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BIRTH MOTHERS' EXPERIENCES OF SUPPORT BEFORE, DURING, AND AFTER ADOPTIVE PLACEMENT

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BIRTH MOTHERS' EXPERIENCES OF SUPPORT BEFORE, DURING, AND
AFTER ADOPTIVE PLACEMENT

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THESIS

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A thesis submitted in partial fulfillment of the requirements
for the degree of Master of Science in Family Sciences in the
College of Agriculture, Food and Environment
at the University of Kentucky

By
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2021

ABSTRACT OF THESIS

BIRTH MOTHERS' EXPERIENCES OF SUPPORT BEFORE, DURING, AND
AFTER ADOPTIVE PLACEMENT

The current study explores the perceptions and experiences of support in a sample of birth mothers who relinquished parental rights though open or closed private adoption (e.g., religiously, and non-religiously affiliated private adoption agencies, adoption attorneys). Participants ($N = 51$) were birth mothers who placed a child for adoption at birth or within several months and who relinquished parenting rights 8 months to 50 years ago, with ($M = 15.39$) years since placement. A thematic analysis uncovered six overarching themes throughout the relinquishment process. Further, prevalence of themes in certain phases (i.e., pre-placement, during placement, post-placement) were shared among all participants. Reliability was strong for all themes. These findings hold important implications for policy and supports related to birth mothers' well-being and adjustment.

KEYWORDS: birth mothers, adoption, support, adjustment, relinquishment, placement

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July 15, 2021
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Date

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CHAPTER 1: INTRODUCTION

1.1 INTRODUCTION

In the United States, many women face an unintended pregnancy. Unintended pregnancy refers to pregnancies that are unwanted, unplanned, or mistimed (Moss et al., 2015, as cited in Simmonds & Likis, 2005). This occurrence leaves women to decide between the options of parenting, adoption, and abortion (Simmonds & Likis, 2005). Although adoption is a relatively common way of family formation, it is generally considered as a less desirable and preferable compared to biologically based families (Baxter et al., 2012, as cited in Coleman & Garratt, 2016). Correspondingly, the adoption process can trigger both stress reactions and protective coping responses among members of the adoption triad (i.e., birth parents, adoptees, and adoptive families; Goldberg & Smith, 2008). Each member of the adoption triad influences the social and legal aspects of adoption and are affected in various ways (Krahn & Sullivan, 2015). Despite the high incidence of unintended pregnancy and the potentially profound implications of the decision that must follow, many women who are birth mothers report little to no support through the process (Simmonds & Likis, 2005).

Of particular interest for the present study, birth mothers are defined as the many women who choose to give birth but relinquish their parental rights (i.e., allow their biological child to be adopted) and subsequently experience effects that often can span the course of one's life (Aloi, 2009). Although the decision to place a child for adoption is not an uncommon practice, birth mothers have largely been silenced in contemporary society for doing so (Coleman & Garratt, 2016). They are highly stigmatized as a result of their relinquishment decision (e.g., voluntarily giving up rights to biological child) and

bear a societal perception of illegitimacy and deviance (Baxter et al., 2012). Further, there are other common ramifications that birth mothers face, such as overwhelming grief and profound loss (Aloi, 2009; DeSimone, 1996; Deykin et al., 1984; Smith, 2006). Several studies have documented the effects birth mothers may experience broadly after placing a child for adoption (Henney et al., 2007; Krahn & Sullivan, 2015), with less focus on experiences throughout the entire process. For example, a few older studies examined pre-birth services birth mothers received as compared to post-birth experiences (Cushman et al., 1993; Deykin et al., 1984). Unfortunately, these studies may now be outdated and do not address their distinct experiences and support needs more comprehensively before, during, and after placing their child for adoption.

1.2 ORGANIZATION OF THESIS

Chapter One contains the introduction and objectives of the research. Chapter Two contains a literature reviews of topics including stigmatized status, grief, disenfranchised loss, and support and the family stress theory theoretical framework. Chapter Three contains the purpose of the study and current research aims, the current study, and research questions. Chapter Four contains all the methods and procedures used to conduct the research and discusses the researcher as an instrument. Chapter Five presents and discusses the results. Chapter Six discusses the conclusions of the research and presents strengths and limitations as well as ideas for future work. Appendix A contains recruitment resources and organizations contacted in the study and Appendix B contains the birth relative interview guild and Appendix C contains the codebook utilized in this study.

CHAPTER 2: LITERATURE REVIEW

2.1 STIGMITIZED STATUS

The decision of relinquishment places birth mothers in a changed role, one that requires sufficient support in their adjustment to this changed role from mother to birth mother (March 2014; Neil, 2012). The role birth mothers hold in the adoption process varies by individual but has also tended to vary across time as adoption norms that have changed (French et al., 2013). For example, birth mothers used to be highly devalued and stigmatized; the common assumption was that mothers who give their child up for adoption are coldhearted (French et al., 2013; Leon, 2002). Role theory suggests that beliefs about role enactments in an adoption context are ascribed by a set of societal norms, rights, duties and behaviors that individuals fulfil (Blatner, 2000, as cited in French et al., 2013). Accordingly, birth mothers are often inaccurately portrayed as people who have rejected, abandoned, or deserted their child (Leon, 2002). Relinquishing birth mothers frequently face stigma for "failing" in the role of motherhood, which can result in hardships managing their identity (Neil, 2012). Efforts to manage birth mothers threatened status and identity today are evident in the increased focus on legislation and policy initiatives fought for by groups like Concerned United Birthparents (CUB) that call for ethical adoption laws, policies, and practices among other missions of support (Neil, 2012; Sotiropoulos, 2008). Support services such as CUB empowered birth mothers and other birth relatives to establish value to their changed role (Neil, 2012). A more recent study on post-placement adjustment found that in their sample of 235 birth mothers, ongoing support connections to other birth mothers was a beneficial experience that reduces stigma (Brodzinsky & Smith, 2014). However, research on such support

networks is mostly unavailable (Brodzinsky & Smith, 2014). A further investigation on birth mothers' engagement in support services may cast a light on their overall adjustment, as well as specific experiences with stigma.

2.2 GRIEF

Feelings of grief are among the many life-long experiences birth mothers' face (Aloi, 2009; March, 2014). Grief reactions experienced by birth mothers following relinquishment include feelings of loss, sadness, guilt, depression, anger, and regret (Deykin et al., 1984; Henney et al., 2007). The substantial likelihood for birth mothers to experience disenfranchised grief, which is grief that is not openly acknowledged, socially accepted, or publicly mourned (Doka, 1989, as cited in Aloi, 2009), adds an additional layer of complexity to the coping process following adoption loss (Aloi, 2009). Research has demonstrated that it is not uncommon for birth mothers to be advised to "move on" as quickly as possible by the healthcare delivery system and by society as well, often displaying a disapproving regard to birth mothers' grief (Kubler-Ross, 1969, as cited in Aloi, 2009). Given these challenges, relevant policy and practice should reflect a thorough understanding of birth mothers' grief response to relinquishment to provide proper treatment (DeSimone, 1996). As detailed in Henney et al. (2007), a series of symptoms and experiences that birth mothers often face are signs of unresolved grief, symptoms of post-traumatic stress disorder, diminished self-esteem, outward professions of perfection masking inner-feelings of shame, arrested emotional development, self-punishment, unexplained secondary infertility, and living at various extremes. However, empirical research that addresses whether these symptoms are reflections of preexisting conditions and/or life experiences that are not predominately related to the

relinquishment experience are lacking (Henney et al., 2007), which might point to the need for future research to explore birth mothers' adjustment narratives. According to Brodzinsky (1990), healthy grieving is possible if birth mothers can express grief in a supportive environment, have support throughout the process, and are able to engage in a ritual marking the loss of the child. Often, societal lack of acknowledgement of birth mothers' need to grieve contributes to their feelings of disenfranchisement (Aloi, 2009). Thus, uncovering beneficial sources of social and emotional support for birth mothers is needed so they can effectively navigate the grieving process and to ensure access to supportive resources for sustaining healthy coping behaviors.

2.2.1 Disenfranchised Loss

The likely experience birth mothers encounter of disenfranchised loss and grief adds additional complexity after relinquishment. Doka (1989) defined disenfranchised grief as "the grief that person's experience when they incur a loss that is not or cannot be openly acknowledged, publicly mourned, or socially supported" (Brodzinsky & Smith, 2014, p.167). Thus, birth mothers who place a child for adoption experience multiple and simultaneous losses, which include the loss of the child with whom they are biologically connected, the loss of the parenting identity and role, and often the loss or changing of intimate relationships (Neil, 2006). Child relinquishment often affects the birth mothers' intimate relationships with parents, peers, romantic partners, and future children (Brodzinsky & Smith, 2014; DeSimone, 1996). The placement of a child for adoption and the experiences of loss that accompany this process is a major life stressor, and for many, it will be among the most emotionally intense losses ever faced (Brodzinsky & Smith, 2014). An ambiguous loss compounds the loss experienced by birth mothers in that the

child remains psychologically present but physically absent (Boss, 1999), especially in terms of no contact. Indeed, one study assessing boundary ambiguity experiences among birth mothers in the U.S. found that many, if not most birth mothers who relinquish their children to adoption continued to think about the child with moderately high frequency and emotional intensity eight years after placement (Fravel et al., 2000).

2.3 SUPPORT

Despite ample evidence of the long-term emotional impact of relinquishment, such as the previously noted intense feelings of stigma, grief, and loss, the literature also indicates a pervasive lack of support for birth mothers (Memarnia et al., 2015). To help birth mothers cope with the relinquishment of their child and avoid debilitating post-placement adjustment difficulties, more knowledge is needed regarding the challenges these women face and the forms of support they need (Brodzinsky & Smith, 2014). According to Neil (2012), in order to effectively support birth mothers, we must understand their needs in relation to emotional well-being. In a "Helping Birth Families" study, reports indicated that the presence of emotional support activity provided to birth relatives was found to be overwhelmingly positively correlated with improvements in mental health (Neil et al., 2010, as cited in Neil, 2012). Further, research suggests the influence of social support on reducing mental distress. For instance, many birth mothers have reported feeling pressured into giving their child up for adoption, which has been linked to greater feelings of regret, worry, and grief, and also leaves birth mothers unsupported in their decision-making process (De Simone, 1996). Thus, these women may have particularly salient support needs. Although dated, Winkler and van Kepple's (1984) study assessing long-term grief resolution in a sample of 213 birth mothers found

that a lack of social support was a major contributing factor to poor adjustment after placing their child for adoption. The current study seeks to cast a light on birth mothers' perceptions of support throughout the entire process of pre-, during, and post-placement, aimed at emotional and social experiences of support.

2.4 THEORETICAL FRAMEWORK

2.4.1 Family Stress Theory

According to family stress theory, stressors of a wide scale and variety happen to all families (McKenry & Price, 2005). As defined by Boss (1988, 2002, 2006), family stress is a disturbance of the family's steady state. It is suggested that within the context of stressors, a family's vulnerability and capacity to adapt to the demands of stress can be disrupted, especially during major life transitions (McKenry & Price, 2005). Families connected to adoption, including all who are a part of the adoption triad (i.e., adoptees, adoptive families, and birth families) commonly encounter high levels of stress throughout the process of adoptive placement. Family stress theory can be used to help guide analyses exploring the major and stressful life event of relinquishment that birth mothers endure. In light of such stressors, it is important to identify factors of support (Goldberg & Smith, 2008) that may be protective for birth mothers. Birth mothers with limited resources (e.g., social, emotional, and practical supports) may be particularly vulnerable to experiencing relinquishment as overwhelming and to poor adjustment outcomes (Goldberg & Smith, 2008). Alternatively, more substantial resources among birth mothers could serve to buffer distress (Goldberg & Smith, 2008; Madden et al., 2018).

CHAPTER 3: PURPOSE AND AIMS OF STUDY

3.1 PURPOSE OF THE STUDY AND CURRENT RESEARCH AIMS

This study explored the experiences and sources of support that a sample of birth mothers who relinquished a child for adoption perceive to be helpful, useful, and available upon deciding to relinquish their parental rights. The primary objectives of this study were to better understand the impact of child relinquishment on birth mothers and their support needs throughout the process of relinquishment. Previously, voices from the birth mother community addressing support needs have been limited (Morgan et al., 2019). Therefore, I aimed to shine a light on birth mothers' direct experiences of support throughout their relinquishment process. I employed thematic analyses of responses to semi-structured interviews as a method for gathering a range of viewpoints from a sample of birth mothers (Braun & Clarke, 2006). My goal was to provide insights into birth mothers' experiences with placing a child for adoption and their perceptions of support, particularly as related to their overall adjustment.

3.1.1 The Current Study

Although a considerable amount of research has been conducted on the effects of adoption in recent decades, the main focus has been on adoptees and adoptive parents (Madden, 2018). Birth mothers' adjustment experiences have been less often considered and remain largely unexplored (Brodzinsky & Smith, 2014). I expect that those who report perceptions of having support (e.g., social, emotional, practical) throughout the process will describe more positive feelings of adjustment as opposed to those who experienced minimal supports (Brodzinsky & Smith, 2014; Neil, 2012).

3.1.1.1 Research Questions

The following questions were explored in the current study to understand more about the perceived importance birth mothers place on support for their healthy adjustment throughout the process (i.e., pre-placement, during placement, post-placement) of relinquishment:

- What are the circumstances of birth mothers' decision for placement?

- What sources of support do birth mothers describe engaging in?

- How are different sources of support (e.g., social and emotional) perceived to be associated with birth mothers' adjustment?

CHAPTER 4: METHOD AND MATERIALS

4.1 PARTICIPANTS AND RECRUITMENT

A total of 51 participants who relinquished parental rights to a child for the purpose of adoption are included here. All participants were birth mothers who relinquished parental rights though private adoption (e.g., religiously or non-religiously affiliated private adoption agencies, adoption attorneys) with open and closed arrangements. Open arrangements are characterized by a spectrum of practices such as contact between the birth mother and the adoptive family and accessibility of information regarding the birth mother, the adoptive family, and the adoptee while closed arrangements are characterized by secrecy and sealed records (Cushman et al., 1993). Placements occurred at birth or within several months after birth. Participants relinquished parental rights ranging from 8 months to 50 years ago, with an average of 15 years since placement ($M = 15.39$) and many taking place over 25 years ago ($n = 13$). Participants were an average age of 39 years old ($M = 38.87$; $SD = 13.85$), and a median

total household income of about $64,500 per year. They identified as white (82%), Multiracial or Multiethnic (8.2%), Latino/Hispanic (4.9%), or another racial/ethnic identity (e.g., Anglo-Saxon) (1.6%) and relationship status as married (40%), single (17%), and other statuses (e.g., separated, divorced, cohabitating, other) (43%).

Recruitment procedures were designed to access this hard-to-reach-population. Our participants were drawn from a larger study on birth relatives' experiences of contact with the adoptive families to whom they are connected (Farr, 2017) – specifically a subsample of participants ($n = 5$) in the Contemporary Adoptive Families Study (CAFS; Farr, 2017; Farr, Forssell & Patterson 2010) – as well as and through other means (e.g., snowball sampling, relevant listservs catered towards birth relatives, agencies and support groups; see Appendix A). CAFS is a larger ongoing longitudinal project focused on aspects of child development, parenting, and family relationships among diverse adoptive families (CAFS; Farr, 2017; Farr, Forssell, & Patterson, 2010). CAFS adoptive parents were emailed by trained personnel of the research team and asked if they were comfortable to forward a study invitation to any of their child's birth family members with whom they were in contact. In addition, participants ($n = 2$) were recruited through the Transition to Adoptive Parenthood Project (TAPP; Goldberg & Smith, 2009). TAPP is also an ongoing longitudinal study examining lesbian, gay, and heterosexual adoptive parent families. Similarly, a lead researcher forwarded a study invitation to the TAPP study director, which was then distributed to the adoptive families participating in TAPP. These adoptive families then passed along the invitation to birth relatives which whom they were in contact. Finally, a team of research assistants compiled a comprehensive list of relevant organizations and support groups and ultimately reached out to 68 separate

organizations and Facebook groups geared toward birth family members. Any birth relative living in the U.S. over the age of 18 who was related to a child placed for adoption through private domestic adoption was eligible to participate, regardless of whether they ever had contact with the adoptive family. Participants represented in this current study include only birth mother participants who provided interview data ($n = 51$) from the broader birth family sample, which included 79 birth relatives. Indeed, the majority of participants who provided interview and/or survey data from the birth family study were birth mothers ($n = 67$; 85%).

4.2 MATERIALS AND DATA COLLECTION PROCEDURE

Permission for the present study was granted with approval from the Institutional Review Board at the University of Kentucky. All participants ($N = 51$) completed an individual interview by phone or secure online messaging with a trained graduate researcher. The primary source of data collected from participants was in the form of semi-structured phone interviews guided by open-ended questions and prompts (see Appendix B). The interview guide was adapted from studies on contact dynamics between birth relatives and adoptive families (Grotevant et al., 2013). Participants were asked questions regarding their pregnancy, birth, and current relationships with the adoptive family. Phone interviews ranged from 1.5-4 hours and generally lasted around two hours on average in length and were audio-recorded. Online chat interviews took between four to five hours to complete. Participants were compensated fifty dollars upon completion of the interview. During interviews, interviewers took contemporaneous notes. Upon completion of interviews, interviewers took reflexive notes. Birth mothers were interviewed from 2017-2019.

