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CHILDLESSNESS AND ADOPTION:
THE EXPERIENCE OF LOSS AS A SOURCE OF SUFFERING

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The present work deals with the issue of child's adoption. Adoption is presented as a difficult (stressful) situation for the adopted child, but also for the childless married couple, who has decided to take in the orphaned child. Adoption as a difficult situation is connected with the experience of loss. The childless spouses experience the loss of their biological parenthood, the loss of their biological child, who died during the prenatal period or just after being born, but also the loss of the status of a "normal" family created in accordance with the normative model of a family. The adopted child, on the other hand, experiences the loss of biological parents and biological siblings, the loss of genealogical continuity and of "the bonds of blood". The child must be confronted with the fact that "one, to be adopted, must be first abandoned". The problem with the studies on adoption lies in their theoretical character. Because of that, the psychological understanding of adoption reality is limited.

Key words: adoption, childlessness, infertility

In the literature on adoption (1, 2) there is a debate on the topic of whether the adoptive family is the same or different than the biological family. Standpoints on that subject are usually divided. In this article we are going to look at one aspect that in an essential way makes adoptive family different from biological family - the experience of loss. Recently, a stance has appeared in the literature that functioning in adoptive family constitutes difficult, stressful situation for the adopted child (3). Hardly ever do researchers mention that the experience of loss concerns adoptive parents as well. Therefore, the main presumption of this article is that adoption involves some losses as far as adoptive parents and adopted children are concerned. The idea that adoption is a stressful situation runs counter to many prevailing myths and stereotypes about this form of family life that promote an ideal vision of adoption: "...and they all lived long and happily". In fact
adoption typically has been viewed as a societal solution to the problem of stress for all three parts of so called "adoption triangle", i.e., the stress associated with an unwanted pregnancy and with the inability to fulfill parental responsibilities on the part of birthparents, infertility and childlessness on the part of adoptive parents, and a state of homelessness on the part of prospective adopted children (3).

Before describing why adoption is experienced as difficult (stressful) situation by adoptive parents and adopted children, it is important to first define what is meant by difficult (stressful) situation. According to Lazarus and Folkman's (4) definition, stress is a "certain relationship between a person and environment that is evaluated by the person as too demanding, being too excessive to one's resources, and thus potentially damaging to one's well-being. Whether or not a given relationship can be defined as stressful depends on the subjective appraisal of it's meaning for the person involved in it. The relation may be viewed as: (i) harm/loss that relates to the damage which has already been done to the person and has resulted in loss of values such as self-esteem, social acknowledgement, close person, (ii) threat, relating to prospective losses and harms, (iii) challenge, that refers to situations in which losses as well as benefits may be achieved.

Mental health professionals have proposed many theoretical explanations (models) for the problems manifested by adopted children and their families. It is possible to notice a common thread running through all of them - they all define adoption as stressful event for many children and their parents that entails the necessity to make an effort to cope with stress. Brodzinsky (3) drew attention to the experience of loss, especially the loss experienced by adopted children. Experiencing adoption in terms of a difficult situation that involves the feeling of loss also concerns the spouses who made the decision to adopt child. It is connected with the fact of being childless marriage couple.

The experience of loss among adoptive parents

The issue of loss and of traumatic experiences connected with the lack of child among childless spouses rarely is being mentioned in literature. Childless spouses experience the feeling of loss: (i) of procreation ability (one or both spouses); (ii) of the status of "normal" family.

The experience of infertility

The experience of infertility is one of the main problems that adoptive parents must deal with. Infertility, which has been recognized as social disease by the World Health Organization, spreads rapidly. According to the literature (5) about 8% of marriage couples have some difficulties with procreation, which on a global scale means that there are 50-80 mln people who need treatment because of infertility. It is being estimated that there are 2 mln infertile couples more with every year. Medical textbooks define infertility as "the inability to get pregnant after 12 months of regular sexual relationships without using any kind of contraception" (6).
According to estimated data, as there are no epidemiological studies on the matter, the problem of infertility in Poland concerns 18-20% of married couples.

It seems important, from the psychological point of view, to differentiate between male and female infertility (7). Applying this distinction to the marriage reality it must be assumed that infertility may concern only the husband or wife, but it can also directly concern both spouses. Medical literature divides female infertility into: primary infertility (woman has never been pregnant) and secondary infertility (woman has already been pregnant, not necessarily with the same partner) (5).

