enhance the emotional bonding that is not automatic, even in biological families."

U.S. law currently undermines adoption as a valid family form by sealing adoption records and treating the adopted child "as if" he or she were a biological product of the parents, argues Elizabeth Bartholet, a Harvard University law professor and mother of three sons, two adopted and one biological.

Open access to birth records, currently the subject of heated debate, would send the signal that an adoptee's links to biological parents are relevant but not of pivotal importance to personal identity or family relationships, Bartholet contends in *Family Bonds: Adoption and the Politics of Parenting* (1993, Houghton Mifflin).

"Adoption creates a family that in important ways is not 'nuclear,'" Bartholet holds. "Adoptive families might teach us something about the value for families of connection with the larger community."
— B. Bower