All participants were adults (i.e., age 18 and older) and granted written or verbal consent permission to be studied. Interviewers verbally briefed the participants on the sensitive nature of the topics to cover. Participants were invited to answer in line with their comfortability. That is, to say as much or as little as they felt comfortable with, and they could feel free to not answer a question if they preferred to not share this information. Interviewers reminded participants that they could stop the interview at any point and plan to continue at another time if needed. Prior to proceeding with the interview, interviewers reminded participants that their conversation would be recorded. Interviewers were instructed to begin by following the interview guide and to elicit probes and follow-up questions as needed. If a participant had difficulty in understanding a question, interviewers were instructed to use alternative ways of phrasing a question. In some cases, alternative phrases were provided in the interview guide. Not all participants responded directly or clearly to each question in the interview due to divergent flow of conversation or interviewer error.

Questions present in the interview guide assessed birth mothers' pre-, during and post- placement experiences (see Appendix B). The responses to the following interview questions were of primary interest in this study: *How old were you at the time of pregnancy? With whom did you discuss the pregnancy? Did you feel supported during your pregnancy? After the pregnancy, what kind of support, if any, did you receive from the agency (or others)? Were these supports helpful? Have you noticed any changes (improvements or decline) in your health (physical/ mental/emotional) since the time of the placement?* Additional interview questions of interest included ones such as, *Tell me*

about yourself during the time of the pregnancy, which allowed for the participant to respond without being led in a direction by the interviewer.

All interviews were transcribed verbatim and de-identified to ensure confidentiality by a team of research assistants, including the first author. Minor edits were made by each transcriber to preserve confidentiality, condense length for formatting, and improve readability. Researchers assigned a pseudonym to each participant. Pseudonyms have been used in all the transcript extracts presented below.

4.3 QUALITATIVE DATA ANALYSIS

A qualitative research approach was utilized given that little research has been conducted on this present topic (Grotevant, 2012). Qualitative research is well-suited to examining the birth mother experience of child relinquishment, which is an intricate and complex experience (Krahn & Sullivan, 2015). Qualitative analyses of interview data were conducted using Braun and Clarke's (2006, 2013) Thematic Analysis (TA) approach. Applying TA allows for flexibility and opportunity to provide rich and detailed accounts of data (Braun & Clarke, 2006). The main focus behind thematic coding was to identify meaningful patterns within the data.

4.3.1 Thematic Coding

I, the first author, developed the codebook which targeted relevant interview guide questions of interest with my research aims after reviewing and taking notes on multiple transcripts (see Appendix C). The codebook was then reviewed by study personnel (including the principal investigator of the birth family project who has also served as my faculty research advisor for this thesis). Three iterations of the codebook

were developed with purposes of improvements on clarity before the final version was used.

All interview transcripts were coded by a coding team made up of four coders (i.e., two undergraduate research assistants and one first year PhD student in Psychology and the first author, a Master's thesis student in Family Sciences). Coders were provided explanations for each code. Since relevant information can come up anywhere across the interview, coders were instructed to first read the entire transcript then code according to the codebook questions formulated from the interview guide. The coding team members individually coded for each participant's responses to all questions listed in the codebook. Then, in an excel sheet, coders recorded the appropriate codes that correspond with the participant and interview questions. Each code was given a number (e.g., 1 or 2 or 3) to allow for reliability analyses to be statistically conducted. Across all codebook questions, coders were instructed to code "0" if a response was not mentioned and "9" if a participant was unclear or gave an incomplete answer. Coders could select multiple codes in cases that they felt appropriate and were to provide reasoning for choosing particular codes in an explanation column.

All responses provided by participants were coded for emerging themes through an inductive approach (Braun & Clarke, 2006). The themes identified were strongly linked to the data themselves (Patton, 1990, as cited Braun & Clarke, 2006). Initial open coding was conducted, which resulted in several different themes. Upon review and discussion between first author's creation of initial codes, themes regarding birth mothers' perceptions of support and their effectiveness throughout her pregnancy until the time of the interview were then identified and refined by three additional trained

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research assistants. The coding team and first author worked together to come to a consensus about the presence of themes via complete coding (e.g., discussing all meaningful codes). The coding team met bi-weekly to discuss and compare codes as well as resolve disagreements until consensus was reached. To further refine the presence of themes, the first author grouped each theme by their perceived similarity and difference and then labeled each grouping as either an overarching theme or a contributing theme. Finally, one graduate assistant on the coding team met with the first author to calculate reliability statistics for the presence or absence of each theme. Across themes, an average reliability of .88 was found, which exceeds the acceptable threshold of .70 (Hayes & Krippendorff, 2007).

To ensure a comprehensive examination of the data, the coding team completed a positionality worksheet to serve to discuss reflexivity (e.g., identities, connections to topic, experiences, etc.). The coding team frequently discussed and revisited positionality and reflexivity in subsequent coding team meetings in line with the integrity of doing qualitative research (Braun & Clarke, 2006). Across the four-person coding team, a couple had personal connections to adoption while others had none. Though the team varied in personal connections to adoption, the coding team actively consulted with other researchers who had closer connections to adoption such as a PhD student connected to the birth relative study.

4.4 RESEARCHER AS AN INSTRUMENT

It is imperative to acknowledge the role of myself as a researcher towards the sensitive experiences being investigated. To meet the standard to make biases explicit, below is my account on the catalyst of my interest in this topic along with a brief

documentation of biases I carried into the present research. As stated, reoccurring conversations on biases and positionality were discussed by the first and team of researcher.

My interest the population of birth mothers comes from my personal lived experience. Adoption has touched my family directly though my aunt and uncle who adopted my cousin at birth in a private domestic adoption. Though my cousin's adoption is a common topic of conversation within my family, I had noticed that my cousins' birth family was discussed at minimum. Perhaps, it had some to do with the terms as a closed adoption, but observably the topic of birth family seemed somewhat unspoken. It was not until my cousin became a teenager that she expressed wanting to learn about her birth family which then resulted in a quest to meet her birth family. As supportive parents, my aunt and uncle shared any information they had and helped to search and set up a meeting trip with her birth family for the first time. Their reunion was a transformative experience for us all.

Approaching the present research, there were underlying assumptions I held that I was not overtly aware of. That is, the assumption that most birth moms must be unfit was one I came to recognize and aligns closely with assumptions put forth by role theory regarding birth mothers (Blatner, 2000, as cited in French et al., 2013). Thus, my personal experiences related to the stigma that surrounds this population. Formerly, I was told anecdotes about my cousin's birth mom as struggling with drugs and lacking financial means for her other children. Thereafter the reunion, I heard of new stories about her birth mothers' heartbreak, pain, and ongoing longing about my cousin's well-being. I watched my cousin speak about her birth parents with empathy, a sense of relief, and a

newfound understanding. Given that this experience could skew my interpretation of the data in some unintended way, I have processed and shared that experience here in an effort to transparently own the biases that I bring to this study as the researcher. This series of events in addition to discovering the scarcity of research on birth relatives of adoption caused this research interest in birth mothers and my desire to vocalize their difficult experiences.

CHAPTER 5: RESULTS

Thematic analysis of interview data generated six overarching themes throughout the course of the placement process across participants. During our coding process, it became clear that some themes were more relevant in a certain phase. Thus, based on discussion with the coding team, the first author separated each theme (i.e., overarching themes) and subtheme (i.e., contributing themes) into one of three phases: pre-placement, during placement, post-placement (see Table 1). In pre-placement: (1) feeling stable or unstable in life circumstance, (2) early access to desired social support; in during placement process: (3) contained or expressed emotional responses, (4) access to timely information; in post-placement: (5) feeling ready to utilize resources, and (6) an ongoing process of emotional adjustment was found to be influential in supporting the well-being of birth mothers of relinquishment. Throughout the themes, the role of age and time since placement appeared to be of importance. There are a total number of twenty-four themes comprised by six overarching themes across three time points.

Table 1: *Overarching Themes and Contributing Themes from Thematic Analysis of Interview Data*

Phase	Overarching themes	Contributing themes	Quote	Average Reliability

Pre-Placement	**Theme 1:** Feelings of Stability or Instability in Life Circumstance	(a) Age (at pregnancy) (b) Freedom of choice (c) Contexts of Decision	"I really liked just being able to do whatever I wanted whenever I wanted. I was in excellent shape and enjoyed dressing up for nights out. I was working as a teacher in a self-contained classroom in a residential program. It was a house in a nice neighborhood in the city. … I loved my job. … I forgot to mention that I was also often suicidal" *(Sue, white, age 41 at time of interview).*	.88
	Theme 2: Early Access to Desired Social Support	(a) Tell some, not all. (secrecy) (b) Family, friends, and birth father support (c) Religious and moral pressures	"When I found out I was pregnant, he told me to get rid of it, to take care of it cause he couldn't be dad. I was moving a lot. I was working full time. I really just… I was living in between my parent's house and living with him. I had to keep my pregnancy a secret from a lot of friends and family for the birth dad, because he was embarrassed of me." *(Stephanie, white, age 36 at time of interview).*	.81
During Placement	**Theme 3:** Contained or Expressed Emotional Responses	(a) Avoiding or accepting feelings (b) Emotional hospital experience (c) Opportunity to bond	"I mean the worst part about it was obviously there was so many different emotions because this was a life-changing decision, so outside of that, uh, again I definitely feel like I had to make myself somewhat numb to be able to get through it, but I think things went as smoothly as they could've gone." *(Ava, white and Hispanic, age 36 at time of interview).*	.86

	Theme 4: Access to Timely Information	(a) "I didn't know" (b) Pressure by agencies (c) Power imbalances	"I'm like, wow, I wish that I knew about, you know [State] helping out single parents and [State] there are, there are so many benefits down here for women that are single, and men as well, that I wish that someone gave me the education and the material and the resources. Then I could've done it. And I still feel like as a 20 year old, er, as a 29 year old looking back on my 20 year old self, I could've done no matter what I didn't have resources, so that really frustrated me and I, so anyways going back to the working at the adoption agency, I see all these women that have these resources, but they are like, 'I'm gonna get clean I'm gonna do this I'm gonna go here' and then they don't follow through with it and I think about how my personality is and how I was back then and I'm like, man if someone told me about these resources instead of saying I'm a sinner, then I could've made it happen and I would've you know?" (*Victoria, Hispanic, age 29 at time of interview*).	.89
Post-Place ment	**Theme 5:** Feeling Ready to Utilize Resources	(a) Counseling (b) Peer support groups (c) Motivated birth mothers	"So I just recently found the [Foundation Name] and they held an event last Sunday, and I actually met birth mothers there and even they signed me up for a retreat…and so it's a few days, I'm not sure exactly what the activities are that are planned but I'm sure, you know, people will just be	.92

			sharing their stories and uh, I guess it's helpful because up until then I felt like wow, this- nobody does that, who does that, it's such a strange thing to do and then you meet people who also have been through this and uh, then it becomes kind of, I mean I don't want to say normal, but it makes it seem like your life is I guess not as crazy as you thought because other people, you know, there are people who have that experience out there." *(Christina, white, age 34 at time of interview).*	
	Theme 6: An Ongoing Process of Emotional Adjustment	(a) Trying to cope (b) Wanting better (c) Redefining identity	"…I had no idea the sense of loss I was about to feel. Nobody prepares you for that one. They don't tell you you're going to cry for hours every day after you place your child after your child is gone to their new home. They don't tell you how much you're going to miss that child. They don't tell you you're going to wonder what's going on with your child- is your child happy, is your child safe? They don't tell you that you're going to feel like garbage for not being able to pull it together and be a mother. They don't tell you those things. They don't tell you that you're going to grieve." *(Amy, white, age 49 at time of interview).*	.95

5.1 PRE-PLACEMENT

Unique to this time point, this phase was commonly characterized by the impacts of life contexts and availability of early supports. Frequent reports of birth mothers at this time included feeling unable to parent, unfit to take care of a child, and needing help along the way. Two overarching themes (theme 1: feelings of stability or instability in life circumstance; theme 2: early access to desired social support) and six contributing themes (age at pregnancy, freedom of choice, contexts of decision, tell some, not all, family, friends and birth father support and religious and moral pressures) distinguished this major phase, further explained below.

5.1.1 Theme 1: Feelings of Stability or Instability in Life Circumstance

Each participant ($N = 51$) shared details surrounding their perceptions of stability or instability of their life circumstances (e.g., the lived circumstances and conditions that directly impact one's life) at the time of pregnancy. Descriptions regarding life instability were more frequent than reports of stability among birth mother participants. Of the 51 participants interviewed, coders found that 39 (66%) participants suggested that at the time of pregnancy, their life was unstable. As a few examples, these participants named having no job, no partner, or being kicked out of their family's home. One participant commented: "I was severely underemployed, barely making enough to support myself. When I found out I was pregnant I was in the process of being evicted from an apartment, so I didn't have anywhere to live…" (*Amy, white, age 49 at time of interview*). The remaining 12 of the 51 ($\approx 24\%$) participants shared details that contributed to some feelings of stability at the time of pregnancy, such as having a degree, job, income, and support from others, but some still treaded instability. For instance, one participant

relayed stable characteristics such as excelling at a job she was passionate about and enjoying having the freedom of independence to date yet struggling with suicidal ideation and estrangement from family. She explicitly commented:

"I really liked just being able to do whatever I wanted whenever I wanted. I was in excellent shape and enjoyed dressing up for nights out. I was working as a teacher in a self-contained classroom in a residential program. It was a house in a nice neighborhood in the city. … I loved my job. … I forgot to mention that I was also often suicidal" *(Sue, white, age 41 at time of interview)*.

Age. The age of participants at time of pregnancy was reflective of a contributing theme. Coders' consensus found the vast majority of participants informally mentioned their age of pregnancy and did not regard their age as a factor in their placement decision. Nevertheless, a few participants seemed to talk about their age in cautious and apprehensive manners. Of the 45 participants who responded to the following question: *how old were you at the time of pregnancy* (see Codebook, Q14), 2 ($\approx 4\%$) reported feeling "too young" to be pregnant, while 1 ($\approx 2\%$) reported feeling "too old" to be pregnant at that time.

Freedom of Choice. Freedom of choice and decision-making pressures were identified as contributing themes. Participants discussed in detail how their situation at the time of pregnancy played a role in whether or not they had a truly voluntary choice in relinquishment decision-making. Of the 50 respondents to the following question: *did you ever feel that you were forced into placing [child] for adoption* (see Codebook, Q31), 32 (64%) indicated that their decision was not forced. The remaining participants 18 (36%) reported feeling at least somewhat forced into making the relinquishment decision. Some

shared that if their circumstances were even just slightly better, then they would have had more freedom to choose. Also represented were experiences of unsupportive pressures in making a relinquishment decision at the time of pregnancy. For example, Taylor discussed some external pressures involved in her relinquishment decision that are representative of this Freedom of Choice subtheme:

> "I think it was pushed on me than it was more of my decision. I think it was more of my family telling me that there was no other choice and that I needed to do it and that was it. Then me deciding that that was best." (*Taylor, white, age 30 at time of interview*).

Contexts of Decision. It seemed necessary for birth mothers' decisions to be understood within their unique contexts and factors. One notable factor reflective of this contributing theme is having experienced a trauma. Participants told accounts of various traumatic experiences that ultimately were influential in decision-making processes. Ava became pregnant from being drugged and assaulted. She described the role that this played in placing her child for adoption:

> "…obviously did play a part in the decision-making process also because ya know that's kind of hard to have to explain to a child ya know one day because they're gonna of course ask ya know where their father is" (*Ava, white and Hispanic, age 36 at time of interview*).

She went on to say that relinquishment "…was the smartest decision for her [Birth Child] to be able to have a good life." Painful and traumatic experiences, such as assault and rape, clearly impacted some participants' choices to place their child for adoption.

5.1.2 Theme 2: Early Access to Desired Social Support

All participants ($N = 51$) responded to questions surrounding their experiences of social support at the time of pregnancy. Of the 51 participants, responses on the following question: *with whom did you discuss the pregnancy* (see Codebook, Q16), coders determined that 6 ($\approx$12%) participants purposefully did not discuss their pregnancy with others and 13 ($\approx$25%) participants chose to purposefully not discuss their pregnancy with some, but discussed with others. The remaining 32 ($\approx$63%) participants spoke on discussing their pregnancy with others. In the following dialogue, this theme of desired social support is portrayed:

> Interviewer: Now when you found out you were pregnant, who did you talk about the pregnancy with?
>
> Participant: Not my parents. They never knew I was pregnant. Ever. I talked to my boss at work, actually. (*Cynthia, white, age 73 at the time of interview*).

Tell some, not all. It appeared that some participants noted discernable feelings of confliction with keeping pregnancy hidden from certain people in their lives whilst exposing pregnancy with particular others. This contributing theme captures a means to acquire distinct support in the pre-placement process. Accordingly, some participants told "need-to-know" people about their pregnancy and relinquishment decision. Generally, these were people they interacted with daily and who could visibly detect a possible pregnancy such as coworkers, bosses, and roommates. Participants detailed considerable risks to sharing pregnancy that resulted in a decision to keep it hidden from some. One participant discussed how she had tried to hide her pregnancy from her mom and when it was discovered, her mom was not happy about it and even threatened her:

"And so, I ended up moving back in with my mom and she was really pushing for, um, that, and at one point told me that if I decided to keep her, I could no longer live with her, I'll have to move out. She was pretty firm" (*Morgan, white, age 30 at time of interview*).

