

## Academic Article

# My First Known Blood Relative - An Exploration of Female Adoptees who give Birth to Biological Children

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*Research on adoption tends to focus on the adoption triad - adopted children, adoptive mothers and birth mothers. The female adoptees' experience of having their own biological children is a complex and far less studied one. For some adoptees, having their own biological child is the first time they recognise something of themselves in someone else and can help solidify their identity*

## Introduction

Considerable research on adoption exists from the viewpoint of the adoptees' earlier years, mothers who give their babies up for adoption and parents who adopt them. However, adoptees

seem to be overlooked in research, especially when they move on to have their own families (Day et al., 2015). Often when an adoptee gives birth, the child becomes their first known blood relative (Collishaw, Maughan & Pickles, 1998; Greco,

Rosnati, & Ferrari, 2015). Price (2016), in a study of adoptees who adopted children, suggests that they come to a fuller understanding of their own adoption and build a deeper connection with their adoptive mothers, but consideration needs to be given to adoptees who give birth to biological children.

Adoption is a life-altering event, affecting all members of the adoptive triad (Silverstein & Kaplan, 1982). When a child is given up for adoption, the bond and attachment with the birth mother appears to be broken and new bonds and attachments form within the adoptive family. This article explores early attachment, the adoptees' sense of belonging and desire for a blood connection, the adoptees' relationship with their birth and adoptive mothers and what occurs when female adoptees become mothers, including the fear of the loss of the child.

## Attachment

Bowlby (2005) states that secure early attachment does not have to be experienced with the biological mother, but with a primary caregiver. In the case of adoption, the primary caregiver, often being the adoptive mother, is a secure enough base for the child to form an attachment. However, concerns and challenges do arise. Winnicott (1992) believes that attachment with baby and the mother begins during pregnancy where the baby

forms an attachment with the mother in the womb that continues after the baby is born. When a baby is adopted, this bond is broken and a new bond is formed with the caregiver. However, Dublin (2013) and Phillips (2011) propose that even though the attachment or bond with the birth mother appears to be broken on separation, the tie with the birth mother still exists with some adoptees. Although Bowlby (2005) asserts that secure early attachment can be formed with a primary caregiver that is not the biological parent, Sharpe (2012) questions how 'good enough' parenting can be given to a child who has arrived through some type of caring capacity, where the adoptive parents know nothing about the child and have not experienced it in the womb. Feeney, Passmore and Peterson (2007) suggest that there is a small risk factor for adult adoptees in relation to attachment security. Greco et al. (2015) highlights that very little is known about the long-term implications of adoption for psychosocial adjustment in adult life, how adoptees are in forming intimate relationships and their transition into parenthood. Jones (1997) theorises that disruption in early attachments can cause problems in intimate relationships later in life and adoptees may find it difficult to free themselves from feelings of rejection by their birth mother.

Adoptees are often told by their adoptive parents that they are special and were chosen. Jones (1997) purports that this story is an attempt by the adoptive parents to emanate their happiness and to negate the loss of the birth mother. Verrier (2009) claims that this story often puts pressure on the adoptee to live up to parents' expectations. In contrast, Kranstuber and Kellas (2011) argue that being told that

adoptees were chosen helps to solidify their sense of self and to value and trust themselves.

In her work with all members of the adoption triad, Verrier (2009) describes the "primal wound" as a wound of the adoptee that is physical, emotional, psychological and spiritual. She explains that this wound is caused by the child's separation from their biological mother and that acting out is the child's attempt to connect with the adoptive mother. She cites the results of research conducted by the Parenting Resources of Santa Ana, California, that 30-40% of the 2-3% of children who are adopted were found in residential treatment, juvenile halls and specialist schools, showing that adoptees had more difficulty in school, socially and had a higher rate of youth offending, sexual promiscuity and running away from home.

### **A Sense of Belonging and the Blood Connection**

Adoptees often search for a place to belong, stating that they do not quite fit with their adopted family (Philips, 2011; Dublin, 2013). One adoptee interviewed by Verrier (2009) describes this sense of not belonging to her adopted family, despite being unaware that she was adopted. In a case study undertaken by Lord (1991), 'Bob' sensed that he did not fit in, although he was part of a close-knit family, which contradicted his experience of also feeling fortunate.

Jones (1997) proposes that adoptees' need for a biological link is something that contributes to their sense of identity. Day et al. (2015) suggests that the theme of longing for a blood relative to connect the mother to her heritage is similar across the racial divide. Haley (2016) reflects on the loss and lack of sense of belonging that some adoptees experience:

"In all of us there is a hunger, marrow-deep, to know our heritage - to know who we are and where we have come from. Without this enriching knowledge, there is a hollow yearning. No matter what our attainments in life, there is still a vacuum, an emptiness, and the most disquieting loneliness."

