



**THE DONALDSON
ADOPTION INSTITUTE**

**PRACTICE GUIDELINES SUPPORTING
OPEN ADOPTION IN FAMILIES HEADED
BY LESBIAN AND GAY MALE PARENTS:**

LESSONS LEARNED FROM THE MODERN
ADOPTIVE FAMILIES STUDY

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Introduction

The Modern Adoptive Families Study (MAF) was designed to explore similarities and differences in family characteristics, experiences and adjustment outcomes in different types of adoptive families.

Data were collected through an online survey of non-kinship adoptive parents residing across the United States. Over 1,600 individuals were included in the final dataset. A detailed summary of the objectives, methods, and descriptive data of respondents and their families can be found on The Donald Adoption Institute (DAI) website (Brodzinsky, 2015).

In creating the MAF project, a strategic plan was developed to publish empirical studies in peer-reviewed journals and other professional outlets in conjunction with practice guidelines to be published by DAI. This report offers practice guidelines derived from the findings of the MAF project. It addresses best practices in supporting open adoption in families headed by lesbian and gay male (LG) parents.

Introduction

ADOPTION BY LESBIANS AND GAY MEN

Interest in adoption by sexual minorities has grown rapidly over the years, especially as policies, regulations, and laws preventing or discouraging them from adopting have been overturned (Appel, 2012; Pertman & Howard, 2012; Howard & Freundlich, 2008), and major professional organizations (e.g., American Medical Association; American Academy of Pediatrics; American Psychological Association; Child Welfare League of America, DAI) have voiced their support for LG adoption. Current estimates suggest that over 65,000 adopted children are being raised in families headed by sexual minority parents (Gates, Badgett, Macomber & Chambers, 2007), with LG couples estimated to be at least four times more likely to be raising an adopted child than heterosexual parents (13% compared to 3%; Gates, 2013).

Successful adoptive family stabilization and healthy parent-child relationships are supported by sensitive, thorough, and competent pre-adoption preparation and post-adoption support (Brodzinsky, 2008). These services are especially important for sexual minority-parent families for two reasons. First, despite the growing acceptance of adoption by lesbians and gay men across the country (Brodzinsky, 2012), they still confront negative stereotypes, misconceptions, and discrimination from adoption professionals, birth parents, and community members (Brodzinsky, 2011; Kinkler & Goldberg, 2011; Mallon, 2012; McCutcheon & Morrison, 2015). Second, they are also more likely than heterosexual parents to adopt children from foster care who are racial minorities and/or characterized by developmental and mental health problems (Brooks & Goldberg, 2001; Gates et al., 2007; Goldberg & Smith, 2009). As a result, lesbian- and gay male-parent families are likely to benefit from working with “gay affirmative” adoption professionals who are sensitive and skillful in helping their clients confront homophobic stereotypes and behavior, and support them in building strong family and community relationships. Although significant progress has been made in strengthening social casework and clinical practice guidelines for working with adoptive families headed by sexual minorities (Brodzinsky, 2008; Brodzinsky & Pertman, 2012; Goldberg & Gianino, 2012; Human Rights Campaign, 2009; Lev & Sennott, 2013; Mallon, 2006, 2012), one area that has received little attention is the experiences of these families in developing and maintaining contact with their children’s birth families.

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OPEN ADOPTION IN FAMILIES HEADED BY LESBIANS AND GAY MALE PARENTS

Open adoption occurs on a continuum, from placements in which there is no identifying information shared between the adoptive and birth families and no post-placement contact between them, to those in which post-adoption contact occurs only indirectly through the use of an intermediary (e.g., adoption agency), and, finally, to those in which there is full disclosure of identifying information between families, with some form of direct contact following the adoption. Post-adoption contact varies considerably in its form (e.g., face-to-face, telephone, emails, texting, and/or social media), frequency (e.g., weekly, monthly, yearly, every few years), consistency (regularly scheduled versus erratic contact), relationship quality, and those family members involved in the contact process (Grotevant & McRoy, 1998; Siegel & Smith, 2012).