Because of this, some participants reported not discussing their pregnancy with family yet described still having all the support they needed. Nevertheless, participants who reported discussing their pregnancy with others seemed to have found the support they received as helpful in their experience.

In a parallel fashion, among the participants ($n = 6$; ≈12%) that made the choice to not discuss their pregnancy, further distress was noted for those who intentionally kept their pregnancy a secret. Each of those 6 participants made remarks that involve relationship dynamics characterized as uncertain or at times risk ridden. The following description made by a participant explains finally having to tell the birth father's mother of her pregnancy encapsulates this complexity:

Participant: We [Participant and Birth Father] kind of kept it a secret for a while because I was terrified to tell his mom [Birth Father's Mother] …but we finally told his mom at about 7 months. We brought her to a restaurant, uh a nice restaurant in the city we went to because we knew that she couldn't make a scene there, with all the people. And her quote, literally you know, one of those moments where you remember it clearly in your life, she said we told her, and she yelled, "are you out of your f**king minds?!" (*Rachel, white, age 44 at time of interview*).

Family, friends, and birth father support. Emotional support from participants' family members appeared as a clear source of distress in the pre-placement phase when it was lacking. For those who had emotional support from a trusted confidant, it appeared to have been helpful and supportive through negative pregnancy symptoms. For instance, Claudia (*biracial white and Mexican, age 24 at time of interview*) described, "I had a group of people who, you know, cared about me and my emotional state" and Brittany detailed, "I had so much support from my sister...she's my best friend...I feel like it definitely made it easier" (*Brittany, white, age 25 at time of interview*). Consensus responses from coders in regard to the following question: *how did your family react to the pregnancy* (see Codebook, Q17), indicated that 17 (≈40%) of 43 participants (who provided direct responses to this question) felt that their family was unsupportive of their pregnancy, 5 (≈12%) felt that their family was supportive of their pregnancy, and 21 (≈49%) participants responses indicated mixed feelings, either feeling support from their families in some ways while unsupported in others or feeling neither supported or unsupported from their families. The remaining 8 participants did not clearly respond to this question.

Additionally, consensus codes on the following question: *how did others (friends, coworkers, etc.) react to the pregnancy* (see Codebook, Q18), indicated that 26 (≈37%) of 40 respondents felt at least some support from friends and others during pregnancy that was helpful in their experience. In the case of family and friends offering support, we identified that for many participants in some conditions, the social and emotional support experienced was actually somewhat manipulative and resulted in feelings of "pressured" support. One birth mother expressed that though her parents and sister were supportive

and always say how proud they were, "none of them could accept when I expressed sadness or regret" (*Sue, white, age 41 at time of interview*). Thus, this illustrated the confines of support offered that was present for birth mothers in the pre-placement phase.

Further complicating pre-placement experiences and those that followed was the involvement of birth fathers (or lack thereof). Of the 47 respondents to the following question: *how did the baby's [father/other birth parent] react to the pregnancy* (see Codebook, Q19), 27 (≈57%) reported the birth father was fully unsupportive of the pregnancy. This subtheme seemed to be especially evident in the birth mother reports of purposeful social retractions. For example, participants acknowledged the role of birth fathers as a driving force to remaining in secret about the pregnancy. One participant shared,

> "When I found out I was pregnant, he told me to get rid of it, to take care of it because he couldn't be dad. I was moving a lot. I was working full time. I really just… I was living in between my parent's house and living with him. I had to keep my pregnancy a secret from a lot of friends and family for the birth dad, because he was embarrassed of me." (*Stephanie, white, age 36 at time of interview*).

As illustrated, contemplation in decision-making was complicated by support networks and heightened by relationship dynamics that were constraining or rejecting.

Religious and moral pressures. Represented by this contributing theme were participants who were involved in religious institutions at the time of pregnancy. The belief that you could do greater harm by keeping your child without a partner was relayed specifically in religious institutions, and these values were also insinuated within

27

communities and society. These feelings of extensive pressure convinced one participant to feel as if she was unfit to take care of her child, illustrated by the following:

> "The pressure on a birth mother was unbelievable. All, everything came down on you. Your parents, well in this case my mother, your culture, your neighborhood, your church, came down on you like a ton of bricks. I hate to use that euphemism, but. And you were convinced, and you had to be convinced, this is the important thing. In order to give up your child, you have to be convinced that you are unfit to take care of that child." (*Teresa, white, age 75 at time of interview*).

Similarly, the following participant's response reflects the impact of immense pressure felt from a participant's parents. She was told it would be a sin if she raised her baby unmarried,

> "…I'm emotional, I'm stressed out, my parents were fighting more than what I ever could remember, and they were just like, 'she's ruining her life, she needs to get married, if she doesn't do this, she's gonna destroy this baby's life,' and I guess being a parent now I didn't realize that I think my parents didn't realize how much that I heard them say these things like under their breath or like behind closed doors like…" (*Victoria, Hispanic, age 29 at time of interview*).

5.2 DURING PLACEMENT

Birth mothers commonly characterized this phase ultimately as emotionally difficult, and a crucial time period to acquire vital information. This phase was frequently reported by birth mothers as feeling unprepared in the placement process, in addition to feeling unprepared in experiencing their emotional state. Two overarching themes (theme 3: contained or expressed emotional responses; theme 4: access to timely information) and

six contributing themes (avoiding or accepting feelings, emotional hospital experience, opportunity to bond, "I didn't know," pressure by agencies, and power imbalances) distinguished this main phase, further addressed below.

5.2.1 Theme 3: Contained or Expressed Emotional Responses

Participants responded to questions that gave insight on their on their emotional health during their placement experience. From the 50 participants' responses to the following question: *how did you feel about being pregnant* (see Codebook, Q20), we found that 29 (58%) participants mentioned mostly negative feelings associated with being pregnant, 11 (22%) mentioned mostly positive feelings associated with being pregnant, and 10 (20%) mentioned a mixture of positive and negative feelings associated with being pregnant. One participant did not mention any associated feelings. Participants' descriptions of their feelings while pregnant contributed to the finding that emotional responses were either contained or expressed throughout the birth and placement parts of the process, which represented an overarching theme. It is important to note that the classification of contained or expressed feelings were not mutually exclusive; some participants engaged in both expression and containment at differing points distinctly during placement. The following contributing themes further detail emotional states and experiences of birth mothers during this time point.

Avoiding or accepting feelings. Embodied by this contributing theme, birth mothers alluded to both the avoidance and acceptance of their feelings during placement and of their placement decision. From the 50 participants, of whom provided direct responses to the following question: *who supported you in your decision* (see Codebook, Q30), coders consensus found that (18%) did not feel any support from any of their

family, relatives, siblings, significant other, friends, roommates, etc. Implied as a means to cope and even survive during this phase, many participants actively blocked and pushed aside their feelings. This manifested in participants' difficulty to describe their feelings and recall certain experiences. Many of them alluded to their emotional experiences as too hard to bear:

> "I mean the worst part about it was obviously there was so many different emotions because this was a life-changing decision, so outside of that, uh, again I definitely feel like I had to make myself somewhat numb to be able to get through it, but I think things went as smoothly as they could've gone." (*Ava, white and Hispanic, age 36 at time of interview*).

To functionally contain feelings, some participants limited their access to their birth child immediately after delivery. For instance, Melissa (*white, age 29 at time of interview*) said, "I blocked a lot of my feelings and emotions. I ate a lot. [Birth Child] stayed in a separate post-partum room with his new parents and this was due to my request, not theirs…"

Of the participants that provided details of perceived acceptance of emotional responses in contrast to active avoidance of emotions during the placement process, some descriptions of positive well-being (e.g., satisfaction, contentment, relief) were conveyed. However, engagement with emotions must not be understood as exclusive to positive emotions. Among the participants who reported positive responses about being pregnant, like Kristen who shared, "as far as being pregnant went, I loved my daughter, it was kinda like our own little world," (*Kristen, Anglo-Saxon, age 39 at time of interview*),

some revealed negative aspects within the positive. The following participant told of her pregnancy as essentially lifesaving:

> "Well, I was very happy to be pregnant. I do think that the pregnancy saved my life. … being pregnant gave me something to care about you know, things were not good… it was a very rough time for me, and I was ready to commit suicide but then I found out I was pregnant and realized I was pregnant, I dedicated myself to a new life then and bringing it to fruition and giving it a healthy place." (*Deborah, white, age 61 at time of interview*).

Emotional hospital experience. Of the participants' narratives that reflected primarily emotional avoidance or containment, common response reflections were of guilt, loss, isolation, and avoidance. The birth hospital stay appeared to be a strong emotional experience for even those who managed to keep their emotions contained. Coders' consensus found that from the following inquiry: *please describe your feelings during your hospital stay with the baby just after giving birth* (see Codebook, Q24), that well over half of participants, 35 of 51 (≈69%) mentioned negative feelings involved with their hospital stay. These negative feelings seemed to be geared towards two main channels: giving birth knowing you have to say goodbye to birth child and the experience of unacceptable actions and inadequacy on part of hospital personnel, resulting in lack of support. The following is a clear example of hospital personnel doing acts against birth mothers' wishes that resulted in a negative hospital experience:

> "They [Hospital Staff] immediately removed him [Birth Child], I have no idea where and took me back to the room and I began the process of asking to see him, I did get a shot, I learned about that later… to dry up my milk, which I did not

request and would not have wanted because I was planning on nursing for three

days." (*Dawn, white, age 54 at time of interview*).

Along with others, one participant's hospital experience was described as extremely hard

and resulted in repressing emotions and inducing guilt,

"You feel guilty for bonding 'cuz you're like, well, I'm not gonna keep her [Birth

Child], like, they are, so they [Adoptive Parents] should get every moment they

can with her [Birth Child], I don't know and so I was in the hospital for three

days. Day one, it was my mom, and my sister, and then [Adopted Father] and

[Adopted Mother] stayed all day and I did not want them there, I wanted them to

leave but I didn't know how to be forward with them I didn't wanna be rude, so I

just stayed quiet…" (*Victoria, Hispanic, age 29 at time of interview*).

Other participants felt that the presence of their support networks (e.g., birth father,

partner, family, friends, adoptive family) during birthing hospital stay allowed for more

emotional vulnerability and expression. One participant described her positive experience

with the adoptive parents and acknowledged feeling supported as the decision-maker

during her birth hospital stay,

"The [Adoptive Parents] always made sure to make us comfortable and make the

decisions for the birth and pregnancy. We got to snuggle and feed him anytime

we wanted. The whole hospital was just in love with us and our story, and them.

They ended up staying in our town for an extra couple of weeks, so they didn't

feel like he was ripped away from us so soon. My mom, son, brother came. Dad's

mom came. Everyone got the same love and affection and needs filled from

[Adopted Child] and the [Adoptive Parents]. Their happiness and love made the

experience what it was" (*Emily, white, age 25 at time of interview*).

This description provided insight that with the availability of others to offer emotional

support, it might have been possible for birth mothers to have been better supported and

adjusted during this phase. Additionally, responses to the following question: *did any*

members of your family or the adoptive family come visit in the hospital (see Codebook,

Q25), revealed that the majority of participants (*n* = 37; 49%) mentioned either their

family members or adoptive family members were present during the birth mothers'

hospital stay, including after giving birth. The hospital stay marked an opportunity for

both social and emotional support. As implied by participants, this experience was

difficult and even at times traumatic. Thus, felt support at this point in the relinquishment

process appeared highly beneficial.

Opportunity to bond. For some participants, having a moment alone with the

birth child in the hospital was described as beneficial. In some cases, adoptive parents put

a stop to time together for the birth mother and child during the hospital stay. Similarly,

in other cases, hospital personnel put a stop to bonding time against birth mothers'

wishes. A participant recognized her hospital experience as complicated and lacking her

support needs,

> "This is their [Adoptive Parents] first child, so, of course they wanted every
>
> second with him [Birth Child]. I'm in recovery, but I still needed some bonding
>
> time with him regardless. I was steadfast on my decision, regardless the guys
>
> were going home with my child that day. But with it, I felt as if I wasn't given
>
> ample time, so I kinda flipped out, you know, hormones run high. I said, [to the

Mediator from Agency] bring that child to me right now, I need time with him [Birth Child], regardless of if it's two or four hours, I don't care, but I need to be able to bond with the child right now. Otherwise, this will not go according to plan. So, she [the Mediator] brought the child in, the guys [Adoptive Parents] were actually really nervous that I was bonding with the child and was going to keep the child" (*Brianna, Polish, age 37 at time of interview*).

Though participants' personal accounts of their emotional responses were varied and fluctuated based on the process moment and their own needs, it appeared that the objective for emotional support must respect the individual choice by the birth mom, not by the birthing hospital or any involved others.

5.2.2 Theme 4: Access to Timely Information

Represented by this overarching theme, the information presented to birth mothers sometimes was received too late and not at the "right" time, often resulting in later feelings of regret and guilt. Coding from the following question: *did you feel supported during your pregnancy* (see Codebook, Q21), revealed that 17 (34%) of 50 participants (one participant did not provide a response) felt unsupported, while 25 (50%) felt supported, and 8 (16%) felt both supported and unsupported. A participant noted the importance of having information at the right time and subsequent feelings of regret:

"I'm like, wow, I wish that I knew about, you know [State], helping out single parents and [State] there are, there are so many benefits down here for women that are single, and men as well, that I wish that someone gave me the education and the material and the resources. Then I could've done it. And I still feel like as a 20 year old, er, as a 29 year old looking back on my 20 year old self, I could've

done no matter what I didn't have resources so that really frustrated me and I, so anyways, going back to the working at the adoption agency, I see all these women that have these resources, but they are like, 'I'm gonna get clean I'm gonna do this I'm gonna go here' and then they don't follow through with it and I think about how my personality is and how I was back then and I'm like, man if someone told me about these resources instead of saying I'm a sinner, then I could've made it happen and I would've you know?" (*Victoria, Hispanic, age 29 at time of interview*).

Additionally, Morgan discussed the usefulness of receiving information on alternatives and options early on,

"One thing I would say is I did, prior to meeting [Adoptive Father] and [Adoptive Mother], I already knew that I did not want an abortion or anything like that. Um, but I did go to Planned Parenthood and I actually heard them talk to me about each side of the spectrum, so, abortion, adoption, and keeping. And that was very informational" (*Morgan, white, age 30 at time of interview*).

"I didn't know." This contributing theme reflects a common direct response by some participants who discussed not being provided information. Participants discussed challenges during the placement process in accessing proper information to appease their support needs from adoption agencies, agency workers, social workers, health care providers and affiliated organizations. In the following questions: *did you work with an adoption agency and if so, did the agency offer you any form of help* (see Codebook, Q22), coders found that of a total of 41 participants who provided direct responses, the majority of participants, (39; ≈95 %) used an agency, and 2 out of these 39 (≈5%) who

used an agency were offered no forms of help (e.g., classes, counseling, financial supports, resources) while (2; ≈4%) did not use an agency during their pregnancy. Birth mothers' shared experiences marked by disconnect and conflicting elements of information regarding options and services appeared to leave many feeling uninformed, unprepared and alone in this life-altering process. It was not uncommon for participants to recall being uninformed about other options. As illustrated in the following excerpt, a participant reflected on having no information provided to her from the agency she used:

"I didn't get information; I mean, one can only make a choice when there are really a range of choices and can be informed about the pros and cons of each of them. And I say that it did absolutely did not happen. Did I keep making a decision? And moving forward in a very tight time frame? And having him taken away from me? Yes, but even still I did keep deciding and I did, I ultimately did that, but I don't think it was a fully informed choice" (*Dawn, white, age 54 at time of interview*).

Otherwise, some of the participants who used an agency reported supports offered but chose not to utilize them. When information was unavailable or decisions were made to not work with an agency, they remedied by turning to informal information sources such as the internet as a means to appease their concerns. One participant stated, "I made it all by myself. I didn't have a counselor or an agency or anything like that. It was all self-education. Yay for the internet, right?" (*Hannah, white, age 27 at time of interview*).

Pressure by agencies. Opportunities for birth mothers to explore alternative options (e.g., raising a child, abortion) were not necessarily the rule. Coders found that of the 45 participants who directly responded to the following question, *did you consider*

any other plans other than adoption (see Codebook, Q28), 10 (≈22%) mentioned they only considered adoption. Beyond this, some participants indicated that they experienced pressures from agencies to push adoption without inquiring about other options. "I kind of felt like they [Adoption Agency] wanted my baby and so they didn't talk about any other options." (*May, white, age 67 at time of interview*). Regarding the prior stated question: *did you work with an adoption agency and if so, did the agency offer you any form of help* (see Codebook, Q22), 29 out of the 39 (≈74%) that discussed having at least one form of help when working with an agency seemingly were more satisfied and supported in their decision than those without a form of help. Coding consensus from the following question, *did you feel supported in your decision* (see Codebook, Q29), revealed that of the 46 respondents, 23 (50%) mentioned feeling supported in their decision. Although there were expressions of negative experiences with agencies, some participants expressed their main source of support came from their agency's assigned case worker. Notably, factors such as information and resources available, reputation, location, and others (e.g., a personal connection) were influential in their commitment to work with a particular agency. Findings from coders on the following question, *if worked with an agency, what factors influenced your decision to place your child through [name of agency]* (see Codebook, Q38), demonstrated that for the majority of participants, 35 of 38 (≈92%; 13 participants either were not asked this question directly or they responded with unclear answers on this question), at least one factor (e.g., information and resources, reputation, location or other) was influential in deciding to work with an agency. In the following response, one participant details her experiences of feeling confident in the agency's ability to provide information:

"I needed somebody that could actually provide me with information and help me along the way, you know. So, and, that agency looked like, like, they had that more than the others. So, that's how we made that decision" (*Morgan, white, age 30 at time of interview*).

