

## Open versus Closed Adoption

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### About the author:

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### Open versus Closed Adoption

As a nursing student, I have had the opportunity to speak with high school students about the issues of teen pregnancy and parenting. One student in particular confided that she was having trouble deciding whether she should put her unborn baby up for adoption. This conversation prompted me to investigate the legal and ethical issues facing parents who decide to give their child up for adoption. Primarily, I wanted to understand the options available to the birth parent, and also, to weigh these against the legal arrangements in the best interest of the child.

An adoption takes place for several reasons, as a result of an unwanted pregnancy, lack of a proper home environment or numerous other reasons. Three main steps are taken when a child is adopted: the child must be legally separated from their birth parents; the child is transferred to the custody of a qualified adoption agency; and the final step involves the transfer of parents' rights and responsibilities. Here a crucial decision must be made about open or closed adoption. With open adoption, the birth parents will have involvement in the raising of the child as well as communication with the adoptive family during the child's life (Adoption, 2008). If a closed adoption is chosen, the birth parents lose all custody and visitation rights. In this situation both sets of parents remain anonymous to each other and any documents from either set of parents are kept private (Clinton, 1996). A choice of open versus closed adoption must be carefully considered. Nurses may care for parents facing such a dilemma, and should be knowledgeable about both open and closed adoption. While a nurse is not directly involved in the adoption process, he or she is a constant and trusted caregiver with frequent direct contact with patients needing help in acquiring information to make a decision. The purpose of this paper is to discuss

the positives and negatives of placing a child in a closed adoption arrangement as opposed to an open arrangement.

### Review of Literature

#### *Open Adoption*

Increasingly common nowadays is the open adoption process accounting for approximately 70% of domestic adoptions (Schwarzwald, 2008). An open adoption is one in which birth and adoptive parents interact during the adoption process. The degree of openness varies and usually is agreed upon by all of the involved parties (Schwarzwald, 2008). As a general matter, the birth parents have a voice in choosing their child's adoptive parents. Agencies give the birthparents biographies of prospective adoptive parents, and the birthparents pick the family with which they are most comfortable. Both sets of parents meet, and might be in touch frequently during the pregnancy. Many times the adoptive parents are able to witness their child's birth. Open adoption removes the mystery from the adoption process and can permit a greater degree of control in the decision-making (FindLaw, 2008). Little data is available regarding the impact of open adoption on the members of the adoption triad (adoptive parents, birth parents, and child), but advocates of open adoption argue that it helps the birth parent with grief and separation and diminishes the adoptee's identity crisis during adolescence (Schwarzwald, 2008). The open adoption process allows adoptive parents to better answer their children's questions about who their birth parents were, and why they were adopted. Open adoptions can also help the child come to terms with being adopted, because the child's concerns can be addressed directly by everyone who was involved in the adoption process (FindLaw, 2008).

There are downsides to open adoption. Many adoptive parents find the degree of openness to be a threat, fearing that the birthparents will intrude upon their lives, or even seek to

have the child returned to them (FindLaw, 2008). Consider the Debores family who adopted Jessica Schmidts when she was six days old. Some time after the adoption occurred, Jessica's birth parents married and decided that they wanted their child back. After a long court battle, the legal decision was to return Jessica to their birth parents. In this open-adoption scenario, a young child was taken from the only parents she knew and put in the custody of two strangers (Axness, 1997).

### *Closed Adoption*

Closed domestic adoptions are decreasing, but were the norm until recently. The original birth certificate (if available) and adoption records are kept sealed by the courts and can be inspected only with court approval (Schwarzwald, 2008). Even if the adoptive parents and birthparents know of each other at the time of the adoption, they do not stay in touch after the adoption takes place. The child often will not know who his or her birthparents are, especially before turning 18 years of age (FindLaw, 2008). Closed adoption continues to be common when adopting internationally. According to the 2000 US census data, more than 250,000 (13 percent) of the country's two million adopted children were born outside of the United States (United States Census Bureau, 2000).

Some birth parents find a closed adoption arrangement appealing because of its private nature. Like the teenage mothers I spoke with in the high school, some pregnancies are unwanted and accidental. In a closed adoption setting, a mother would welcome the privacy of not having to share the embarrassment of becoming pregnant and lack of want or financial resources for the child. In addition, this arrangement gives birth parents a sense of closure and ability to move on with life. Of infants born to unmarried mothers aged 17 or younger, 8 % were placed for adoption (Chacko, 2008). Advocates for closed adoptions believe that birth mothers who have

continued contact with their children (as in an open adoption) have more difficulty with grief and separation; open adoption is more difficult for the adoptive parents and young adopted children (Schwarzwald, 2008). Adoptive parents might feel more comfortable in this setting as well.

There is no need to physically share the child with the birth parents, and it eliminates an intrusive-third party parent. Adoptive parents might also prefer the protection this setting provides their adopted child from unstable or emotionally disturbed birth parents (Child Welfare Information Gateway, 2008).