Contact between adoptive and birth families is more common in domestic infant placements than in public child welfare adoptions or those from abroad. The National Survey of Adoptive Parents (NSAP) conducted in 2007-2008 found that 68% of parents adopting from private domestic agencies had post-adoption contact with their children's birth family compared to only 39% of those who adopted from the foster care system and 6% who adopted from other countries (Vandivere, Malm, & Radel, 2009). Unfortunately, NSAP did not code for parental sexual orientation, and, therefore, could not provide comparable data for sexual minority adoptive families. Brodzinsky (2011), however, reported similar levels of contact with birth family in a national, non-random sample of families headed by lesbian and gay male adoptive parents. Specifically, LG parents who completed domestic adoptions through private agencies or attorneys compared to those who adopted from the child welfare system or from abroad were more likely to be chosen by birthparents (68.7% v 4.5%), more often met the birthparents prior to adoption (59.7% v 20.2%), had more ongoing contact with birth family members (52.2% v 20.2%), and were more often involved with birthparents who knew about their sexual orientation (58.2% v 23.5%). Nearly three quarters of respondents (73.3%) indicated a very positive and accepting attitude on the part of birth family upon learning of the adoptive parents' sexual orientation, with another 20% noting that birth parents initially presented some resistance to the idea of placing their child with them, but gradually were accepting of the plan.

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Although little research has directly compared sexual minority and heterosexual adoptive parents' experiences with openness in adoption, there is reason to believe that LG parents may view contact with birth family differently from heterosexual parents.

For example, some work suggests that sexual minority parents may not place as much emphasis on biological parenthood as heterosexual parents (Goldberg, Downing, & Richardson, 2009) and may be more likely to view non-family persons (e.g., friends) as kin (Oswald, 2002). Thus, they may have an easier time incorporating their child's birth relatives within their definition of "family" than heterosexual parents. Sexual minority parents may also struggle less with their own identities as "mother" or "father" because the transition to parenthood is less often connected with the emotional turmoil associated with infertility (Goldberg & Smith, 2008; Goldberg et al., 2009). Consequently, they may feel less threatened by contact with their child's birth family compared to heterosexual parents. In addition, gay male parents may be particularly inclined to incorporate their child's birth mother into their family's life for other reasons. In developing their parental identities, they are likely to confront gendered stereotypes suggesting that women are better suited for parenthood than men (Goldberg, 2012), and, as a result, may be motivated to identify female parenting figures who can be involved with the family. In such circumstances, gay men may feel less competition or threat when there is contact with birth mothers than other adoptive parents, especially when they are purposely chosen by these women as a way of ensuring that there will be no other "mother" in their children's lives (Brodzinsky, 2011; Goldberg, 2012).

Until recently, only two studies examined the experiences of openness in adoption in families headed by LG parents compared to those headed by heterosexual parents. Goldberg, Kinkler, Richardson, and Downing (2011) reported that heterosexual parents who adopted infants often viewed open adoption as the only viable placement option because few agencies were offering closed adoptions. In contrast, LG parents reported

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more positive feelings about open adoption because the philosophy of this practice was consistent with their desire to be open and transparent about their sexuality. Both groups of parents reported more positive views about open adoption when birth family members were free of significant personal problems (e.g., drug use, mental illness) and cooperated with them in setting appropriate family boundaries and in developing positive inter-family relationships. In a second study, Farr and Goldberg (2015) explored the extent of contact with birth family at three months post-placement and again at one year post-placement. Nearly all families (93%), regardless of parental sexual orientation, reported some level of contact with birth family, with no consistent difference for families headed by lesbian, gay male, and heterosexual parents.

In light of the growing number of adoptions by LG parents and the importance of ensuring that these families receive appropriate preparation and support when their adoption arrangements involve contact with the birth family, it is critical that more information be collected about the extent of their involvement and experiences with open adoption. Toward this end, Brodzinsky and Goldberg (in press) analyzed data from the MAF study, comparing the extent of contact and pattern of contact dynamics with birth families for adoptive families headed by LG and heterosexual parents. Contact was measured in relation to the respondent's oldest adopted child at three points in time: prior to or at the time of adoption placement, following placement, and currently. Furthermore, given that the dynamics of open adoption are quite different in private domestic placements compared to public child welfare adoptions (Neil & Howe, 2004; Siegel & Smith, 2012), the study also examined patterns of contact by family type separately for the two types of adoptive placements. A brief summary of the study is presented below, along with practice implications that derive from the findings.