Power imbalances. During the placement process, some participants spoke about substantial implications of receiving support and information, particularly with reflection on power differentials and imbalances. Feelings of inequality commonly surfaced between birth mothers and agencies, attorneys, and adoptive parents. Some identified the power of agencies in coercive persuasion. Dawn (*white, age 54 at time of interview*) reflected back on her experience with agency persuasion as she shared, "…the extent that an adoptive family gets to insert themselves in any way in a women's pregnancy, I feel strongly that that's coerced persuasion." In the following, one participant discussed feeling inferior and without a voice during the placement process:

"I felt like such a loser and incompetent and horrible that all these other people— the attorney, the prospective adoptive parents, like they, 'they're all better than me, they're all smarter than me, they all have more money than I do'—it was really, there was such a power differential that I sort of felt I should be grateful. 'Oh, I should be grateful that my living expenses are being taken care of, I should be grateful that these people are going to take care of my child'." (*Rebecca, white, age 47 at time of interview*).

5.3 POST-PLACMENT

Unique to this phase, birth mothers characterized this time point with a greater willingness than in earlier phases to access available resources and to cope with difficult

emotions. Frequent reports by birth mothers acknowledged experiences of painful post-placement emotions. Two overarching themes (theme 5: feeling ready to utilize resources; theme 6: an ongoing process of emotional adjustment) and six contributing themes (counseling, peer support groups, motivated birth mothers, trying to cope, wanting better, and redefining identity) distinguished this time point, as described in detail below.

5.3.1 Theme 5: Feeling Ready to Utilize Resources

This overarching theme details an observed willingness birth mothers demonstrated of utilizing resources upon reaching post-placement. Of the 43 participants who responded to the following question, *after the pregnancy,* w*hat kind of support, if any did you receive from the agency or others* (see Codebook, Q40), 27 ($\approx 63\%$) mentioned receiving social, financial, and/or emotional support after the placement. 24 ($\approx 56\%$) were identified as receiving at least one realm of social or emotional support through their agency or others (e.g., adoption attorney) if they did not use an agency. This demonstrated that receiving social and emotional support was common post-placement. Participants spoke about receiving helpful supports that came specifically from an agency as well as about finding useful supports on their own. Their motivation and interest to seek out supports and resources seemed to be prominent.

Counseling. One resource employed by the participants post-placement was counseling services. Many participants of the 24 ($\approx 56\%$) who identified receiving at least one realm of social or emotional support post-placement described reaching out for counseling services at this time. The main purpose counseling was sought out was for emotional support as it provided healing and validating utilities. Counseling was often

spoke about as a positive and safe space to work through feelings of loss and grief. Although for a few participants, their counseling experience applicable throughout the process seemed to be more detrimental than beneficial. One participant discussed her deeply negative impression of the counseling she received as a support from the adoption agency: "they offered "counseling," but the counselors had an agenda and were clearly attempting coercion. I did not trust them" (*Sarah, white, age 40 at time of interview*). Similarly, another participant questioned the counseling services her agency provided as she reflected on the unethical counseling services:

> "The agency provided what they called counseling, which I don't consider counseling because there was no confidentiality involved, if that makes sense. Like I would talk about things, I would talk about what I was going through, I would talk about the birth father, I would talk about all of these things. And my social worker would take notes and those notes were what became my file about who I was and who this child was. So, like those were shared with the adoptive parents. None of it was confidential. It was all related to- and like my agency, the agency I used I feel like was fairly ethical. I have a good, ongoing relationship with the social worker actually. I still do a lot with the agency. But like to call that counseling, it wasn't counseling." (*Nicole, white, age 38 at time of interview*).

Peer support groups. Participants' involvement in birth mother support groups post-placement were found to be of value to them. The support groups discussed not only appeared to provide a sense of community and a source of connection, but many of them also served as a starting point for birth mothers to begin a "search and find" journey. A participant who placed a couple decades ago shared:

"I'm a member of [Support Group] and on Facebook every day they have stories

about people that have searched and found, or they'll say so-and-so is looking for

and yeah I mean I can't imagine what it would be like now with the internet"

(*Sandra, white, age 69 at time of interview*).

Connections to various peer support groups were made through birth mothers' respective

adoption agencies and also through individual searches. Notably, all participants who

discussed involvement in birth mother groups regarded their experience of membership

with birth mother groups to be positive. A participant alluded to the close-nit nature of

her agency's support group: "we have a support group lunch every month, it's awesome.

We also have our own secret Facebook page with all the girls from the agency, it's very

helpful" (*Mackenzie, white, age 31 at time of interview*). Similar in experience, Amanda

(*white, age 36 at time of interview*) shared that,

"Every year they [Adoptive Agency] have a birth mothers' retreat where a bunch

of birth moms who have placed through the agency can get together and we have

pampering, there is a massage therapist there, we usually do some sort of arts and

crafts."

Additionally, Brittany discussed her newly found membership in a birth parent support

group hosted by her adoption agency. She reported, "it was a little emotional of course

but I feel like it does help" (*Brittany, white, age 25 at time of interview*). This

participant's insight implies a helpful yet complex characterization of support groups.

Interestingly, participants spoke about the interview portion of our study as a

positively impactful experience. Expressed gratitude was made by many to interviewers

for providing a space to openly share their experience. Some, like the following

41

participant, recalled that this chance to talk through their whole experience has been few and far between, "I appreciate that this study is being done. Like I said, nobody wants to hear from the birth mothers. Nobody." (*Amy, white, age 49 at time of interview*). These participants alluded to feeling like the interview process was therapeutic and accessed emotional releases (e.g., crying) while answering interview questions. Further, some wanted to know if other birth mothers had a similar experience to theirs.

Motivated birth mothers. Represented by this contributing theme, some birth mothers seemed much more highly involved in post-placement resources than others. However, this may be characteristic of each individual's personal strategies to coping. These distinctly determined birth mothers told of their many associations and affiliations. For instance, some disclosed attending adoption foundations and events, birth mother retreats, speaking at seminars, joining Facebook groups, workshops, panels for adoption agencies, writing books, and engaging in adoption research. According to one participant, talking with other birth mothers in a foundation she joined was helpful in feeling less alone:

> "So I just recently found the [Foundation Name] and they held an event last
>
> Sunday, and I actually met birth mothers there and even they signed me up for a
>
> retreat…and so it's a few days, I'm not sure exactly what the activities are that are
>
> planned but I'm sure, you know, people will just be sharing their stories and uh, I
>
> guess it's helpful because up until then I felt like wow, this- nobody does that,
>
> who does that, it's such a strange thing to do and then you meet people who also
>
> have been through this and uh, then it becomes kind of, I mean I don't want to say
>
> normal, but it makes it seem like your life is I guess not as crazy as you thought

because other people, you know, there are people who have that experience out there" (*Christina, white, age 34 at time of interview*).

5.3.2 Theme 6: An Ongoing Process of Emotional Adjustment

This theme captures birth mothers' life-long involvement in managing the emotional aftermath of relinquishment. Coding responses to the following question: *have you noticed any changes (e.g., improvements or declines) in your health (e.g., physical, mental, emotional) since the time of placement* (see Codebook, Q56), demonstrated that of the 45 participants who responded, 36 (80%) mentioned noticing changes in their health since the time of placement. Participants' responses tended to involve reports of more difficulties related to their emotional adjustment than physical adjustment. Lasting emotional symptoms identified by birth mothers in describing their emotional health status included, but were not limited to, feelings of shame, depression, grief, despair, and guilt. Responses such as the one below further suggest the life-altering consequences of being unprepared in handling the emotional aftermath,

> "…I had no idea the sense of loss I was about to feel. Nobody prepares you for that one. They don't tell you you're going to cry for hours every day after you place your child after your child is gone to their new home. They don't tell you how much you're going to miss that child. They don't tell you you're going to wonder what's going on with your child- is your child happy, is your child safe? They don't tell you that you're going to feel like garbage for not being able to pull it together and be a mother. They don't tell you those things. They don't tell you that you're going to grieve" (*Amy, white, age 49 at time of interview*).

Trying to cope. To appease feelings of grief and loss, participants described engaging in approaches that seemingly impacted adjustment. Some alluded to destructive coping strategies as such as drinking, suggesting attempts to escape from intense feelings and emotions. Others alluded to different and often positive coping strategies, such as reaching out to trusted others, acquiring any or more information about the birth child, gaining closer relationships to adoptee and adoptive family, and reuniting with the birth child in a once closed adoption. Although views on reunion varied based on multiple factors (e.g., type of adoption, time that adoption took place, location constraints, etc.), reunions appeared to provide those birth mothers with greater feelings of closure. The following from one participant is reminiscent of this idea, as this birth mother describes her reunion experience with her birth child. She reflected on evolved dynamics between herself and the birth child, and also shared her awe upon learning that her birth child named their own child after her. She responded to the news by telling her birth child, "I feel like you have forgiven me for putting you up for adoption. We had tears coming down…" (*Erin, white, age 62 at time of interview*). Another participant told of her journey to gain closure in which she and her birth child went back to the hospital where she had given birth to him:

> Participant: "After [Birth Child] and I met we went back to the hospital, and I think that was kind of a closure for me. The hospital actually let us go into the room that he was born. They would never do that now. But then I was able to leave the hospital with him [Birth Child]. And that really gave me so much closure" (*May, white, age 67 at time of interview).*

Wanting better. This contributing theme suggests a birth mother's yearning for the opportunity to share with her birth child her own reasoning as well as reconciling and communicating intentions related to the placement decision. Communicating intentions seemed to be of importance, yet also a major challenge for some participants. For instance, some discussed roadblocks to opportunities to do so, such as in cases of closed adoptions and of disapproving adoptive parents. One participant wrote letters to her birth child in hopes that one day she would be able to share it with him. She explained,

> "I wrote a letter right after I gave birth. I wrote a letter to [Birth Child] that I still have. Um just to explain the why and where I was. And the whole thing I said to you [Interviewer]. I wanted better for him than I could give him. And I just knew without knowing without even understanding what the word resentment meant. I just knew I didn't want to resent my own child." (*Sharon, white, age 35 at time of interview*).

Related to this post-placement experience of reconciling intentions of wanting better for the birth child, birth mothers alluded to the importance of having agency in choosing adoption. Coders found that of the 49 participants who responded to the following question: *did you have a role in choosing adoption for [child]* (see Codebook, Q26), 40 (≈82%) felt as though they had at least somewhat of or a complete role in choosing adoption for their child. The remaining 9 (≈18%) felt that they did not have a role in choosing adoption. It seemed important for birth mothers to address the intentions behind making that difficult decision as well as the external factors that essentially made that decision for her. Aligned with some other participants' perceptions, one stated that, "I knew I could not provide the life I wanted [Adopted Child] to have…I wanted him to

have stability to be financially secure, and most of all loved unconditionally. I choose adoption for his best interest" (*Mackenzie, white, age 33 at time of interview*). In many ways, birth mothers appeared driven to conquer both internal and external stigma related to their decision. It seemed important for birth mothers to come to terms with their "why."

Redefining identity. Nevertheless, discovering a newly defined identity appeared to be a part of birth mothers' adjustment in post-placement. The relinquishment experience impacted birth mothers' sense of self and identity as a mother. Participants came up with their own terms based on their experience with adoptive families while balancing their own conceptualizations as a birth mom. For example, one participant described feeling like a "ghost mom" (*Rachel, white, age 44 at time of interview*) and another participant described feeling like a "side parent" (*Elizabeth, white, age 30 at time of interview*). Correspondingly, a few participants expressed experiences with their adoptive family as negatively reflective of their identity. Coded responses from 50 participants to the following question: *how would you describe your current feelings about [child]'s adoptive family* (see Codebook, Q72), showed that 9 (18%) had mostly negative feelings about the adoptive family. For others, positive feelings about the adoptive family appeared to translate into feeling greater satisfaction towards themselves and their decision post-placement.

Renegotiating a new identity seemed further complicated for participants who had children following a relinquishment. There was an implied struggle between renegotiating an identity as both a birth parent and a "normative" parent. However, those who identified as a birth mother advocate seemed at an advantage in their adjustment

following relinquishment. One participant cultivated her advocacy by writing a book on her experience with hopes her experience could be supportive for others. Another found purpose in fighting stigma that birth mothers experience by talking on panels and hosting workshops around breaking the stigma. She explained,

> "I'm extremely passionate about changing, changing the view that people have,
> the incorrect perception that people think that they have about birth mothers and
> the fear people live under, uh, birth mothers changing their minds, or stealing
> their babies off of playgrounds..." (*Sharon, white, age 35 at time of interview*).

In summary, birth mothers often indicated in the post-placement phase common experiences of ongoing emotional challenges but also identified positive supports for their well-being and adjustment following placement.

CHAPTER 6: DISCUSSION

This research study investigated birth mothers' firsthand perceptions of their experiences with different sources of support (e.g., social and emotional) tied to circumstances of relinquishing parental rights. We sought to better understand the circumstances of birth mother's decisions for placement, the sources of support they described engaging in, and how different sources of support are perceived to be associated with birth mothers' adjustment. In line with our expectations, our thematic findings indicate that birth mothers rely on many forms of support throughout the placement process and beyond, aligning with prior research (Madden et al., 2018). Conversely, our thematic findings also acknowledge complications and limits of support, particularly in availability, accessibility, and even desire. As such, this study provides

important insights into how support can affect birth mothers throughout the relinquishing process.

In this study, each theme: *(pre-placement) feeling stable or unstable in life circumstance, early access to desired social support; (during placement) contained or expressed emotional responses, access to timely information; (post-placement) feeling ready to utilize resources, and an ongoing process of emotional adjustment* often appeared to be strongly present within their respective phase. Also, we found that each overarching and contributing theme were interconnected. Though each theme was uniquely relevant and applicable to each distinct time period (i.e., pre-placement, during placement, and post-placement), there was overlap and continuation of particular themes of support to each phase. As such, pre-placement themes affected during placement themes and post-placement themes; during placement themes were contingent upon pre-placement themes and influenced post-placement themes; post-placement themes were impacted by the pre-placement and during placement themes. Regardless of how long-ago placement occurred, birth mothers often had parallel experiences to one another based on each phase (i.e., pre-placement, during placement, and post-placement) considered. These interwoven findings are interpreted though the following lens of interconnections and time.

Interconnections. In accordance with Boss' (1988, 2002, 2006) family stress theory, birth mothers' perceptions with life stressors at time of pregnancy raised concerns about being able to raise a child. The influence of life circumstance involved being stable or unstable at time of pregnancy (theme 1). Depending on the participants life stage or situation at that time, there were indications that more stability (e.g., having a job and

income) or the converse, more instability (e.g., having no job or income) was influential in proceeding. Unstable life circumstances at time of pregnancy or during pre-placement sounded to have confirmed many of their relinquishment decisions and sometimes heightened negative post-placement outcomes. If life circumstance positively improved from pregnancy forth, birth mothers were still to deal with the decision made, highlighting immense pressure, stress, and burden. Tied to later phases, participants rationalized their placement decision by reflecting on the instability they were in at that time in an effort to make meaning of their relinquishment decision while adjusting post-placement. Along with life circumstance and stressors, they also entered a complicated examination process composed of normative societal views and other contextual impacts. Some highlighted motherhood values that fall in line with Western motherhood ideals (March, 2014). For instance, what judgments would their friends, families, and others make of their pregnancy and placement decision? In line with past research, our findings indicate the influence of negative social perceptions and stigma birth mothers face (Leon, 2002; March 2014, Neil, 2012).

Birth mothers who were interviewed for this study unveiled a new and important discovery on purposive boundaries with obtaining support. Pertaining particularly to social supports, more interconnections were employed between themes. Starting at pre-placement, birth mothers actively assessed risks of social disclosure (theme 2). While in contemplation, birth mothers' concerns were on not only deciding who to tell, but also when to tell people. For instance, we found that more participants accessed friend supports than family supports. This interlinks to the sentiment of 'you can pick your friends but not your family.' If they chose for a variety of founded reasons to uphold

secrecy about their pregnancy or placement plans, post-placement expressions of shame and guilt were evident, which contributes to existing knowledge about birth mother's post-placement experiences (Aloi, 2009; Deykin et al., 1984; Henney et al., 2007). Still, birth mothers alluded to increased stressors when remaining in secret, even in cases that told only 'need-to-know' people (e.g., a family member that housed them) in their lives. On the other hand, peer support was noted to be advantageous for many birth mothers (theme 5). Those who were involved in birth mother support groups thought it was valuable to be a part of a safe community space where emotions can be heard, validated, and acknowledged. Engaging in a community of others of related experienced appeared to be key to post-placement adjustment. Plus, our study seemed to be a helpful resource in supporting participants in the current place of adjustment. We found that when peer support was present in any phase, high levels of felt support were described.