### *Interview*

To gain further knowledge about both open and closed adoption arrangements spoke with a family about their recent adoption experience. Sherry Hanson (age 40) and her husband (age 60) brought home their adopted son, Sam, from China in August of 2008. Sam was born with a cleft lip and palate and consequently abandoned by his parents when he was less than 24 hours old. (personal interview with Sherry Hanson on October 19, 2008).

I asked Mrs. Hanson why her family decided to adopt internationally versus domestically and her opinion of the process and legal arrangements she and her husband endured. The Hanson's first contacted an international adoption agency. Each couple who is interested applies for a specific child, and as in the case with the Hanson family, they applied for Sam, knowing of his medical condition. Pediatric healthcare providers may be asked to review information concerning the health of a prospective adoptive child, then clearly and honestly apprise the prospective parents and the involved agency of any special health needs detected at the time of adoption or anticipated in the future. The potential adoptive parents are subject to an in-depth interview and must list a detailed plan for how they will care for the child (Schwarzwald, 2008). "We submitted all kinds of information about our finances and how exactly we would be able to

pay for the medical treatment Sam would need” (personal interview with Sherry Hanson on October, 19, 2008). Finally, potential parents are “logged-in” the system and the process of a closed adoption is started. In pursuit of an international adoption, most families will travel to their new child’s country of origin, each visit lasting from a few days to several weeks. Before an adoptee can be issued an entry visa for the United States, a medical examination is required to address the presence of potential health risks (Grogg, 2007).

The Hanson’s decided to pursue an international adoption for two ethical reasons. First, there was the ethical element of justice—not being viewed fairly as able parents. Because of their older age, the Hanson’s feared that they would have a disadvantage, and might be overlooked. “Being older than our 20’s and 30’s, we thought a mother might pass us up for a younger couple. We felt our chances would be better if we adopted internationally” (personal interview with Sherry Hanson on October, 19, 2008). Second, the Hanson’s did not want to be taken financially advantage of—paying for medical expenses of a birth mother and not having her follow-through. According to the Hanson family, the costs of an international adoption are less than had they chosen to adopt domestically for such reasons. The total cost of adopting varies from \$0 to more than \$40,000.00, depending on a number of factors (i.e. type of adoption, type of placement agency or facilitator, and the child’s age and circumstances). International adoptions can range from \$7,000.00 to \$30,000.00 (Adopting, 2008). “You would think that it might be more expensive internationally, but because the adoptive parents have no financial ties to the birth mother—they are not accountable for pre-natal or birthing health care that make up a significant part of the expense” (personal interview with Sherry Hanson on October 19, 2008).

Mrs. Hanson spoke about a family she knew in the process of an open, domestic adoption. This family felt more comfortable being somewhat involved in the mother’s life before

the child was born. They have paid for all of the birth mother's pre-natal care so far, and will be held responsible for hospital fees to come as well. The birth mother is not married, and lives in a lower socio-economic area. She calls frequently asking for money for personal needs, such as gas to drive to the doctor's office, groceries, etcetera, almost every week. The prospective parents in an open adoption agreement have no legal obligation to pay for personal expenses, but because a mother has up until 24 hours after the baby is born to change her mind about adopting, the prospective parents feel like they have little choice—they don't want the birth mother to become angry with them and take back her decision. "The friends in our support group are looking at spending at least \$30,000.00 for this adoption when it's all said and done" (personal interview with Sherry Hanson on October 19, 2008).

After discussing the ethical issues involved in their choice, I asked about the downsides of closed adoption, such as the loss of medical records. Mrs. Hanson replied that "... medical information would be nice to know, but anymore, you can find out about many of these things through DNA testing" (personal interview with Sherry Hanson on October, 19, 2008). DNA testing can be used in many situations surrounding adoption, as it provides indisputable answers. Adoption registries collect DNA profiles of adoptees and can be used to reunite adopted children with their biological families. In addition, adopted children can also learn about their families' medical history and determine the genetic health risks they may have (DNA Junction, 2008). As for being cut-off from his real family, Mrs. Hanson stated "I think it would be a great thing if Sam could be re-connected with his family, and should he chose to when he gets older, my husband and I will happily support him. I can't see this happening as there is nothing that ties him to his parents, but that would be a possibility in using DNA testing to see if he has siblings

who have been put up for adoption” (personal interview with Sherry Hanson on October 19, 2008).

### Conclusion

As nurses, information and insight into both open and closed adoption is valuable when working in any healthcare setting where such a decision might arise. My experience speaking with the Hanson family face-to-face about the positives and negatives of each arrangement prepared me to aid a high school student in making an informed adoption decision. Adoption is no doubt an important decision for all parties involved, and therefore the legal arrangements should not be decided hastily. After completing this project, I feel closed adoption should be considered more seriously. The emotional being and stability of a child should be the priority. While open adoption provides easier access to medical information, it may not be worth the conflict at stake. Closed adoption gives the role of a parent to the parents who raise a child. No matter the decision, in the end, supporters of either open or closed adoption agree: a child's upbringing should be based on what is better for the child, not what is better for the parent.

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