Contact with Birth Family in Adoptive Families Headed by Lesbian, Gay Male, and Heterosexual Parents

Contact with Birth Family

Families whose oldest adopted child was less than 18 years of age and had been placed from either a private domestic agency (or an independent adoption practitioner) or from the child welfare system were included in the study¹. The total sample consisted of 671 families headed by heterosexual parents, 111 families headed by lesbian parents, and 98 families headed by gay male parents². Respondents ranged in age from 24 to 70 years, with a mean of 43 years. For heterosexual-parent families, 91% of respondents were female. Nearly 87% of families were headed by two parents, with 88% of partnered respondents reporting that they were married. Approximately 88% of parents were Caucasian and most were well educated and financially secure, with 79% having a college or graduate degree and 55% reporting a family income exceeding \$100,000.

No differences were found in respondents' age, race, or partnership status as a function of family type. Heterosexual parents were more likely to be married (86%) than either lesbian (41%) or gay male parents (54%). Lesbians and gay men were more likely to be part of an interracial relationship than heterosexual parents (H = 8%; L = 22%; G = 38%). Sexual minority respondents were more likely to be college graduates (L = 87%; G = 91%) than heterosexual parents (75%). Gay-male parents were more financially secure than either lesbian or heterosexual parents (see Table 1).

Respondents' oldest adopted child ranged in age from one month to 17.9 years, with a mean of seven years. No age difference was noted for respondents' oldest adopted child as a function of family type. Lesbians were more likely to adopt a child of a different race from both parents than heterosexual parents; a similar, but non-significant, trend was also found for gay men.

(1) Because relatively few gay men had adopted from another country, making comparisons of international adoption by family type unreliable, data from families whose oldest adopted child was placed from abroad were excluded from this study.

(2) Because one of the primary goals of the MAF project was to compare adoption experiences and outcomes in families headed by sexual minority parents versus those headed by heterosexual parents, efforts were made to oversample from adoption placement sources and parenting organizations known to support adoption by lesbians and gay men. See Brodzinsky (2015) for more detail about the sample recruitment process.

Contact with Birth Family

There were no family type differences in adoption placement sources for respondents' oldest adopted child: for both lesbian- and gay male-headed households, roughly 55% of children were adopted from the child welfare system and 45% from private domestic agencies; for heterosexual headed households, 47% of children were adopted from the child welfare system and 53% from private domestic agencies (see Table 2). Readers are referred to Brodzinsky and Goldberg (in press) for more details regarding the demographic and placement characteristics of respondents and their oldest adopted children.

Survey questions related to the extent of contact, frequency of contact, type of contact, and relationship quality with birth family were the primary focus of attention in the study. Contact was explored prior to or at the time of adoption placement, following placement, and in the adoptive family's current life for both private domestic placements and public child welfare placements.

Contact with Birth Family

Table 1: Respondents' Demographics by Family Type

	Heterosexual (M, SD, or %)	Lesbian (M, SD, or %)	Gay (M, SD, or %)
Respondents' Age (yrs)	42.79 (7.50)	41.74 (7.00)	42.97 (6.91)
Respondents' Race Caucasian	94.6%	94.5%	89.8%
Partner Different Race*	8.1%^a	21.6%^b	38.1%^c
Partnered	86.8%	87.4%	85.7%
Married*	86.1%^a	40.5%^b	54.1%^c
Respondent College Graduate*	75.3%^a	87.4%^b	90.8%^b
Household Income > \$150,000*	19.7%^a	19.1%^a	63.9%^b

*p= .05 to .0001; Values with the same letter are not statistically different

Contact with Birth Family

Table 2: Family Structure and Oldest Adopted Child (OAC) Demographics by Family Type