Participants reveled similarities with experiences and feelings of being uninformed in options for support. The timing of receiving information was regarded as essential (theme 4). This extends existing knowledge about birth mothers as this informs of an uncharted complexity beyond just needing and wanting support as it acknowledges why some birth mothers may not act on utilizing supports (e.g., perceived risks, circumstances). Indeed, at different points in the interview, a few participants made contradictions within their own reports of support. This may suggest another complicated function of perception when making sense of difficult past experiences.

Following the ramifications of coming to the decision to relinquish rights to a child, birth mothers demonstrated a range of emotions that arose in pre-placement and expanded in the following phases (theme 3). There were considerable parallels yet

notable diversity in participants emotional health following relinquishment of their child. Yet, the birth mothers who were interviewed for this study revealed similar grief and emotional health reports as those defined by prior research (Henney et al., 2007; March, 2014). Participants alluded to feelings of acceptance and avoidance of feelings, which may have significance in attempts to reduce symptoms of distress (Neil, 2012). This study specifically examined our sample of birth mothers' post-placement changes in health (theme 6). Although participants were not formally asked about grief and instead were asked about any noticeable changes in their emotional health since time of placement, we found evidence that confirms a prevalence of life-long distressing symptoms (Aloi, 2009). Correspondingly, some participants noted varied psychological issues they delt with before the placement that ultimately had an effect on their current reports of adjustment. For those who endured a trauma previous to or surrounding pregnancy, there were added complications and connotations of an even greater need for support. Thus, this study cannot answer the extent to which birth mothers mental distress predates or follows placement but linked were connections to their descriptions of post-placement feelings as reflexive to their feelings in pre- and during placement. However, the reality of not physically parenting their birth child yet psychologically thinking about their birth child to whom they are deeply connected to contributed to participants notions of identity renegotiations. Whether implied or expressed, all participants indicated a strong motivation for what is best for their birth child which informed associations of post-placement feelings back to pre-and during placement experiences. To a greater extent, their expressions suggested and confirmed prior findings on a yearning to give them anything better than they ever could (Henney et al., 2007).

Time. This study also calls to attention the role of age and time since placement. The time placement occurred was a discernable influence to support available. In comparison to some responses about the time of pre-placement, we found distinguished evidence of inconsistent views with acquiring external social supports and peer supports (e.g., other birth mothers) overtime. Participants who placed more than 25 years ago appeared have engaged less in obtaining peer support than the birth mothers with more recent placements. In those who placed over 25 years ago, there seemed to be less involvement in social support channels yet in post-placement, these birth mothers began engaging in social supports. Additionally, we found that themes across time spans connect. That is, pre-placement themes ultimately affected during placement themes and post-placement themes. The results of this analysis demonstrate that for many birth mothers, theme prevalence varied by length of time since children were placed. This suggests that with the passage of time and appropriate support, appropriate adjustment and healing can occur. With the range of time periods between this wide sample of birth mothers in time of placement and considerable variability in time since the adoption placement (8 months to 50 years), sources of support generally differed and were found to be more extensive among those whose children were adopted in more recent time periods.

6.1 STRENGTHS AND LIMITATIONS OF THE STUDY

This study represents a unique contribution to the field of adoption research as it provides birth mothers own accounts on their experiences concerning support encompassing relinquishment. Though there are a few studies that consider the role of support for birth mothers (Brodzinsky & Smith, 2014), our study delivers a more current insight of support needs from knowledgeable birth mothers, even in a wide scale of

placement years. Though recruitment for this hard-to-reach population generally poses difficulties, such as slowing the process, this study overcame this though drawing from a larger longitudinal project and utilizing other relevant means (e.g., snowball sampling). Our study's sample size ($N = 51$) is markedly larger than other studies on birth mothers. It was most beneficial to include a vast sample as it uncovered a range of perceptions and experiences. The findings derived from this study are limited by the small range of demographics of participants sampled most of whom were white and middle class. We note that participants self-selected to the study and therefore birth mother participants potentially represent a sample with relatively positive experiences of contact due to self-selection bias (Madden et al., 2017). Perhaps, this implies that our participants may have been more well-adjusted, empowered and motivated to voice their experience for opting to our study. Plus, all interview data here may be subject to retrospective bias (Madden et al., 2017). The birth mother interviewees recall of information is limited by the restrictions of their own memory.

As with all research, the findings derived from this study are not without limitations. It is necessary to be cognizant of limitations encountered and for researchers to make them known (Creswell, 2014). Restrictions present in this qualitative study are that findings arise mainly from the researcher's interpretations. Namely, the qualitative restrictions are of the researchers' interpretations and bias. While developing the study, the coding team provided a full description of their personal experience in relation to the study. It is important for researchers of qualitative work to demonstrate validation strategies to enhance the credibility of qualitative research. Validity is the attempt to assess the accuracy of findings and of measuring what is intended (Creswell, 2014). As

recommended by Creswell et al. (2007), qualitative researchers should engage in at least two of them in any given study. To avoid researcher bias, one validation strategy within this study was clarifying researcher bias. Secondly, a limitation, as recommended by Creswell et al. (2007) is to make use of prolonged engagement and persistent observation. This strategy was a source of limitation in this study as it requires checking for misinformation from informants. This is quite time consuming and labor intensive and due to the scope of the project, there were limitations of time and resources. Such as, the validation procedures of peer audits and external audits aren't obtainable in the present study due to time-restrictions and cost.

Additional challenges were encountered during data collection within this method of field research. Particularly, challenges posed were of accommodating schedules for interviews between participants and researchers as well as securing a compliant space for participants to complete the interview. Regarding the site of phone interviews, it was common for interviewers to come across participants concerns of having children nearby and needing to tend to caretaking duties for their families' during the interview. Researchers were understanding and cognizant of the sensitivity tried to responses and participants needs (e.g., interruptions of all contexts) to tend to family duties as they arose. Further challenges faced were on the mechanics of conducting the interviews. Interviewers sought to conduct interviews in a timely manner (e.g., schedule following interviews efficiently) as participants might become discouraged about long delays in scheduling interviews.

6.2 CONCLUSION AND IMPLIATIONS

Among this understudied population, research is vital to support birth mothers' positive outcomes and experiences more effectively (Brodzinsky & Smith, 2014; Madden et al., 2018). Child relinquishment comes with long-term ramifications for the overall well-being and adjustment of birth mothers. Still today, too many birth mothers are inadequately supported following a child relinquishment decision. Birth mothers need support from those around them as well as resources of support to mitigate detrimental distress. Our sample of birth mothers have highlighted the complexity of issues faced throughout the process of child relinquishment. We highlighted their knowledgeable accounts surrounding social and emotional support needs.

The findings of this study point to several implications for better supporting birth mothers. First, early assistance from professionals (e.g., adoption agencies, adoption attorneys, social workers) in the process to relinquish a child to adoption is essential. Starting in pre-placement, adoption professionals must adhere to being an informational support source and an agent of connection to resources. So many women are unaware how to approach accessing various means for assistance. It is essential for adoption professionals to ensure women considering relinquishment have a clear understanding of her own involvement in the decision-making process and initiate comprehensive awareness to all options and resources for assistance and support. Though this is key to implement early in the process, it is not only necessary for those who are considering adoptive placement, but also needed during placement and post-placement. By doing so, this should mitigate the experience of many women not knowing their options and get them to utilize support initiatives. Second, professionals such as counselors need to be

equipped in supporting birth mothers with their emotions. Of interest in this study, nurses involved in birth mothers birthing hospital stays need to develop a deeper understanding of this unique groups emotional experience to better provide compassionate care. The hospital birthing experience of must be handled with sensitivity to best support birth mothers. Third, women who decide on relinquishment need to discuss feelings that arise from allowing the relinquishment to take place. In doing so, birth mothers may more adequately work through difficult emotions and unresolved grief that has the ability to impede the continuous healing process. Counselors should seek to facilitate approaches that specially address birth mothers that may avoid negative feelings so that the healing can appropriately proceed. Finally, our findings could inform adoption agencies in cultivating effective support systems, perhaps particularly peer support, for birth mothers during pregnancy and post-placement (Brodzinsky & Smith, 2014).

Several of the issues examined in this current study should be further explored. For one, the general paucity of research based on both the experience of relinquishment and perspective of support. Two, research should conduct examinations power differentials between birth mothers and others (e.g., adoption professionals, adoptive parents) involved in their relinquishment process as a solution to better support them. Three, research should investigate alternative approaches to the healing process for the population of birth mothers. Future research could explore during placement feelings in relation to coping strategies that birth mothers utilize at this phase in more diverse samples.

APPENDIX A: RECRUITMENT SOURCES

Recruitment Sources

Name of Organization	Website Address	Contact Name / Email
Adoption Network Cleveland	Adoptionnetwork.org	Jennifer Zisk; Jennifer.ziskvitron@adoptionnetwork.org
Birth Mom Buds	Birthmombuds.com	birthmombuds@gmail.com
Concerned United Birthparents	Cubirthparents.org	Patty Collings; pattycollings@gmail.com; president@cubirthparents.org
Friends in Adoption	Friendsinadoption.org	Dawn Smith-Pliner; dawn@friendsinadoption.org
Full Circle Adoptions	Fullcircleadoptions.org	Marla Allisan; adoption@fullcircleadoptions.com
Heart to Home	Hearttohomeadoptions.net/about-2	hearttohomeadopt@gmail.com
On Your Feet Foundation	Oyff.org	Hannah Eloge; hannah@kindredand.co; info@onyourfeetmidwest.org
Open Adoption and Family Services	Openadopt.org/birthparents	Shari Levine; shari@openadopt.org; information@openadopt.org
Placement from the Heart	adoptfloridafamily.com/placement-from-the-heart-faqs/	Angela Quick; angelaquick@hotmail.com

All Organizations Contacted

Name of Organization	Website address	Contact Email
4-Birth-Family-Issues	https://groups.yahoo.com/neo/groups/4-Birth-Family-Issues/info	4-birth-family-issues@yahoogroups.com
A Act of Love Adoptions	https://adopt@aactofloveadoptions.com	adopt@aactofloveadoptions.com
Adoption Associates	https://www.adoptionassociates.net/	snibbelink@adoptionassociates.net
Adoption Birthparents	https://groups.yahoo.com/neo/groups/adoptionbirthparents/info	adoptionbirthparents@yahoogroups.com
Adoption Homestudy Services of AR	http://azadoptionservices.org/	calli@azadoptionservices.org
Adoption Knowledge Affiliates (AKA)	http://adoptionknowledge.org/	aka@adoptionknowledge.org; AKAdoption@aol.com

Adoption LINKs	https://groups.yahoo.com/neo/groups/AdoptionLINKs/info	adoptionlinks@yahoogroups.com
Adoption: Mothers In Exile	http://www.exiledmothers.com	beba_online@yahoo.com
Adoptions of Indiana	http://adoptionsofindiana.org/birth-with-support/	meg@adoptionsofindiana.org
Adoption Professionals	http://adoptionprofessionals.net/pregnant/gems-birth-mother-support-group/	APadopt@gmail.com
Adoption Triad Connection	www.adoptiontriadconnection.com	lesliepatemackinnon@gmail.com
Adoptions Together	Adoptionstogether.org	Janice Goldwater; jgoldwater@adoptionstogether.org
America Adopts	http://www.americaadopts.com/	Lawrence Morton; info@americaadopts.com
Bethany Christian Services	https://www.bethany.org/	BCSpostadopt@bethany.org
Big Tough Girl	http://www.bigtoughgirl.org	hi@bigtoughgirl.org
Big Tough Girl Support Group - Utah		btgsupport@blessingsinabasket.org
Birthangels	https://groups.yahoo.com/neo/groups/BIRTHANGELS/info	birthangels@yahoogroups.com
Birth Fathers United	https://groups.yahoo.com/neo/groups/Birth_Fathers_United/info	birth_fathers_united@yahoogroups.com
BirthMom Buds of the Carolinas	http://birthmombuds.com/support/live-support/bmbcarolinas/	melaniemosberg@gmail.com
BirthMom Missions	https://www.facebook.com/birthmommissions/	
Birth Mother Baskets	http://www.birthmotherbaskets.org	gina.crotts@birthmotherbaskets.org
BirthMother Bridge Ministries	http://www.birthmotherbridgeministries.com/	birthmotherbridge@yahoo.com
Birthmother Ministries	http://www.birthmotherministries.org	mail@birthmothers.org
Birth Mothers Adoption Support Group	https://www.facebook.com/Birth-Mothers-Adoption-Support-	

	Group-208809482482956/	
Birthmothers Seattle	https://www.facebook.com/birthmothers	birthmothers@rocketmail.com; birthmothershope@gmail.com
Birthmother's Support Group	https://groups.yahoo.com/neo/groups/Birthmothersupport/info	birthmothersupport@yahoogroups.com
Birth Mothers Support Group - IN		nstevens@ad-in.org
Birthmother Support San Antonio		number1birthmom@gmail.com
Birthmother Wellness	https://www.birthmotherwellness.com/	birthmotherwellness@outlook.com
Birth Mothers Unite	https://www.facebook.com/birmothersu/	
Birth Parent Association	http://www.birthparentassociation.com	pamelatoohey@gmail.com
Birth Parents and Adoptive Parents Support Group	https://www.facebook.com/Birth-Parents-Adoptive-Parents-Support-Page-199567613455410/	
Birth Parent Support Group - WI		tgrant@ccmadison.org
Brave Love	http://www.bravelove.org/	info@bravelove.org
Buckner Children's Home 'DFW Triad'		dfwtriad@yahoo.com
Catholic Social Services of Washtenaw County (MI)	https://csswashtenaw.org/pregnancy-adoption/pregnancy-counseling/adoption/	jpayne@csswashtenaw.org
Childrens Home Soceity	https://chlss.org/pregnancy-services/birth-fathers/	welcome@chlss.org
Christian Adoption Services	http://www.christianadoptionservices.org/birthmothersmallgroup.html	info@CASfamily.org
Coalition of Oregon Adoption Agencies	http://www.oregonadoptionagencies.org/member-agencies/open-	info@openadopt.org

	adoption-family-services-inc	
DFW Adoption	https://www.dfw.org.uk/	office@dfw.org
DFW Triad Support Group	https://hopecottage.org/hc/post-adoption-services/dfw-triad-support-group/	scampbelll@hopecottage.org
Embrace Grace	https://embracegrace.com/about-us/	info@embracegrace.com
Family Care Adoption Services	www.familycaresociety.org	email@familycaresociety.org
Family Focus Adoption Services	Familyfocusadoption.org	Maris Blechner & Jack Brennen; maris@blechner.net, ffasjack@gmail.com
FirstMothersConnect	https://groups.yahoo.com/neo/groups/FirstMothersConnect/info	firstmothersconnect@yahoogroups.com
First Mother Forum	http://www.firstmotherforum.com	forumfirstmother@gmail.com; https://www.facebook.com/FirstMotherForum/
Gladney Center for Adoption	https://adoptionsbygladney.com/	erica.andres@gladney.org
Healing Hearts		kerijacoby@yahoo.com
Independent Adoption Center		Guylaine Hubbard-Brosmer & Robyn Harrod; ghubbardbrosmer@adoptionhelp.org, harrodrobyn@gmail.com
Kalamazoo Birth Parents Support Group		cgraybmom@sbcglobal.net
Kindred and Co	http://kindredand.co/	hannah@kindredand.co
LFCS Hope and Healing	https://lfcsmo.org/	evelynb@lfcs.org
Lifetime Healing	https://lifetimehealingadoption.com/	hi@lifetimehealingadoption.com
Linked Thru Love	http://www.linkedthrulove.org	linkedthrulove@gmail.com
Mission2Reunite	https://www.facebook.com/mission2reunite/timeline	searchexpert@mission2reunite.com
New Life Adoptions	http://newlifeadopt.com/about-us/	support@newlifeadopt.com
Ohio Birthparent Group	http://ohiobirthparents.org	ohiobirthparents@gmail.com
Online Support for Birthmothers	http://hslowe.tripod.com/index-2.html	hslowe@gmail.com

Open Adoption Support	https://www.facebook.com/OASupport	askopenadoption@gmail.com
Post Adoption Resources WI	http://postadoptionresourceswi.org/Home/tabid/506/Default.aspx	postadoption@ccmadison.org
Room in Your Heart for Adoption	http://www.roominyourheartforadoption.co.uk/	ss-adoption@shropshire.gov.uk
Sunflower Birth Mom Support Group	http://bmom.net	nanaWendt@aol.com
SunflowerFirstMoms- Reunited	https://groups.yahoo.com/neo/groups/SunflowerFirstMoms-Reunited/info	sunflowerfirstmoms-reunited@yahoogroups.com
Supporting Adoption & Foster Families Together	http://safft.org/contact/	dawson@safft.org
Talk About Adoption	http://www.talkaboutadoption.org/	talkaboutadoption@gmail.com
The Birthparent Support Group	http://www.birth-parents.com/bpsupport.htm	adoption@fullcircleadoptions.com
Three Strands	https://www.threestrandsinc.org/	threestrandsinfo@gmail.com
Tied at the Heart	http://www.tiedattheheart.com/home.html	birthothers4adoption@gmail.com; https://www.facebook.com/TiedAtTheHeart/

Instructions: The target participant's name should be inserted where appropriate throughout the interview. Probes and follow-up questions are not optional. If information is not provided in response to questions, ask all the appropriate probes. Ask probes in a way that maintains the participant's narratives whenever possible: probes do not have to be asked in the order shown. Alternate ways of phrasing questions are provided in some cases. Use alternate questions if the original question is confusing to the participant or if the alternate is more appropriate, given the circumstances. Give participants time to reflect and answer. Do not assume questions are confusing or not applicable. These following probes should be used liberally when a participant gives a brief or incomplete answer:

- *Probe: Can you say more about that?*
- *Probe: Could you give me an example?*
- *Probe: Anything else?*

Interviewer introduction: Hello! My name is [insert interviewer name], and I am the [insert role e.g., graduate student] on this study. We really want to thank you for agreeing to take this time to tell us more about your experiences. There are no right or wrong answers to these questions; we want to hear your experiences and thoughts. We recognize that some questions ask sensitive information. Please feel free to not answer a question if you would prefer not to share this information.