### **When Adopted Women Become Mothers**

Congress (2012) notes that adoption research focuses mainly on the experience of adoptees in childhood and adolescence. This prompted the conduction of a study of 34 couples where one of the couple was adopted. The aim was to explore the couples' transition to parenthood. Congress found that the adoptees' definition of their identity is revisited at each stage of life events. Having biological children can bring about significant changes to new parents' lives, and when these parents are adopted these changes may take on a more complex meaning. A new baby is a link to the biological mother's heritage and issues surrounding this may surface for the first time for the adopted mother (Congress, 2012). An unpublished article by Humphries (2003), researching seven adopted mothers, suggested that having their own biological child helped them to solidify their own identity that they had lost through the experience of adoption (cited in Day et al., 2015).

Hampton (1997) conducted research on 20 adopted women, focusing on their transition to motherhood, their experiences of labour and their relationships. The desire to have a blood connection is a common theme in literature published on female adoptees as parents. In Hampton's (1997) study, one of the participants stated that "this baby is going to be the first person I've ever set eyes on in

this world that came from my own blood” (p.100). Another participant described her baby as “a blood relative of my very own... he’s my family now” (p.100). The adopted mothers declared that having their own biological children helped them recapture the connectedness that they stated was lost through their own adoption.

Hampton (1997) found that when an adoptee becomes a mother, the relationship with her two mothers, that is the adoptive mother and the birth mother, comes into focus. The adoptees’ pregnancy and subsequent birth sometimes prompts the search for their birth mothers. Congress (2012) highlights that when the adoptee gives birth, it introduces natural birth into the adoptive family history that may not have previously existed. The child’s birth was perceived by some adoptees as a gift to their adoptive family, although in some cases it emerged that the adoptive parents were not able to reconcile their fertility difficulties. Some adoptive mothers were envious of the adoptee’s ability to bear natural children (Hampton, 1997; Scabini and Rossi, 2012, cited in Congress, 2012).

In studying the effects of adoption on women in terms of relationships and parenting, Collishaw et al. (1998) states that all participants experienced a strain in the relationship with their adoptive mothers during their pregnancy, but having them present at the birth strengthened their relationship. Adopted daughters still retained a connection with their birth mothers, even though they were separated, and some birth mothers expressed a desire to see the children being born, suggesting that this was almost like experiencing their own birth (Dublin, 2013; Hampton, 1997; Phillips, 2011).

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### **Fear of Repeated Loss**

Phillips (2011) examined how becoming a mother connected with suppressed feelings about her adoption. She expressed that when she gave birth to her first child, she had given birth to her “whole self” (p.121). She feared that she would lose her baby during her pregnancy and when he was born she could not leave him as she was afraid that he might go away. Phillips (2011) equates this with how she was separated from her own mother and her constant search for her on street corners when she was younger. The fear in pregnancy or post-birth that the baby will be taken away is a common thread in literature on female adoptees who become mothers. This need to keep their babies close was reported by several participants in Hampton’s (1997) research.

Similar to the experience of Phillip’s (2011) and Hampton’s (1997) participants, Congress (2012) ascertains that the anxiety that their baby might be lost or taken away was experienced by most of the adoptees. In contrast, some adoptees expressed that they believed their child was lucky to have their love and protection rather than being given away or abandoned as they were. In giving birth to their own child, the adoptee must also face up to the issues of why they were given away and may realise that they were not a mistake (Phillips, 2011).

### **Methodology**

A qualitative, semi-structured interview approach to research was taken in this study. Six questions were used as guidelines to collect data from three participants. The sample was made up of three female adoptees who have given birth to at least one biological child. Participants were given pseudonyms: Daphne (three children); Kim (three children); and Peggy (four children).

Data were analysed using Interpretative Phenomenological Analysis (IPA). IPA is usually carried out for small samples of participants and therefore was a suitable method for this study. IPA examines the personal, lived experience, the meaning of it and how the participants make sense of that experience and connections with the emerging themes that were formed. Ethical principles were upheld throughout in accordance with the Belmont Principles (National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research, 1978).

### **Findings and Discussion**

This present research explored issues surrounding the incidence of female adoptees having their own biological children. It explored the adoptees’ early experience of their own adoption to gain insight into their early attachments and the relationship with their adoptive mothers. It further explored whether the birth of the adoptees’ biological children evoked thoughts of their own birth mothers and sparked any desire to reconnect with them, if this had not already occurred. Any changes in relationships with the participants’ adoptive mothers coinciding with the births were also explored and how the adoptees attached with their biological children.