	Heterosexual (M, SD, or %)	Lesbian (M, SD, or %)	Gay (M, SD, or %)
OAC's Age (yrs)	7.48 (4.80)	7.47 (4.63)	7.10 (4.16)
OAC Male*	53.5% ^a	46.8% ^a	68.4% ^b
OAC Caucasian*	46.2% ^a	34.2% ^b	27.6% ^b
OAC Transracial Placement*	41.6% ^a	56.8% ^b	51.0% ^{a,b}
OAC Age at Placement (yrs)	1.78 (2.98)	2.23 (3.30)	1.89 (2.64)
OAC Placement Type			
Public Child Welfare Agency	47.2%	55.0%	55.1%
Private Domestic Agency	52.8%	45.0%	44.9%

*p= .05 to .0001; Values with the same letter are not statistically different

Key Survey Questions and Findings

Key Survey Questions and Findings

1. DID YOU MEET ANY MEMBER(S) OF THE BIRTH FAMILY OF YOUR OLDEST ADOPTED CHILD PRIOR TO OR AT THE TIME OF PLACEMENT?

- Families adopting from private agencies were significantly more likely to have contact with birth family than those adopting from the child welfare system (83% v 51%).
- No differences in contact were found for heterosexual, lesbian, and gay male parents whose oldest child was adopted from the child welfare system (H = 53%; L = 44%; G = 45%) or from a private domestic agency (H = 83%, L = 76%, G = 82%).

2. HAS THERE BEEN CONTACT WITH ANY MEMBERS OF THE BIRTH FAMILY OF YOUR OLDEST ADOPTED CHILD SINCE THEIR PLACEMENT?

- Families adopting from private agencies (85%) had more post-placement contact with birth family than those adopting through the child welfare system (75%).
- For child welfare adoptions, gay men (87%) reported having more post-placement contact with one or more members of the birth family compared to either heterosexual (78%) or lesbian (67%) parents.
- For private domestic adoptions, no difference in post-placement contact was reported for heterosexual (85%), lesbian (78%), and gay male (90%) parents.

3. IF THERE HAS BEEN POST-PLACEMENT CONTACT WITH BIRTH FAMILY, IN WHAT WAYS HAS IT OCCURRED?

- No differences were found between families adopting from the child welfare system compared to those adopting from private agencies in terms of face-to-face contact (62% v 63%) or telephone contact (52% v 54%).
- Compared to families adopting from the child welfare system, those who adopted from private agencies were more likely to have contact by email (59% v 34%), postal mail (42% v 19%), text messaging (45% v 23%), social media (42% v 21%), and through intermediaries (24% v 13%).
- For child welfare adoptions, gay men (76%) reported more face-to-face contact with birth family than either heterosexual (61%) or lesbian (54%) parents. They also reported more contact by telephone (74%) than either heterosexual (50%) or lesbian (41%) parents, but less use of an intermediary (4%) than heterosexual parents (16%), with lesbian parents in between the other two groups (8%). No family type differences in child welfare adoptions were found for contact with birth family by means of email (H = 33%, L = 30%, G = 44%), postal mail (H = 22%, L = 20%, G = 9%), texting (H = 20%, L = 23%, G = 33%), or social media (H = 23%, L = 15%, G = 22%).

Key Survey Questions and Findings

- For private domestic adoptions, heterosexual parents (61%) tended to have less face-to-face contact with birth family than either lesbian (72%) or gay male (72%) parents, although the difference was not statistically significant. No family type differences in private domestic adoptions were found for contact with birth family by means of telephone (H = 54%, L = 56%, G = 52%), email (H = 57%, L = 68%, G = 64%), postal mail (H = 45%, L = 42%, G = 27%), texting (H = 44%, L = 46%, G = 48%), social media (H = 42%, L = 52%, G = 36%), or an intermediary (H = 25%, L = 18%, G = 21%).