For online chat interviews: Before we get started, I want to remind you that a transcript of our interview will be generated so that we can have an accurate record of our conversation. When I have finished asking a question, I will indicate this by typing an asterisk. Please also type asterisk when you have completed answering the question, so I know to move on. If it is helpful, you should see an arrow icon in this chat window next to my name. Clicking it will allow you to expand the window so that you can more easily read the questions I will be asking. Lastly, as another reminder, I want to let you know that your responses will not be shared with anyone in your family, just as their responses will not be shared with you. Again, thank you for spending this time letting us know about your experiences. Do you have any questions before we start?

Note to interviewers: Ask questions in the order in which they are written; ignore the fact that question numbers are often out of sequence. For chat interviews, remember to indicate you have finished asking a question by typing an asterisk (*) These questions are geared toward birth parents in a number of cases. If interviewing another birth relative (e.g., birth grandparent), please explain that the interview is primarily designed with birth parent questions in mind, but that you will modify the questions as needed. For example, "this question is about the birth parents' experience during the pregnancy and placement. Why don't you explain to me any of the details you know about this time?" and proceed with the questions in the interview guide.

Before we get started, I just wanted to clarify some terms and names to help make our interview flow smoothly, and also ask a few background questions about your family. [If participant is a birth relative other than a birth parent, could explain: *these questions will*

reference the birth parents' relationships. Please share any details you know related to the following questions.]

1. What is the child's name that was placed for adoption? [*NOTE: Use this name/term where appropriate in the following interview.*]
    a. If birth relative (other than birth parent), could you describe your relationship to the birth parent(s) and/or the child placed for adoption?
2. What is [child's] gender?
    a. What is your gender?
    b. What are the gender(s) of [child's] adoptive parents?
3. What is [child's] race?
    a. What is your race?
    b. What is the race of the adoptive parents?
4. Do you have a romantic partner or significant other, and if so, what is your partner's name? [*Note: From here on out, you can use the partner's name in place of "partner"*]
    a. What is your current relationship status (e.g., single, dating, married, divorced)? (*If relevant,* is your current partner [child's] other birth parent?)
    b. *If relevant,* how long have you and your partner been together? (Married or not)
5. If you have additional children, what are their names?
6. In a few words and if you know, can you tell me more about how [child]'s name (decisions about first and last names) was chosen? [was child named by birth parent(s) and/or re-named by adoptive parents]
    a. *If applicable: Do you call the child something different than the adoptive parents?
7. Are there particular terms you or your family uses to refer to your child's adoptive parents or adoptive family?
8. What does [child] call you and other birth family members? (*If relevant,* your partner)?
9. Are you comfortable with the names [child] uses to refer to you (and your partner / other family members), as well as to his/her adoptive parents / adoptive family? (yes/no) If no, can you say a little more about that?
10. Tell me who all is part of your household.
11. Would you describe the area where you live as rural, suburban, or urban?
    a. Is your neighborhood diverse in terms of race, culture, religion, sexual orientation, and occupation type? If yes – in what ways? If no – in, what ways is it not?
    b. Is there anything else important about how you would describe the area that you live?
12. In a few words and if you know, how would you describe where the adoptive family lives? (e.g., rural, suburban, urban. Is the neighborhood diverse?)
    a. Probe: would you say where they live is similar or different from where you live, and in what ways?
13. *If applicable: Tell me more about your children. (Probe: Please include children you have parented or are parenting, stepchildren, adopted children, other children

placed for adoption, foster children, related children, etc. [Prompt for age, gender, legal parenting status])

Thank you for your responses.

PREGNANCY/ADOPTION DECISION:

We are going to continue with some more questions starting with the time of pregnancy and moving into some questions about the adoption decision prior to the actual adoption. [If participant is a birth relative other than a birth parent, could explain: *these questions reflect the birth parents' experience during the pregnancy and placement. Why don't you explain to me any of the details you know about this time? We are also interested in your own experience as well. If you can, please answer from both perspectives to the best of your ability.*]

14. **How old were you at the time (of the pregnancy OR placement? *Be sure to specify*)**
15. **Tell me about yourself during this time. [Probe for living situation, occupation, education, relationships, etc.]**
16. **With whom did you discuss the pregnancy? (i.e., school counselor, parent, friends, doctor, etc.)**
17. **How did your family react to the pregnancy? (Probe: What was it like initially and did it change?)**
18. **How did others (friends, coworkers, etc.) react to the pregnancy? (Probe: What was it like initially and did it change?)**
19. **How did the baby's [father / other birth parent] react to the pregnancy? (Probe: What was it like initially and did it change?)**
20. **How did you feel about being pregnant?**
    a. **Were there any health complications during your pregnancy?**
21. **Did you feel supported during your pregnancy?**
    a. **If yes – Who helped, and how did they help? Did you feel these supports were effective?**
22. **Did you work with an adoption agency?**
    a. **If so, did the agency offer you any form of help (ex: classes, counseling, financial supports) during your pregnancy?**
23. **Did you give birth at a hospital?**
    a. **Were there any complications during delivery?**
24. **Please describe your feelings during your hospital stay with the baby [if not at hospital: just after giving birth].**
    a. **What contact, if any, did you have with the baby during your hospital stay [if not at hospital: just after giving birth]?**
    b. **Did you see, hold, feed, or stay (room) with the baby?**
25. **Did any members of your family or the adoptive family come visit in the hospital [if not at hospital: after you gave birth]?**
    a. **If so, who?**
    b. **What contact, if any, did they have with the baby?**
    c. **Were there any problems surrounding this contact?**
26. **Did you have a role in choosing adoption for [child]? (Probe: if yes/no, ask for any more information the participant would like to share.]**

27. **How old was child (or how far along in the pregnancy was it) when you decided to choose adoption?**
28. **Did you consider any other plans other than adoption? (*Only note if more information is needed:* i.e., raising [child], abortion, etc.)**
29. **Did you feel supported in your decision?**
30. **Who supported you (in your decision)? (Family, friends, roommates, relatives, significant others, siblings, etc.)**
    a. **If yes - How did they help? (How were they supportive?)**
    b. **Do you have friends or relatives who have adopted or placed children for adoption?**
        i. **If so, could you briefly describe their experiences?**
        ii. **How have they and their experiences influenced your feelings?**
31. **Did you ever feel that you were forced into placing [child] for adoption?**

I also have a few questions about adoption and open adoption more generally before asking some more questions about your process.

32. Are you adopted? (yes/no)
    a. If "yes", can you tell me a bit more about your adoption?
        i. What type?
        ii. Any contact with birth family?
        iii. How old were you when you were adopted?
        iv. Did you talk about your adoption with your adoptive family?
        v. What sort of impact do you think your experiences with adoption had on your own choice to place a child for adoption?)
33. When did you first hear of the term "open adoption"?
34. What did you think the term meant?
35. When did you first hear the term "confidential or closed adoption"?
36. What did you think that term meant?

THE ADOPTION AND PLACEMENT PROCESS:
37. Please explain any more details about the process you went through from the time you contacted the agency, if relevant *(reference #18)*, until the child was placed in the adoptive family's home.
    a. *If worked with agency, and the name has not come up*: What is the name of the adoption agency with whom you placed [child]?
38. *If worked with agency (reference #18):* **What factors influenced your decision to place your child through [name of agency – *reference #33a*]?**
39. In general, how did you feel going through the process? (positive / negative, relatively smooth/easy vs. challenging / difficult, etc.) ⌞SEP⌟
40. **After the pregnancy, what kind of support, if any, did you receive from the agency (or others)? Were these supports helpful?**
41. *If worked with an agency:* **What options did your adoption agency offer regarding open or closed adoptions (sharing of non-identifying information; continued sharing of information, pictures, gifts, etc.; meeting parents; ongoing face-to-face contact; selecting adoptive parents; etc.?)**
42. Describe the process you went through before deciding the degree of openness you chose. (Probe: What were your feelings, concerns?)

a. (*Ask only if this was a choice – reference #22*) What option did you choose?
b. (*Ask only if this was a choice – reference #22*) Why did you choose this option?
43. How did your relatives react to the degree of openness you have in your adoption?
44. How did your friends react to the degree of openness you have in your adoption?
45. What did you expect the placement process to be like? (Probe for specific expectations regarding behaviors, steps involved, and feelings.) Did you have any fears about the placement process? If yes – what were they?
46. Was it anything like you expected it to be? (i.e., were your expectations of the placement process met (*can reference response to #41*)?) (yes / no) Did anything surprise you?
47. Did [child] experience any other placements (that you know of) before their adoptive family?
    b. *If yes*, what type of placement (e.g., hospital (if more than a week's stay with yourself or your family, foster care, etc.)
        i. What was the length of stay?
        ii. Any other details about this placement?
48. Did you have a role in selecting the adoptive parents / family?

If yes to #44, family was chosen by birth parent(s) and not agency:
49. Please tell me more about that process and your reasons for selecting this particular family.
50. Did you have any preferences for the sex, age, race/ethnicity, occupation, education, marital status, religion, etc. of the potential adoptive family when you applied to place [child] for adoption? (yes/no)
    a. If yes, please describe.
51. Were you open to the possibility of a same-sex couple as adoptive parents?
    a. *If adoptive family has two moms / two dads:* Were you initially aware that [child] would be or had been placed with two moms / two dads?
52. Did you specifically look for a same-sex couple as adoptive parents? (yes/no)
    a. If yes, probe for specifics.
53. Were there people that helped in your decision about the adoptive family? (i.e., family, friends, agency workers)
    a. How did they help?
54. Were there sources of information that helped in your decision? i.e., blogs, particular websites, Google searches, podcasts, movies, TV (please specify)
    a. How did they help?
55. Is there any other information you'd like to share about how you decided on this family?
56. **Have you noticed any changes (improvements or decline) in your health (physical / mental / emotional) since the time of the placement? Are there any other specific details about the adoption process that you feel are important for us to know?**

If no to #44, adoptive family was not chosen by birth parent(s):
57. Were you given the opportunity to select an adoptive family? (yes/no)
    a. If no – Do you wish you had had a part in the selection process?

b. If yes – Would you feel comfortable discussing, why you chose not to select an adoptive family?

58. Were there certain characteristics that you wanted the family to have?

59. Did you have preferences for occupation, education, marital status, religion, etc. of the adoptive family?
    a. Were you open to the possibility of a same-sex couple as adoptive parents?
    b. *If adoptive family has two moms / two dads:* Were you initially aware that [child] would be or had been placed with two moms / two dads?

60. Have you noticed any changes (improvements or decline) in your health (physical / mental / emotional) since the time of the placement? Are there any other specific details about the adoption process that you feel are important for us to know?

AFTER THE ADOPTION:
Now I'm going to ask a bit about your contact with [child]'s adoptive family, but in order to do so, could you please tell me which of the following best describes your situation:
1) confidential (closed) adoption (No information sharing, no meetings)
2) share information only (no meetings)
3) share information and have met the adoptive family (but not ongoing meetings)
4) have ongoing meetings (face-to-face contact)
5) initially chose a less open adoption and later changed to a more open adoption
IF CONFIDENTIAL (CLOSED) ADOPTION (NO INFO SHARING, NO MEETINGS), NOW GO TO P. 6.
IF SHARE INFORMATION ONLY (NO MEETINGS), NOW GO TO P. 7.
IF SHARE INFO AND MEET ADOPTIVE FAMILY (BUT NOT ONGOING MEETINGS), NOW GO TO P. 8.
IF ONGOING MEETINGS (FACE TO FACE CONTACT), NOW GO TO P. 10.
IF INITIALLY CHOSE A LESS OPEN OPTION AND LATER CHANGED TO A MORE OPEN OPTION, NOW GO TO P. 12.
IF CONFIDENTIAL (CLOSED) ADOPTION (NO INFO SHARING, NO MEETINGS)

61. Do you currently have any information regarding [child]?

62. What kind of information do you have about [child]? (Probe for identifying, e.g., name, address)

63. If you do not have information about [child], have you, or anyone else, made any attempts to find information about [child]?
    a. How, or in what ways, have these attempts happened?

64. What was the approximate age of [child] when you first received any information about him/her?

65. Have you used any form of electronic media (email, FB, blogs, twitter, internet searches, etc.) to gather information about [child] prior to having actual contact with [child]?
    a. If yes, how did you feel about searching?
    b. Has anyone else searched [friends or family]?

66. Going beyond just gathering information, have there been any attempts at contact between you and [child]? Why or why not?

67. Would you like to have contact with [child] in the future? Why or why not?

68. How would you feel if [child] decided to search for you or if the adoptive parents wished to share pictures or information (e.g., through the agency)? If so, please describe.

69. How would you feel if the child's father [mother] decided to search for [child] or if the adoptive parents wished to share pictures or information with the child's father [mother] (e.g., through the agency)? If so, please describe.

70. If applicable - How would you feel if other people (i.e., birth relatives) in your family decided to search for [child] or if the adoptive parents wished to share pictures or information with other people in your current family (e.g., through the agency)? If so, please describe (would your feelings depend on particular relatives?).

71. Do you think social media (e.g., Facebook, twitter) will play any role for [child] in the future in terms of any contact or information sharing with his/her adoptive family? (yes/no) If yes, in what ways?

72. **In a few words, how would you describe your current feelings about [child]'s adoptive family members? Others in the birth family? Do you ever feel in competition? (yes/no)**

73. We're aware that many of the adoptive families we've worked with are diverse in terms of race, parents' gender and sexual orientation, or perhaps experiencing a family transition such as parents' separation or divorce. We're interested in your thoughts about these types of diversity and how any or all of these aspects may have influenced your feelings about diversity and adoption. I'm going to ask you about some of these specific aspects of diversity and whether that has had any influence on your thoughts, feelings, and attitudes. Since this was a lot of information, we'll talk about each of these in turn – some may or may not feel relevant to you. Please answer yes or no, we will have a chance to go over each question in more detail at the end.
Yes / No - Do you feel that race has influenced your feelings about [child], adoption, and/or the level of openness you have with the adoptive family? Gender (parents or child)? Sexual orientation (placement with same-sex parents)? Family transitions (e.g., parents' separation / divorce? Religion?
    a. If yes – could you tell me a little more about that?
    b. Do you feel these aspects of diversity have influenced you in other ways? (Probe each aspect separately like above) Why/why not?

74. We've talked about quite a few things, but I wonder if there might be anything that we've skipped that you feel would be important to understanding you, your family, and your experience with adoption. Is there anything that you would like to add to what we have discussed?

GO TO P. 14, "ADOPTION AND CURRENT FAMILY QUESTIONS"
IF SHARE INFORMATION ONLY (NO MEETINGS):
75. What kind of information do you have about [child]? (Probe for identifying, e.g., name, address)

76. Have you, or anyone else, made any attempts to find information about [child]?
    a. How, or in what ways, have these attempts happened?

77. What was the approximate age of [child] when you first received any information about him/her?

78. Have you used any form of electronic media (email, FB, blogs, twitter, internet searches, etc.) to gather information about [child] prior to having actual contact with [child]?
    a. If yes, how did you feel about searching?
    b. Has anyone else searched [friends or family]?
79. Going beyond just gathering information, have there been any attempts at contact between you and [child]? Why or why not?
80. Would you like to have contact with [child] in the future? Why or why not?
    a. If applicable– How would you feel if the child's father [mother, other birth relatives] decided to search for [child] or if the adoptive parents wished to share pictures or information with the child's father [mother, other birth relatives] (e.g., through the agency)? If so, please describe.
    b. If applicable – What are your thoughts about why other birth family members are not (as) involved with [child] and the adoptive family? What are your feelings about that?
81. With which adoptive family members do you share information? (e.g., adoptive parents – one or both, child, other adoptive family members, etc.)
82. What kind of information (contact information, pictures, gifts, etc.) do you and the adoptive family share (and how do you share it – via phone, text, or call, letter or email, etc.)?
    a. What is the role of social media (e.g., Facebook, twitter, Skype/FaceTime) in information sharing with the adoptive family, if any?
83. How often (e.g., weekly, monthly, daily, etc.) do you share information with adoptive parents or child / adoptive family? Who usually initiates each exchange? (Probe for the history of sharing.)
    a. If you wanted more contact with [child], would you feel comfortable asking the adoptive   parent(s) to accommodate that? Do you think they would accommodate that?
84. How do you feel after you have received a letter/email, phone call, picture, gift, text, communication via social media etc. from the adoptive parents? Adoptive family?
85. Is there a written or verbal agreement for this kind of sharing? (yes/no)
    a. How binding do you feel this agreement is?
86. If yes to 84, have you or the adoptive family ever changed the agreement in terms of sharing information?
    a. If "yes," how does this make you feel how did you come to this decision?
87. How do you think sharing information with your child's adoptive family has impacted you?
    a. Your child? You and your spouse/partner? Other children in family? The adoptive family?
88. Do you think [child] or his/her adoptive family members might ever initiate a search to find each other or that they might want to meet? (e.g., when your child reaches adulthood?)
    a. If so, when? Why or why not? How would you feel if your child or the adoptive parents (adoptive family) initiated a search or wanted to meet?