The following themes were identified:

- Being chosen, early attachment; and feeling different;
- Relationship with adoptive mother;
- Reconnection with and empathy for birth mother; and
- Meeting their first blood relative and attachment with them.

### **Being Chosen, Early Attachment and Feeling Different**

On exploration of early adoption it was reported by all participants that they were told they were chosen by their families, concurring with the findings of Kranstuber and Kellas (2011) and Verrier (2009). All participants fondly recalled feeling special on being told this and reported having a good enough early attachment in the early years with their adoptive mothers and feeling loved. Daphne asserted that this story of being chosen appealed to her as a young child, while Kim reported: “You were specially chosen and that every other mammy and daddy had to take what was given to them... but my mammy and daddy went down and picked me especially.”

In contradiction with Verrier (2009) that adoptees interpret being special as having to live up to their adoptive parents’ standards for them, this issue was not reported by any of the participants. In keeping with Jones’ (1997) theory that this was the parents’ attempt to cover up the pain, the chosen story for the participants appeared to solidify their attachment with their adoptive mothers. They knew that they were adopted, but stated that they had always been quite stable within their families.

Verrier (2009) describes the “primal wound” as a wound of the adoptee caused by the child’s

separation from their biological mother and that acting out is the child’s attempt to connect with the adoptive mother. Daphne described herself in later years as being rebellious, but did acknowledge that she always knew her mother loved her. Kim, whose relationship became strained with her mother in later years, emphasised that good early attachment had existed. Verrier (2009) explains this strain as an attempt on behalf the adoptee to connect with the adoptive mother.

On further investigation of the adoptees’ early experiences, two of the participants reported feeling different growing up, similar to the findings of Verrier (2009), Phillips (2011) and Dublin (2013). However, Peggy reported she had not felt different and emphasised that she was always included with her extended family, yet she still did not feel complete. These perceptions were echoed by Kim who described how: “They never made any differentiation, but I always felt different growing up... you’re never complete.”

Haley (2016) likened this sense of difference to loneliness and lack of belonging.

### **Relationship with Adoptive Mother**

All three participants reported having good early relationships with their adoptive mothers, which supports Bowlby’s (2005) theory of secure attachment with the primary caregiver who is not a biological parent. Congress (2012) found in rare cases that the relationship with the adoptive mother becomes strained on the birth of the adoptees’ biological children. Whereas Collishaw et al., (1998) reported that there is no change in the relationship. Peggy described having a good relationship with her adoptive mother throughout her life, with no change in the relationship when she had her

baby. However, she recalled that her adoptive mother was thinking about her birth mother. When her baby was born, Peggy reported that her adoptive mother asked if Peggy had mentioned her birth mother during the birth and that she cried, showing how emotional she still was regarding the adoption.

Kim’s adoptive mother had died before she started a family, which she stated left her “freer to get on with her own life”. She explained that the relationship had become strained, but this was totally unrelated to her pregnancy. Daphne recollected her adoptive mother’s happiness on the birth of her grandchild and how her adoption did not really feature; her adoptive mother was just happy to have another grandchild.

### **Reconnection with and Empathy for Birth Mother**

While the birth of their children did not change the relationship with their adoptive mothers, the births elicited diverse feelings towards their birth mothers. Two participants reported anger and annoyance, and all three reported feelings of empathy.

Before becoming pregnant with their first children, all participants had attempted to reconnect with their birth mothers. In each case the birth mothers did not indicate any desire to reconnect. Even though the reconnection had already been sought, each adoptee’s pregnancy aroused different feelings for each participant towards their birth mother.

Daphne described feeling “fiercely angry”, wondering why her birth mother “wouldn’t take the opportunity to make it right”. Daphne considered that her birth mother’s desire to meet her grandchild would somehow counteract the difficult decision to give her up. She found it challenging

to reconcile what she considered the second rejection by her birth mother, although she did feel empathy towards the “difficult decision to give the child away”.

For Kim, the birth of each of her children evoked the urge to try to reconnect with her birth mother, even though her first attempt had been rebuffed. Kim made several attempts to reconnect and believed that this was a rejection of not only her, but also her children.

All three participants experienced empathy for their birth mother, reflecting on what they must have endured in giving their babies away. Kim stated: “There is a part of me that feels very sorry for her.” Peggy, in agreement with Phillips’ (2009) research, acknowledged how hard it must have been for her birth mother to give her away and challenged the assumption that all adoptees harbour antipathy for their birth mothers: “I think most adopted children don’t feel bitter or resentful... feeling sadness for her... feeling empathy for her... feeling how bloody hard it must have been for her.”