4. HAS CONTACT WITH ONE OR MORE MEMBERS OF THE BIRTH FAMILY ENDED SINCE THE ADOPTION PLACEMENT?

- Families adopting from the child welfare system were more likely to have contact end with one or more members of the birth family than those adopting from private agencies (27% v 13%).
- No family type differences were found for termination of contact with birth family for adoptions through the child welfare system (H = 29%, L = 20%, G = 28%) or private agencies (H = 13%, L = 10%, G = 10%).

5. ARE YOU CURRENTLY IN CONTACT WITH ONE OR MORE MEMBERS OF THE BIRTH FAMILY? IF SO, HOW FREQUENTLY DO YOU HAVE DIRECT, FACE-TO-FACE CONTACT AND OTHER INDIRECT MEANS OF CONTACT (E.G., TELEPHONE, EMAIL, TEXTING, ETC.)?

- Families adopting from private domestic agencies more often reported being in current contact with birth family than those adopting from the child welfare system (75% v 58%). Although no group difference was found in frequency of direct contact with birth family, families adopting from private agencies reported more frequent indirect contact with birth family than those adopting from public agencies.
- For child welfare adoptions, gay men (74%) were more likely to have current contact with birth family than heterosexual (55%) and lesbian (56%) parents; however, no family type differences were found in the frequency of either direct or indirect contact with birth family.
- For private domestic adoptions, no family type differences were found for extent of current contact (H = 74%, L = 70%, G = 84%) or for frequency of indirect contact; however, lesbian parents reported more frequent direct, face-to-face contact with birth family than heterosexual parents, with gay male parents in between the two groups.

Key Survey Questions and Findings

6. IF YOU ARE CURRENTLY IN CONTACT WITH THE BIRTH FAMILY OF YOUR OLDEST CHILD, HOW WOULD YOU DESCRIBE YOUR RELATIONSHIP WITH THEM (5-POINT SCALE FROM VERY POOR TO EXCELLENT)?

- Families adopting from private agencies reported having a better relationship with birth family members than those adopting from the child welfare system.
- For child welfare adoptions, there was a trend for gay men to report better relationships with birth family than lesbian parents, with heterosexual parents in between the two groups; for private agency adoptions, there was also a trend for lesbian parents to report having better relationships with birth family than heterosexual parents, with gay male parents in between the two groups. Neither trend, however, reached statistical significance.

7. IF YOU DO NOT HAVE CONTACT WITH YOUR CHILD'S BIRTH FAMILY, DO YOU HAVE CONCERNS ABOUT FUTURE CONTACT BECAUSE OF CIRCUMSTANCES LEADING TO HIS/HER SEPARATION FROM THEM, KNOWN CHARACTERISTICS ABOUT THEM, OR POSSIBLE NEGATIVE CONSEQUENCES TO YOUR OWN FAMILY?

- Families adopting from the child welfare system had more concerns about future contact related to circumstances known about the birth family or circumstances related to the child's separation from them than those adopting from private agencies (81% v 26%); they also had more concerns about possible negative impact of contact on their family (71% v 24%).
- No differences by family type were found regarding concerns about birth family for parents adopting from the child welfare system (H = 82%, L = 78%, G = 76%) or from private agencies (H = 29%, L = 19%, G = 9%); no family type differences were found regarding concerns about negative impact on their own family in relation to future contact (H = 74%, L = 66%, G = 60%).

Summary

Summary

Regardless of family type, individuals and couples adopting from private adoption agencies (or independent adoption practitioners) reported a relatively high level of contact with birth family, not only prior to or at the time of placement, but following placement and in their current lives.

They also rated their relationship with birth family quite positively. These findings are consistent with other research on open adoption involving domestic infant placements (Henney et al., 2003; Vandivere et al., 2009).

Importantly, a moderately high level of contact was also found between adoptive and birth families in child welfare placements. In fact, the extent of contact represented in the MAF data for child welfare adoptions (79% following placement; 58% currently) was substantially higher than was reported in the National Survey of Adoptive Parents (39%; Vandivere et al., 2009). Although differences in contact rate could reflect differences in subject selection (including oversampling of LG parents in the MAF project) and differences in the wording of survey questions, they could also signify emerging support for contact in these types of placements across the time periods represented by the two studies.