89. In a few words, how would you describe your current feelings about [child]'s adoptive family?
     a. Do you ever feel in competition with them?
     b. Do you think they ever feel in competition with you? (If applicable – or other birth family members?)
90. We're aware that many of the adoptive families we've worked with are diverse in terms of race, parents' gender and sexual orientation, or perhaps experiencing a family transition such as parents' separation or divorce. We're interested in your thoughts about these types of diversity and how any or all of these aspects may have influenced your feelings about diversity and adoption. I'm going to ask you about some of these specific aspects of diversity and whether that has had any influence on your thoughts, feelings, and attitudes. Since this was a lot of information, we'll talk about each of these in turn – some may or may not feel relevant to you. Please answer yes or no, we will have a chance to go over each question in more detail at the end.
     Yes / No - Do you feel that race has influenced your feelings about [child], adoption, and/or the level of openness you have with the adoptive family? Gender (parents or child)? Sexual orientation (placement with same-sex parents)? Family transitions (e.g., parents' separation / divorce? Religion?
     a. If yes – could you tell me a little more about that?
     b. Do you feel these aspects of diversity have influenced you in other ways? (Probe each aspect separately like above) Why/why not?
91. We've talked about quite a few things, but I wonder if there might be anything that we've skipped that you feel would be important to understanding you, your family, and your experience with adoption. Is there anything that you would like to add to what we have discussed?
GO TO P. 14, "ADOPTION AND CURRENT FAMILY QUESTIONS"
IF SHARE INFO AND HAVE MET THE ADOPTIVE FAMILY (BUT NOT ONGOING MEETINGS):
92. What kind of information do you have about [child]? (Probe for identifying, e.g., name, address)
93. Have you, or anyone else, made any attempts to find information about [child]?
     a. How, or in what ways, have these attempts happened?
94. What was the approximate age of [child] when you first received any information about him/her?
95. Have you used any form of electronic media (email, FB, blogs, twitter, internet searches, etc.) to gather information about [child] prior to having actual contact with [child]?
     a. If yes, how did you feel about searching?
     b. Has anyone else searched [friends or family]?
96. Other than the initial meeting, have there been any attempts at contact between you and [child]? Why or why not?
97. Would you like to have more contact with [child] in the future? Why or why not?
     a. If you wanted more contact with [child], would you feel comfortable asking the adoptive   parent(s) to accommodate that? Do you think they would accommodate that?

      b. If applicable – How would you feel if the child's father [mother, other birth relatives] decided to search for [child] or if the adoptive parents wished to share pictures or information or meet with the child's father [mother, other birth relatives] (e.g., through the agency)? If so, please describe (would your feelings depend on particular relatives?).

      c. If applicable – What are your thoughts about why other birth family members are not (as) involved with [child] and the adoptive family? What are your feelings about that?

98. With which adoptive family members do you share information? (e.g., adoptive parents – one or both, child, other adoptive family members, etc.)

      a. Do you feel more comfortable/close with one parent over the other? If yes, why?

99. What kind of information (contact information, pictures, gifts, etc.) do you and the adoptive family share (and how do you share it – via phone, text, or call, letter or email, etc.)?

      a. What is the role of social media (e.g., Facebook, twitter, Skype/FaceTime) in information sharing with the adoptive family, if any?

100. How often (e.g., weekly, monthly, daily, etc.) do you share information with adoptive parents / family? Who usually initiates each exchange? (Probe for the history of sharing.)

101. How do you feel after you have received a letter/email, phone call, picture, gift, text, communication via social media etc. from the adoptive parents (adoptive family)?

102. Is there a written or verbal agreement for this kind of sharing? (yes/no) How binding do you feel this agreement is?

103. If yes to 102, have you or the adoptive parents (adoptive family) ever changed the agreement in terms of sharing information? If yes, how does this make you feel?

104. Describe the circumstances of your FIRST meeting with the adoptive parent(s) [adoptive family].

      a. Was the child present for this meeting?

      b. When and where did the first meeting take place?

      c. Who initiated?

      d. How did you feel during the meeting?

105. Did you exchange identifying information (or already have it)? (First or last name, address, telephone number, etc.)

      a. Why or why not?

106. What else did you talk about or do?

107. How do you think the adoptive parents (adoptive family) felt about you at that first meeting?

108. Have you had any more meetings with the adoptive parents (adoptive family)? If "yes," how are these meetings initiated and arranged? (Approximately how many meetings have you had?

109. When/where/with whom? What kinds of activities do you engage in? Is child present?)

110. How do you think sharing information and meeting with your child's adoptive family has impacted you?
   a. Your child? You and your spouse/partner? Other children in the family? The adoptive family?
111. Do you think [child] or his/her adoptive family members might ever initiate a search to find each other or arrange for future meetings? (e.g., when he/she reaches adulthood?)
   a. If so, when? Why or why not? How would you feel if your child or the adoptive parents (adoptive family) ever initiated a search or arranged for future meetings?
112. In a few words, how would you describe your current feelings about (your child's name)'s adoptive family members?
   a. Do you ever feel in competition with them?
   b. Do you think they ever feel in competition with you? (If applicable – or other birth family members?)
113. We're aware that many of the adoptive families we've worked with are diverse in terms of race, parents' gender and sexual orientation, or perhaps experiencing a family transition such as parents' separation or divorce. We're interested in your thoughts about these types of diversity and how any or all of these aspects may have influenced your feelings about diversity and adoption. I'm going to ask you about some of these specific aspects of diversity and whether that has had any influence on your thoughts, feelings, and attitudes. Since this was a lot of information, we'll talk about each of these in turn – some may or may not feel relevant to you. Please answer yes or no, we will have a chance to go over each question in more detail at the end.
   Yes / No - Do you feel that race has influenced your feelings about [child], adoption, and/or the level of openness you have with the adoptive family? Gender (parents or child)? Sexual orientation (placement with same-sex parents)? Family transitions (e.g., parents' separation / divorce? Religion?
   a. If yes – could you tell me a little more about that?
   b. Do you feel these aspects of diversity have influenced you in other ways? (Probe each aspect separately like above) Why/why not?
114. We've talked about quite a few things related to [child]'s adoption and openness arrangements, but I wonder if there might be anything that we've skipped that you feel would be important to understanding you, your family, and your experience with adoption. Is there anything that you would like to add to what we have discussed?

GO TO P. 14, "ADOPTION AND CURRENT FAMILY QUESTIONS" IF HAVE ONGOING MEETINGS (FACE TO FACE CONTACT):
115. What attempts have you, or anyone else, made any attempts to find information about [child]?
   a. How, or in what ways, have these attempts happened?
116. Have you used any form of electronic media (email, FB, blogs, twitter, internet searches, etc.) to gather information about [child] prior to having actual contact with [child]?
   a. If yes, how did you feel about searching?

b. Has anyone else searched [friends or family]?

117. Would you like to have more contact with [child] in the future? Why or why not?

    a. If applicable – How would you feel if the child's father [mother, other birth relatives] decided to search for [child] or if the adoptive parents wished to share pictures or information with the child's father [mother, other birth relatives] (e.g., through the agency)? If so, please describe (would your feelings depend on particular relatives?).

    b. If applicable – What are your thoughts about why other birth family members are not (as) involved with [child] and the adoptive family? What are your feelings about that?

118. With which adoptive family members do you share information? (e.g., only adoptive parents – one or both, other adoptive family members, etc.)

119. What kind of information (contact information, pictures, gifts, etc.) do you and the adoptive family share (and how do you share it – via phone/letter/Skype, etc.)?

    a. What is the role of social media (e.g., Facebook, twitter, Skype) in information sharing with the adoptive family, if any?

120. How often (e.g., weekly, monthly, daily, etc.) do you share information with adoptive parents or child / adoptive family? Who usually initiates each exchange? (Probe for the history of sharing.)

    a. If you wanted more contact with [child], would you feel comfortable asking the adoptive parent(s) to accommodate that? Do you think they would accommodate that?

121. How do you feel after you have received a letter/email, phone call, picture, gift, text, communication via social media etc. from the adoptive parents (adoptive family)?

122. Is there a written or verbal agreement for this kind of sharing? (yes/no) How binding do you feel this agreement is?

123. If yes to 117, have you or the adoptive parents (adoptive family) ever changed the agreement in terms of sharing information? If yes, how does this make you feel?

Alternative for online chat #119-124: Please describe the circumstances of your first meeting with the adoptive family. When and where did the first meeting take place? Who initiated? How did you feel during the meeting? How do you think they felt about you?

124. Describe the circumstances of your FIRST meeting with the adoptive parent(s) [adoptive family]. Was the child present for this meeting?

125. When and where did the first meeting take place? Who initiated?

126. How did you feel during the meeting?

127. Did you exchange identifying information (or already have it)? (First or last name, address, telephone number, etc.) Why or why not?

128. What else did you talk about or do?

129. How do you think the adoptive parents (adoptive family) felt about you at that first meeting?

130. Have you had any more visits with the adoptive parents (adoptive family)?

a. If "yes," Please describe any more visits with the adoptive parents (adoptive family)? When/where/with whom? (Is child present?) What kinds of activities did you engage in?

131. How do you think sharing information and meeting with [child]'s adoptive family has impacted you?
    a. Your child? You and your spouse/partner? Other children in the family? The adoptive family?

132. In a few words, how would you describe the nature of your relationship with the adoptive parent(s)? (Probe: as a relative, friend, etc.)
    a. How would you describe the nature of the relationship between your child's adoptive family members and your child, your partner/spouse (if applicable), and other children in the family (if applicable)?
    b. Has that changed over time?
    c. Do you view the adoptive parents / adoptive family as being a part of your family?
    d. Do you feel more comfortable/close with one parent over the other? If yes, why?

133. In a few words, how would you describe your current feelings about [child]'s adoptive family members?
    a. Do you ever feel in competition with them?
    b. Do you think they ever feel in competition with you? (If applicable – or other birth family members?)

134. We're aware that many of the adoptive families we've worked with are diverse in terms of race, parents' gender and sexual orientation, or perhaps experiencing a family transition such as parents' separation or divorce. We're interested in your thoughts about these types of diversity and how any or all of these aspects may have influenced your feelings about diversity and adoption. I'm going to ask you about some of these specific aspects of diversity and whether that has had any influence on your thoughts, feelings, and attitudes. Since this was a lot of information, we'll talk about each of these in turn – some may or may not feel relevant to you. Please answer yes or no, we will have a chance to go over each question in more detail at the end.
    Yes / No - Do you feel that race has influenced your feelings about [child], adoption, and/or the level of openness you have with the adoptive family? Gender (parents or child)? Sexual orientation (placement with same-sex parents)? Family transitions (e.g., parents' separation / divorce? Religion?
    a. If yes – could you tell me a little more about that?
    b. Do you feel these aspects of diversity have influenced you in other ways? (Probe each aspect separately like above) Why/why not?

135. What is the most satisfying aspect of your relationship with the adoptive parent(s) (adoptive family)? What is the most difficult aspect?

136. What interpersonal challenges have you navigated with the adoptive family?

137. Would you say you act the same or differently with [child] while in the presence of his/her adoptive parents / adoptive family? (yes/no)
    a. In what ways do you act the same/different?

138. Do you and [child] ever spend time together without the adoptive family there?
139. Do you talk with [child] about adoption? (yes/no)
140. Does child express any feelings about being adopted? (May not be as relevant if child was very young when he/she was told and/or the families always openly discussed it)
   a. If "yes", can you briefly describe what kinds of things they talk about? (e.g., what adoption means, talking about birth family, etc.)
   b. If "no", do you plan to talk about adoption with [child]? (why/why not?) If plan to discuss..., can you briefly describe when and what kinds of things do you plan to talk about?
141. If adoption is discussed, how comfortable is [child] with talking about his/her adoption?
142. Does [child] initiate conversations with you or ask you questions about adoption?
   a. If "yes," how frequently? Have there been particular reasons [child] initiated these conversations?
143. In a few words, what do you think are your child's feelings toward his/her adoption and also his/her adoptive family members? (Generally positive or content? Any negative feelings? Confused? Etc.) Please describe in a few words.
144. If you lose contact with the adoptive parents / adoptive family members, do you think [child] would initiate a search for you or other family in the future?
   a. Why or why not? How would this make you feel?
   b. Have you ever hesitated with making a request of the adoptive family in fear that you could lose contact with [child]?
145. We've talked about quite a few things related to (child's name)'s adoption and openness arrangements, but I wonder if there might be anything that we've skipped that you feel would be important to understanding you, your family, and your experience with adoption. Is there anything that you would like to add to what we have discussed?

GO TO P. 14, "ADOPTION AND CURRENT FAMILY QUESTIONS"
IF INITIALLY CHOSE A LESS OPEN OPTION AND LATER CHANGED TO A MORE OPEN OPTION:
146. You mentioned that you've experienced a change in the level of contact you've had with the adoptive family. Can you describe in a few words how this change in openness came about?
   a. (e.g., Whose idea was it to change? What changes took place? How did you feel about the decision to change?)
   b. (Probe for specifics about initial contact if needed: In the beginning, how often did you share information with adoptive parents? Who initiated each exchange? What kind of information did you and the adoptive parents/family share? (Contact information, phone calls, pictures, gifts, etc.) With whom did information sharing occur? (e.g., adoptive parents – one or both, child, other adoptive family members)
147. Have you, or anyone else, made any attempts to find information about [child]?

a. How, or in what ways, have these attempts happened?
148. Have you used any form of electronic media (email, FB, blogs, twitter, internet searches, etc.) to gather information about [child] prior to having actual contact with [child]?
   a. If yes, how did you feel about searching?
   b. Has anyone else searched [friends or family]?
149. Would you like to have more contact with [child] in the future? Why or why not?
   a. If applicable – How would you feel if the child's father [mother, other birth relatives] decided to search for [child] or if the adoptive parents wished to share pictures or information with the child's father [mother, other birth relatives] (e.g., through the agency)? If so, please describe (would your feelings depend on particular relatives?).
   b. If applicable – What are your thoughts about why other birth family members are not (as) involved with [child] and the adoptive family? What are your feelings about that?
150. Now we'll discuss what your current level of contact with your child's birth family:
With which adoptive family members do you share information (e.g., only adoptive parents – one or both, other adoptive family members, etc.)?
151. What kind of information (contact information, pictures, gifts, etc.) do you and the adoptive family share (and how do you share it – via phone/letter/Skype, etc.)?
   a. What is the role of social media (e.g., Facebook, twitter, Skype) in information sharing with the adoptive family, if any?
152. How often (e.g., weekly, monthly, daily, etc.) do you share information with adoptive parents / family? Who usually initiates each exchange? (Probe for the history of sharing.)
   a. If you wanted more contact with [child], would you feel comfortable asking the adoptive   parent(s) to accommodate that? Do you think they would accommodate that?
153. How do you feel after you have received a letter/email, phone call, picture, gift, text, communication via social media etc. from the adoptive parents (adoptive family)?
154. Is there a written or verbal agreement for this kind of sharing? (yes/no)
   a. How binding do you feel this agreement is?
155. If yes to 153, have you or the adoptive parents (adoptive family) ever changed the agreement in terms of sharing information?
   a. If yes, how does this make you feel?
Alternative for online chat #150-155: Please describe the circumstances of your first meeting with the adoptive family. When and where did the first meeting take place? Who initiated? How did you feel during the meeting? How do you think she/they felt about you? *
156. Describe the circumstances of your FIRST meeting with the adoptive parent(s) [adoptive family]. Was the child present for this meeting?
157. When and where did the first meeting take place? Who initiated?