### **Meeting the First-Blood Relative and Attachment with them**

The meeting with their baby as their first-blood relative was a strong theme for all participants in this study. This was especially the case with Kim, who was cognisant that this baby was “my first blood relative... I wasn’t a blood relative, so here was the first baby that was mine - my flesh and blood”, which parallels Hampton’s (1997) findings. Kim described the overwhelming feelings she had for her baby and the joy of recognising parts of herself in him.

Similarly, Daphne was proud that for the first time she could see something of herself in another. She described how it was difficult to be around people who bore no resemblance to her, especially

when others made the presumption that she was biologically related to her adoptive family. Kim also reported that she searched for resemblances and wondered who the baby resembled. This was a new experience for both Kim and Daphne, which links to the findings of Jones (1997), Day et al., (2015) and Dublin (2013) regarding the adoptee’s desire to solidify their sense of identity. Peggy, while not obviously making the blood relative link, found that her first baby was something that was truly hers, alluding to the fact that she had been missing something of herself.

In exploring how the adoptees attached with their biological children, two out of three participants stated that their friends remarked on how they are overprotective of their children, which was not an issue that was conscious for them. This overprotection can be linked to the findings of Congress (2012), Phillips (2011) and Hampton (1997) wherein adoptees maintained that they feared that they would lose their babies and experienced the strong desire to keep them safe. Daphne was unsure if her overprotectiveness was due to her adoption, but acknowledged that the early rejection that she had suffered by her birth mother might have led to her overcompensation. She explained that she showed a lot of love to her children, in particular giving hugs, which was something that was not forthcoming with her adoptive mother. She stated: “If you have feelings of rejection very deep down in you, then you obviously don’t want your own children to feel that, so you might overcompensate.”

Kim related this overprotection to her insecure background, stating that she had been secure in her early years, but circumstances changed later. She acknowledged that she always wanted a big

family and this prompted her to keep her immediate family close. She explained: “I feel sometimes that I overcompensate... [which] could be because of my own background, because it was an insecure background. I wanted to make the world perfect for them... my children were going to have the best world possible... a very secure family... because I never had a family. I have a family now and... I’m going to hold on to them.”

### **Conclusion**

In the exploration of the adoptees’ early attachment, all participants reported having a good early attachment. What was especially poignant was their recollection of being ‘chosen’. The stories told to them by their adoptive parents were recalled fondly, which helped solidify their early attachments. However, the feeling of not belonging, which seems to be common among adoptees, was echoed by two of the participants.

The meeting of a first-blood relative was strongly recognised in two out of the participants. It was the first time for them to recognise something of themselves in another and solidified their sense of identity.

While the birth of their babies did not prompt reconnection with their birth mothers, reactions were evoked relating to all members of the adoptive triad on behalf of the adoptees. Empathy towards their birth mothers was experienced and the assumption that adoptees resent their birth mothers was challenged by one participant. What was also discovered was anger towards their birth mothers on the rejection of the adoptee’s children. Regarding the relationships with their adoptive mothers, all participants reported no change in their relationships.

### **Recommendations for Further Research**

This research suggests that the

following are worthy of further consideration:

- Conflicting reactions of anger and further rejection together with empathy towards the birth mothers was demonstrated by the participants. Further research in this area may facilitate better understanding of contradictory emotions on behalf of the adoptees.
- Further exploration of how adoptees attach to their own biological children would give insight regarding the overprotection and fear of repeated loss experienced by the participants. Further research would be welcome to shed light on the relationship between these and the effect of their own adoption. ☾

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Lynsey O'Kelly holds a BA (Hons) Counselling and Psychotherapy from Dublin Business School and is a pre-accredited member of the IACP. Working from an integrative perspective grounded in person-centered therapy, she believes every person can heal and grow in a supportive non-judgmental environment. Lynsey works with a range of issues including adoption, anxiety, depression, eating disorders, stress, low self-esteem, LGBTQI+ and work-related issues. She has a special interest in working with all members of the adoption triad, specifically around loss, rejection and sense of identity. Lynsey works privately from centres in Dublin 1 and Dublin 4 and can be contacted at lynsey.okelly@gmail.com

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After successfully completing a BA at TCD, Dr. Siobáin O'Donnell graduated from the MA in Addiction Studies programme at DBS School of Arts in 2000. Siobáin has worked as a Research Officer on social research projects, for example, Dept. of Psychology in the Royal College of Surgeons on the SAVI Project and with the Granada Institute on 'An Evaluation of Treatment Efficacy with Types of Men who Sexually Abuse Children'. Siobáin has been lecturing in DBS for the past 19 years in the Departments of Psychotherapy and Social Sciences and successfully completed her PhD in TCD in 2015.

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