As would be expected, parents who adopted from the child welfare system reported less positive relationships with birth family in the post-placement period compared to those who adopted from private agencies; they also reported greater concern about establishing contact with birth family in the future. These findings are consistent with research and social casework indicating greater challenges in establishing and maintaining relationships with birth family in child welfare placements (Neil & Howe, 2004). But it is also important to note that most families adopting from foster care reported reasonably positive relationships with birth family members with

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whom they had contact, which, hopefully, will encourage adoption professionals and their clients to more often consider post-placement contact plans in child welfare placements. Data from the MAF project also suggest that LG parents are as motivated as heterosexual parents, and sometimes more so, to establish and maintain contact with birth family compared to heterosexual parents. This is particularly true for families adopting from the child welfare system. For example, gay men who adopted from public agencies were more likely to report having contact with one or more members of the birth family following placement, as well as in their current lives, than either heterosexual or lesbian parents. They were also more likely to have face-to-face and telephone contact, but less contact through intermediaries, than heterosexual parents. In addition, they tended to have more positive relationships with birth family than lesbian parents.

Although fewer differences by family type emerged for adoptions from private agencies or independent adoption practitioners, some notable exceptions warrant highlighting. LG parents tended to have more face-to-face contact with birth family members following placement than heterosexual parents. In addition, lesbian parents reported more face-to-face contact with birth family in their current lives, as well as a tendency for more positive relationships with them, compared to heterosexual parents.

Importantly, differences in contact with birth family as a function of parents' sexual orientation were independent of respondents' and children's demographics, as well as placement factors, for both private and public adoptions.

Overall, the current findings confirm a growing interest in establishing open adoption arrangements with birth family among all types of families adopting domestically, regardless of parental sexual orientation. Furthermore, the desire of LG adoptive parents to seek and maintain contact with their children's birth family at levels that equal or exceed those of families headed by heterosexual parents speaks to their commitment to openness and transparency as a philosophy governing their lives and the lives of their families, and to their resilience in the face of bias and discrimination that is still commonly experienced in their everyday lives and, specifically, when they seek to adopt children (Brodzinsky, 2011; Goldberg, Downing, & Sauck, 2007; Matthews & Cramer, 2006).

Recommendations

Recommendations

Success in establishing and maintaining healthy relationships between adoptive and birth families requires good pre-adoption preparation and post-adoption support.

Helping families understand the realities of open adoption, guiding them in establishing initial contact arrangements, and supporting them in negotiating inter-family relationships over time is critical for all families involved in open placements. But there are also unique issues associated with adoption by LG parents that require additional support from professionals. Although there is growing public sentiment supporting parenting and adoption by LG individuals (Pew Research Center, 2013), societal prejudice, stereotypes, misconceptions, and heteronormative values continue to pose barriers to adoption by sexual minority adults (Mertus, 2010) and may undermine their ability to establish and maintain stable and healthy relationships with birth family. In light of the extent of interest shown by LG parents for open adoption among the MAF respondents, and in other studies (Brodzinsky, 2012; Farr & Goldberg, 2015), greater effort must be made to understand and support their unique experiences in establishing contact and negotiating relationships with birth family. Achieving this goal will increase the prospects of creating permanence and relationship stability for adopted children, as well as healthier identity and developmental outcomes. The Donaldson Adoption Institute has previously offered a number of recommendations related to creating more welcoming, supportive, and affirmative environments in relation to working with sexual minority clients (Brodzinsky, 2011; Howard, 2006; Howard & Freundlich, 2008), and in relation to open adoption (Siegel & Smith, 2012), which continue to be relevant today. Based upon the findings from the MAF project (Brodzinsky & Goldberg, in press), we are pleased to expand our recommendations to include:

ENSURE THAT AGENCY DIRECTORS, SUPERVISORS, AND ADOPTION PLACEMENT PROFESSIONALS RECEIVE COMPREHENSIVE AND OBJECTIVE TRAINING RELATED TO OPEN ADOPTION.