158.   How did you feel during the meeting?
159.   Did you exchange identifying information (or already have it)? (First or last name, address, telephone number, etc.)
    a. Why or why not?
160.   What else did you talk about or do?
161.   How do you think the adoptive parents (adoptive family) felt about you at that first meeting?
162.   Have you had any more meetings with the adoptive parents (adoptive family)?
    a. If "yes," Please describe any more meetings with the adoptive parents (adoptive family)? When/where/with whom (is child present)? What kinds of activities did you engage in?
163.   How do you think sharing information and meeting with [child]'s adoptive family has impacted you?
    a. Your child? You and your spouse/partner? Other children in family? The adoptive family?
164.   In a few words, how would you describe the nature of your relationship with the adoptive parent(s)? (Probe: as a relative, friend, etc.)
    a. How would you describe the nature of the relationship between your child's adoptive family members and your child, your partner/spouse (if applicable), and other children in the family (if applicable)?
    b. Has that changed over time?
    c. Do you view the adoptive parents / adoptive family as being a part of your family?
    d. Do you feel more comfortable/close with one parent over the other? If yes, why?
165.   In a few words, how would you describe your current feelings about [child]'s adoptive family members?
    a. Do you ever feel in competition with them?
    b. Do you think they ever feel in competition with you? (If applicable – or other birth family members?)
166.   We're aware that many of the adoptive families we've worked with are diverse in terms of race, parents' gender and sexual orientation, or perhaps experiencing a family transition such as parents' separation or divorce. We're interested in your thoughts about these types of diversity and how any or all of these aspects may have influenced your feelings about diversity and adoption. I'm going to ask you about some of these specific aspects of diversity and whether that has had any influence on your thoughts, feelings, and attitudes. Since this was a lot of information, we'll talk about each of these in turn – some may or may not feel relevant to you. Please answer yes or no, we will have a chance to go over each question in more detail at the end.
    Yes / No - Do you feel that race has influenced your feelings about [child], adoption, and/or the level of openness you have with the adoptive family? Gender (parents or child)? Sexual orientation (placement with same-sex parents)? Family transitions (e.g., parents' separation / divorce? Religion?
    a. If yes – could you tell me a little more about that?

b. Do you feel these aspects of diversity have influenced you in other ways? (Probe each aspect separately like above) Why/why not?

167. What is the most satisfying aspect of your relationship with the adoptive parent(s) (adoptive family)? What is the most difficult aspect?

168. What interpersonal challenges have you navigated with the adoptive family?

169. Would you say you act the same or differently with [child] while in the presence of his/her adoptive parents / adoptive family? (yes/no)
    a. In what ways do you act the same/different?

170. Do you and [child] ever spend time together without the adoptive family there?

171. Do you talk with [child] about adoption? (yes/no)

172. Does [child] express any feelings about being adopted? (May not be as relevant if child was very young when he/she was told and/or the families always openly discussed it)
    a. If "yes", can you briefly describe what kinds of things they talk about? (e.g., what adoption means, talking about birth family, etc.)
    b. If "no", do you plan to talk about adoption with [child]? (why/why not?) If yes, can you briefly describe when and what kinds of things do you plan to talk about?

173. If adoption is discussed, how comfortable is [child] with talking about his/her adoption?

174. Does [child] initiate conversations with you or ask you questions about adoption?
    a. If "yes," how frequently? Have there been particular reasons [child] initiated these conversations?

175. In a few words, what do you think are [child's] feelings toward his/her adoption and also his/her adoptive family members? (Generally positive or content? Any negative feelings? Confused? Etc.) Please describe in a few words.

176. If you lose contact with the adoptive family, do you think [child] would initiate a search for you or other family in the future? Why or why not? How would this make you feel?
    a. Have you ever hesitated with making a request of the adoptive family in fear that you could lose contact with [child]?

177. We've talked about quite a few things related to (child's name)'s adoption and openness arrangements, but I wonder if there might be anything that we've skipped that you feel would be important to understanding you, your family, and your experience with adoption. Is there anything that you would like to add to what we have discussed?

ADOPTION AND CURRENT FAMILY QUESTIONS
These last questions are about experiences of openness in adoption with your partner and/or your children who are living with you / you are currently parenting. (If no partner/other children, SKIP to END.)

178. *If has partner,* what have you told your partner about your experiences with adoption?

179.   If applicable - What have you told your children about your experiences with adoption?

180.   If applicable - Can you briefly tell me about whether the experiences of your other children have generally been positive surrounding [child]'s adoption or about adoption in general? (yes/no) Can you give an example?

181.   If applicable - Does [child] have a relationship with any of your currently parented children? (i.e., children living with you, etc.)

[NOTE: If participant answers "no," then skip TO END INTERVIEW.]

182.   How did [oldest parented child] and [child] first establish a relationship?
   a. Who initiated the relationship?
   b. Did you encourage [oldest parented child] and [child] to have a relationship?
   c. If so, in what ways did you do that?

[NOTE: If [child] has a relationship with several siblings, ask the series of questions about each one, as the relationship between [child] and each parented sibling may differ.]

183.   How would you describe the relationship between [oldest parented sibling] and [child] at this point in time? [PROBE: For example—warm, strained, close, easy, difficult, etc.? Are they more like friends than siblings?]

[NOTE: If [child] has a relationship with several birth siblings, ask this question for each one, as the relationship between [child] and each birth sibling may differ.]

184.   How has the relationship between [oldest parented sibling] and [child] developed over time?

185.   If applicable – How has [child]'s relationship with [parented children] affected your relationship with [child]?

186.   Did milestones that occurred in either [child]'s life or [oldest parented sibling]'s life affects their relationship?

[NOTE: If [child] has a relationship with several birth siblings, ask this question for each one, as the relationship between [child] and each birth sibling may differ.]

187.   How do [child] and [oldest parented sibling] stay in contact?

188.   What forms of communication do they use?

189.   How frequent is the contact?

[NOTE: If [child] has a relationship with several birth siblings, ask this question for each one, as the relationship between [child] and each birth sibling may differ.]

TO END INTERVIEW:

Interviewer: All right, that's all I have. Do you have any other questions or comments you'd like to share? If not, thank you so much for spending your time telling me about your experiences. We are so appreciative of your sharing with us. [PI] will be following up with our study debriefing as well as some other information about your payment for participating over the next few weeks. If anything comes up in the meantime, don't hesitate to reach out. Again, thank you so much for your time and thoughtfulness. I've really enjoyed our conversation. [For online chat interviews only:] You can now feel free to delete this account, which will also delete record of this interview. We password protect the transcripts and store them on a secure network.

APPENDIX C: CODEBOOK

A thematic coding.

Instructions for this codebook:
1. Initially, read the appropriate excerpts from each assigned Birth Family interview.
2. Globally code the entire interview in addition to these specific questions for any relevant themes (as info could technically come up anywhere across the interview). Please take note of any additional themes that arise.
3. Then, in the excel sheet, select the sheet with your name on it. The sheet has a column for the transcript you are assigned titled Participant ID. At the top of the excel sheet, there is a row made up of the interview questions that correspond to this codebook (EX: Q14) with interview question explanations (EX: Q14_EX). Within this codebook, you will find explanations for each code.
4. In the code column for each question, enter the number that corresponds with the interviewee's response (EX: 1).
   a. If appropriate, multiple codes can be selected. In this case, please note your reasoning for multiple codes in the explanation column.
   b. If the interviewee's response yields multiple codes: 2 OPTIONS:
      i. OPTION ONE: Enter multiple codes separated by a comma. (EX: 1,2,3).
      ii. OPTION TWO: Enter a new code column for each additional code. Each new code column will be created to the right of the first column and labeled with the original name plus 2,3,4, etc. (EX: if the original name is Q14 the new column will be named Q14+2, if a third column is needed the name will be Q14+3, so on and so forth).

Question 14: How old were you at the time (of the pregnancy OR placement? Be sure to specify)	Pregnancy/ Adoption Decision Life Circumstance Age of Pregnancy *Participants direct or inferred mentioning of being 'too young' or 'too old' to be pregnant or have a child.* *Consider life circumstance; age connected with being pregnant.* *Ex: Teen years often considered too young.*	0- Did not mention this 1- Considered/ felt young at the time of pregnancy 2- Considered/felt appropriate age or as if age was not a factor 3- Considered /felt old at the time of pregnancy 4- Age mentioned without any feelings associated of being pregnant at that age Blank- question not included 9- participant was unclear, or gave an incomplete answer
Question 15: Tell me about yourself during this time. [Probe for living situation, occupation, education, relationships, etc.)	Pregnancy/Adoption Decision Life Circumstance Stable or Unstable *Participants direct or inferred mentioning of stability or instability during this time.* *Consider life circumstance; stable could be having an occupation/ having an income, etc. Unstable could be unemployment, no income, insecure living situation, lack of education, insecure relationship.*	0- Did not mention this 1- In a somewhat unstable situation according to life circumstance 2- In a somewhat stable situation according to life circumstance Blank- question not included 9- participant was unclear, or gave an incomplete answer

Question 16: With whom did you discuss the pregnancy? (i.e., school counselor, parent, friends, doctor, etc.)	Pregnancy/ Adoption Decision Outside influence Social Support *Did participants feel the need to hide their pregnancy?*	0- Did not mention this 1- Mentioned purposefully not discussing their pregnancy with others 2- Mentioned discussing their pregnancy with others Blank- question not included 9- participant was unclear, or gave an incomplete answer
Question 17: How did your family react to the pregnancy? (Probe: What was it like initially and did it change?)	Pregnancy/Adoption Decision Outside influence Social Support Acceptance from others: People's reactions to pregnancy	0- Did not mention this 1- Felt that their family was unsupportive of the pregnancy 2- Felt that their family was supportive of the pregnancy 3- Neutral (neither supportive nor unsupportive) Blank- question not included 9- participant was unclear, or gave an incomplete answer
Question 18: How did others (friends, coworkers, etc.) react to the pregnancy? (Probe: What was it like initially and did it change?)	Pregnancy/ Adoption Decision Outside influence Social Support Acceptance from others: People's reactions to pregnancy	0- Did not mention this 1- Felt that their friends were unsupportive of the pregnancy 2- Felt that their friends were supportive of the pregnancy

		Blank- question not included 9- participant was unclear, or gave an incomplete answer
Question 19: How did the baby's [father / other birth parent] react to the pregnancy? (Probe: What was it like initially and did it change?)	Pregnancy/ Adoption Decision Outside Influence Social Support Pre-Placement Support Absence of Support by BF	0- Did not mention this 1- Felt that BF was unsupportive of the pregnancy 2- Felt that BF was supportive of the pregnancy Blank- question not included 9- participant was unclear, or gave an incomplete answer
Question 20: How did you feel about being pregnant? a. Were there any health complications during your pregnancy?	Pregnancy/ Adoption Decision Emotional Health Emotional Response	0- Did not mention this 1- Mentioned mostly positive feelings associated with being pregnant 2- Mentioned mostly negative feelings associated with being pregnant 3- Neutral (neither positive nor negative feelings) Blank- question not included 9- participant was unclear, or gave an incomplete answer
Question 21: Did you feel supported during your pregnancy? a. **If yes** – Who helped, and how did	Pregnancy/ Adoption Decision Pre-Placement Support	0- Did not mention this 1- Felt overall a lack of support during pregnancy

they help? Did you feel these supports were effective?	Social, Emotional, Practical, Financial	2- Felt overall support during pregnancy Blank- question not included 9- participant was unclear, or gave an incomplete answer
Question 22: Did you work with an adoption agency? b. If so, did the agency offer you any form of help (ex: classes, counseling, financial supports) during your pregnancy?	Pregnancy/ Adoption Decision Social support Counseling Resources *Participant noted that the agency offered a form of help.*	0- Did not mention this 1- Noted working with an adoption agency 2- Noted not working with an adoption agency 3- Agency offered help 4- Agency did not offer help Blank- question not included 9- participant was unclear, or gave an incomplete answer

Question 24: Please describe your feelings during your hospital stay with the baby [**if not at hospital**: just after giving birth].
 	
    c. What contact, if any, did you have with the baby during your hospital stay [**if not at hospital**: just after giving birth]?
    d. Did you see, hold, feed, or stay (room) with the baby?
	Pregnancy/ Adoption Decision
	
	Emotional Health
	Having a moment with baby in hospital.
	
	Did the participant feel her needs were met during her hospital stay? Was the BM able to hold the baby if desired?
		0- Did not mention this
		1- Mentioned mostly negative feelings associated with hospital stay
		2- Mentioned mostly positive feelings associated with hospital stay
		3- Did not have contact with the baby during hospital stay
		4- Had contact with the baby during hospital stay

		Blank- question not included 9- participant was unclear, or gave an incomplete answer
Question 25: Did any members of your family or the adoptive family come visit in the hospital [**if not at hospital**: after you gave birth]? e. If so, who? f. What contact, if any, did they have with the baby? g. Were there any problems surrounding this contact?	Pregnancy/ Adoption Decision Social Support	0- Did not mention this 1- Noted family members and/or adoptive family's presence at birth 2- Noted family members and/or adoptive family's absence at birth Blank- question not included 9- participant was unclear, or gave an incomplete answer
Question 26: Did you have a role in choosing adoption for [child]? (Probe: if yes/no, ask for any more information the participant would like to share.]	Pregnancy/ Adoption Decision Freedom of Choice	0- Did not mention this 1- Felt they did not have a role in choosing adoption 2- Felt they had a role in choosing adoption Blank- question not included 9- participant was unclear, or gave an incomplete answer
Question 27: How old was child (or how far along in the pregnancy was it) when you decided to choose adoption?	Pregnancy/ Adoption Decision Life Circumstance	0- Did not mention this 1- Chose adoption in the earlier stages of pregnancy 2- Chose adoption in the later stages of pregnancy

		Blank- question not included 9- participant was unclear, or gave an incomplete answer
Question 28: Did you consider any other plans other than adoption? (*Only note if more information is needed:* i.e., raising [child], abortion, etc.)	Pregnancy/ Adoption Decision Freedom of choice in Decision Access to Information Having information and resources at the "right" time	0- Did not mention this 1- Mentioned considering other plans 2- Mentioned only considering adoption Blank- question not included 9- participant was unclear, or gave an incomplete answer
Question 29: Did you feel supported in your decision?	Pregnancy/ Adoption Decision Support: Social, Emotional, Practical	0- Did not mention this 1- Mentioned feeling supported in decision 2- Mentioned feeling unsupported in decision Blank- question not included 9- participant was unclear, or gave an incomplete answer
Question 30: Who supported you (in your decision)? (Family, friends, roommates, relatives, significant others, siblings, etc.) a. **If yes** - How did they help? (How were they supportive?)	Pregnancy/ Adoption Decision Support: Social, Financial, Emotional *Financial support- monetary funding, backing, assistance, resources, etc.*	0- Did not mention this 1- Family/ Relatives/ Siblings 2- Significant Other 3- Friends/ Roommates 4- Did not feel supported in

b. Do you have friends or relatives who have adopted or placed children for adoption?
 	
    i. If so, could you briefly describe their experiences?
 	
    ii. How have they and their experiences influenced your feelings?
	Social support- social acceptability from friends, from work (ex: to return to work), outside help, community in general, a helping hand
	
	Emotional Support- emotion sharing, open-up to, provision of acceptance, reassurance, encouragement, a listening ear
		pregnancy decision
		5- Financially
		6- Socially
		7- Emotionally
		Blank- question not included
		9- participant was unclear, or gave an incomplete answer

Question 31: Did you ever feel that you were forced into placing [child] for adoption?	Pregnancy/ Adoption Decision Life Circumstance Freedom of Choice in Decision	0- Did not mention this 1- Mentioned feeling forced into placing child for adoption 2- Mentioned feeling decision was voluntary into placing child for adoption Blank- question not included 9- participant was unclear, or gave an incomplete answer

Question 38: *If worked with an agency* What factors influenced your decision to place your child though (name of agency)?	The Adoption and Placement Process Social Support: Agency Placement Support	0- Did not mention this 1- Reputation 2- Location 3- Resources available 4- No factors in particular

	Other factors example: a personal connection.	5- Other factors Blank- question not included 9- participant was unclear, or gave an incomplete answer
Question 40: After the pregnancy, what kind of support, if any did you receive from the agency (or others)? Were these supports helpful?	The Adoption and Placement Process Support: Social, Financial, Emotional Access to Resources Post-Placement Support Having information/ resources at the "right" time	0- Did not mention this 1- Mentioned support that falls within social realm 2- Mentioned support that falls within financial realm (free services/ resources) 3- Mentioned support that falls within emotional realm 4- No support offered Blank- question not included 9- participant was unclear, or gave an incomplete answer
Question 41: *If worked with an agency OR through natural progression of relationship and agreement with adoptive parents:* What options did your agency or adoptive parents offer/discuss regarding open or closed adoptions?	The Adoption and Placement Process Resources and Information Sharing Having information/ resources at the "right" time *Note if chosen options was through agency or agreement with adoptive parents*	0- Did not mention this 1- Offered sharing of information 2- Offered pictures 3- Offered gifts 4- Offered meeting parents 5- Offered selecting adoptive parents 6- Offered other options Blank- question not included 9- participant was unclear, or gave an incomplete answer

Question 56: Have you noticed any changes (improvements or decline) in your health (physical/ mental/emotional) since the time of the placement?	The Adoption and Placement Process Post-Placement Health, Adjustment Guilt, Greif, Mental Health	0- Did not mention this 1- Noticed changes in health since time of placement 2- Did not notice changes in health since time of placement Blank- question not included 9- participant was unclear, or gave an incomplete answer

Question 72: How would you describe your current feelings about [child]'s adoptive family?
 	
    h. Do you ever feel in competition with them?
    i. Do you think they ever feel in competition with you? (**if applicable** – or other birth family members?)
	The Adoption and Placement Process
	
	Relationship contact/ contract with adoptive parents
		0- Did not mention this
		1- Mentioned positive feelings associated with child's adoptive family
		2- Mentioned negative feelings associated with child's adoptive family
		3- Indifferent feelings associated with child's adoptive family
		Blank- question not included
		9- participant was unclear, or gave an incomplete answer

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