Recommendations

Although more and more agencies are involved in facilitating and supporting open adoptions, there remains many concerns and misconceptions about contact between adoptive and birth family members, especially in relation to placements from the child welfare system (Neil & Howe, 2004; Siegel & Smith, 2012). Training should begin with a self-assessment of attitudes and beliefs regarding open adoption, especially when it involves sexual minority adoptive parents. Being prepared to provide sensitive and affirmative information to birth family members about sexual minority applicants who are interested in maintaining contact with them is also critical. In addition, training should include information about those factors that support healthy contact between families and those that do not, as well as how to manage difficulties in inter-family relationships when they arise. Being aware of professional community resources that can help families negotiate potential conflicts in contact arrangements in the post-adoption period is also vital.

ENSURE COMPREHENSIVE PREPARATION, EDUCATION, AND SERVICES FOR ALL CLIENTS SEEKING OPEN PLACEMENTS.

In discussing adoption options with adoptive and birth families, professionals need to provide objective information about the pros and cons of open adoption, and help their clients come to a decision about contact plans that best serves their needs and the needs of their children. In particular, they must ensure that clients understand that open adoption represents a continuum of contact, through various means, and that no one arrangement works best for everyone. In other words, open adoption is not a panacea for the issues confronting adopted individuals and their adoptive and birth family members. Professionals must also help clients understand that people's desires and needs sometimes change and that a contact plan developed at the time of placement may need to be altered in the future. Providing guidelines to clients about strategies for negotiating differences regarding contact and ensuring that they are aware of community resources for helping them with this process is an extremely important part of adoption preparation and education.

ENSURE THAT ADOPTION PROFESSIONALS ARE AWARE OF THE RECEPTIVITY TO OPEN ADOPTION AMONG MOST SEXUAL MINORITY ADOPTION APPLICANTS AND THE POSITIVE RELATIONSHIPS THEY TYPICALLY FORM WITH BIRTH FAMILY.

Because of the bias and discrimination experienced by sexual minority adults in so many areas of their lives, adoption professionals may assume that those who seek to adopt would be reluctant to be "out" with birth family, precluding the possibility of establishing an open adoption arrangement. This is clearly not the case. The results from the MAF project, as well as other studies and scholarly writings (Brodzinsky, 2011; Goldberg et al., 2011; Mallon, 2012), suggest that most sexual minority adoptive parents value being transparent about their sexual orientation, not only with the adoption professionals they work with, but also with their children's birth families. In short, adoption professionals need to realize that sexual minority adoption applicants typically have quite positive

Recommendations

views about open adoption and, when given the chance, end up forming respectful and appropriate relationships with birth family members.

ENSURE THAT ADOPTION PROFESSIONALS EXPLORE THE RECEPTIVITY TO PLACING A CHILD WITH SEXUAL MINORITY ADULTS AMONG BIRTH PARENTS AND THEIR RELATIVES.

Adoption professionals may assume that birth parents would object to having their children being raised by sexual minority adoptive parents. And, of course, in some cases they would be correct (Brodzinsky, 2011). But in other cases, they would be wrong. Some birth parents explicitly choose to place their children with lesbian- or gay-parent families (Brodzinsky, 2011; Goldberg, 2012). Others may be uncomfortable initially with the adoptive parents' sexual orientation, but eventually become accepting of it (Brodzinsky, 2011). In discussing placement options, adoption professionals need to present the full range of possibilities to birth parents, helping them understand the pros and cons of each type of placement. Concerns about placing a child with a family headed by sexual minority parents need to be directly, supportively, and respectfully addressed with birth family members. When resistance to such a placement is based in stereotypes or misconceptions about non-heterosexuals, adoption professionals can help provide information (e.g., empirical data on the parenting abilities of LG people) that may be reassuring to birth family. Importantly, birth families who wish to have post-adoption contact with their child or grandchild need to know that most sexual minority adoptive parents are supportive of this type of adoption arrangement and are respectful of the child's birth heritage.

PROMOTE POSITIVE STORIES ABOUT LG ADOPTIVE FAMILIES IN THE MEDIA.

One way of educating the public about the benefits children receive when placed in stable and loving adoptive families, regardless of parents' sexual orientation, is to promote positive stories about LG adoptive families in print and digital media. Profiles of successful LG adoptive families, including those who are involved in open adoptions, can help to highlight the strengths that they bring to parenthood, challenge existing stereotypes and misconceptions about parenting by sexual minority adults, and thus support them as viable options to consider when creating an adoption plan for a child. This is especially true in child welfare adoptions involving children who have meaningful relationships with one or more members of their birth family. In such cases, post-adoption contact, in one form or another, is often considered to be in the children's best interests. The fact that LG adoptive parents are at least as supportive of this type of placement as heterosexual parents, and, often, more so, needs to be highlighted in promotional material and stories about children waiting to be adopted.

Recommendations

WORK WITH LG FAMILIES REGARDING MANAGING THE SHARING OF INFORMATION ABOUT THEIR SEXUAL ORIENTATION WITH OTHERS.

LG adoptive parents are often unsure about whether and how to share information about their sexual identity and orientation with others. This information represents part of their identity and life narrative that often has been the source of stereotyping, misconception, and prejudice, and, for some, internalized homophobia (Herek, 2004). The dynamic tension between maintaining privacy about some aspect of self, such as sexual identity and orientation, and being transparent through disclosure can be heightened for some LG parents who are considering or have taken steps to enter into an open adoption arrangement with their children's birth family. LG parents are often unsure how the information will be received, whether birth family members will support the adoption, whether they will agree to post-placement contact, and how they will use this information in their interactions with others, including their adopted children. These uncertainties are well described by communication privacy theory which suggests when private information is shared with others, it is not only "co-owned" by the recipient, but that boundary turbulence emerges between the parties regarding how the information is used (Petronio, 2002). This process can create a "narrative burden" for the individual (Ballard, 2013)—an internal struggle regarding whether, how much, in what way, and with whom to share private aspects about one's identity and life narrative. Whether during the adoption application and home study process, the initial matching and child placement period, or following adoption finalization, LG adoptive parents can benefit from working with knowledgeable and sensitive professionals who are able to help their clients make appropriate decisions about sharing personal information with birth family members and support them in developing healthy and respectful relationships with these individuals.

WORK WITH BIRTH FAMILIES REGARDING MANAGING THE SHARING OF INFORMATION ABOUT THE ADOPTIVE PARENTS' SEXUAL ORIENTATION WITH OTHERS, INCLUDING EXTENDED FAMILY AND FRIENDS.

Once birth family members are aware of the adoptive parents' sexual identity and orientation, they "co-own" this information (Petronio, 2002) and must learn how to manage their knowledge of it, not only in interactions with the adoptive parents, but also with their children who were adopted, and with others inside and outside of their family (e.g., their own children and parents). Although some birth parents and extended birth family are supportive of adoption placement with sexual minority parents, others are not (Brodzinsky, 2012). In adoptions involving post-placement contact, LG parents are likely to be concerned about the messages their children receive from birth family members regarding being raised by lesbian or gay parents. Adoption professionals can be helpful in this area by working with birth families to explore their thoughts and feelings about the specific nature of their children's placement, as well as guiding them in the most supportive and respectful ways of talking about the adoption to extended family members.

Conclusions

Conclusions

Adoption policies and practices that are informed by reliable and valid research findings are clearly in children's best interests. Although research on adoption by sexual minority adults is growing, there is still much to be learned, especially in relation to open adoption.

The MAF project provides further insight into patterns of open adoption in the U.S. and, importantly, confirms the high level of interest shown by lesbians and gay men in supporting post-placement contact with birth family. Given that sexual minority adults adopt at higher rates than heterosexual adults, especially children from the child welfare system, it is important that more research be conducted on how these families negotiate relationships with birth families, how the narrative burden associated with sexual identity and orientation is managed between the families and within the extended birth family, and how best to support these individuals during the pre- and post-adoption process.

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