Infertility caused by man's faulty procreative function concerns about 40-50% of married couples (8). Another important factor in psychological functioning of childless marriages seems to be finding out - or not - the reason of infertility. According to the literature "although there has been a great progress in diagnosing and treating infertility, 5-10% of couples are still classified as a group of so called idiopathic infertility, that is infertility with no defined reason (5). It's also essential to make distinction between two terms: "barrenness" and "infertility". The first one is used to define a permanent state, while partial infertility can be treated (9).

The experience of infertility in marriage is connected with the loss of procreative abilities which means the loss of biological parenthood. The spouses, for whom biological parenthood is not attainable, must define themselves as a childless couple for which biological parenthood is not the only goal. What is more, it must happen at the time when objective reality brings them closer to other marriages, many of which have no problems with the realization of their plans connected with procreation. This situation in marriage may be viewed in terms of loss, with the main questions: "Why me?", "Why did it happen to us?"

Infertile spouses have to cope with the loss of the possibility to conceive their own, biological child who would resemble them. Studies on childless marriages indicate that the couples do not constitute one psychologically homogenous group (7). In the process of statistical analysis a few types of childless marriages have been identified, as well as similarities and differences between particular types of marriages. One of the features that differentiate certain types of childless marriages is the cause of lack of ofspring; it may concern: both spouses (marriage infertility), only the husband (male infertility), or only the wife (female infertility) (7). The common feature to all types of marriages is the willingness to present them in better light in order to prove others their worth and to be acknowledged by society. They all would like to be more effective in achieving their goals. They want to free themselves from somebody's intrusion into their lives. They are tired with everlasting fight for social trust and acceptance and with proving their worth to others. In the studies it has turned out that the most beneficial for marriage is the situation in which both spouses are infertile; it is easier for them to accept the infertility and to modify common goals of their marriage life; those spouses are being satisfied with their relationship. They put effort into building a strong bond between each other. Such situation seems to make it easier to soften the frustration caused by the fact of childlessness. Those
spouses try to compensate the lack of child by getting involved in some kind of social activity, by adopting child, or by offering some help to children from the neighborhood. This let them rebuild their sense of self-esteem and the feeling of being accepted and respected by others.

On the basis of studies it can be claimed that psychological situation of marriages, in which only one of the spouses is infertile, depends on who of the spouses it concerns directly - only the husband or only the wife. In previous studies, usually the problems of infertile spouses have been stressed. However, it appears that it is the fertile spouse who is in psychologically more difficult situation (7). He undertakes the effort to develop. Being in an inner conflict between his own good and the good of the marriage, he chooses marriage. He gives up his own fertility for the sake of the spouse.

The experience of loss of the status of "normal family".

As studies suggest, it is dominant in people's awareness to define "real family" as a "nuclear family unit of heterosexual couple and their biological children" (10). Nelkin and Lindee (11) have argued that the growing fascination of western societies with genetics promotes situations in which the ideal of family as a unit of society based on fundamentals of common genes is gaining a new meaning. This "genetic ideology of family" poses serious consequences for the image of adoptive family in society. One of American researchers - Bernarders (12) - has noticed that "one of the most dangerous consequences of such ideology is a tendency to treat all non-genetic family forms as abnormal, pathogenic, and unworkable."

The results of studies on attitudes of society towards childlessness and infertility seem to be equally unfavorable. No matter whether childlessness in marriage is the result of a conscious decision (egoism) or it stems from the fact of infertility of one or both spouses, "the childless couple is being condemned, stigmatized" (13). Miall (14) has identified three major motives for stigmatization of a childless couple: (i) because of the fact that bonds of blood are considered to be the base for love and ties in family; (ii) because of the unknown genetic background of children adopted by childless marriages they are considered to be worse; (iii) because adoptive parents are not biologically linked to their children, their parenthood is not considered to be real. According to the results of this author's studies, adoptive mothers must struggle with the task to fulfill social and imaginary picture of a real mother, trying to be such mothers "as they should be".

The experience of loss among adopted children

From the very beginning the experience of loss was related to adoption of older children who had already created emotional bond with their biological parents (15, 16). However, as it has been suggested by some studies (17), the experience of loss concerns also those children who were adopted as infants. Brodzinsky (18) stressed that the feeling of loss experienced by children adopted
in older age is different from that experienced by children adopted as infants. The author suggests that the feeling of loss in older children is more obvious, more visible, "overt", it makes the child to be sensitive and vulnerable to stress. Quite often those children have to change the place of their staying, being taken from one place to another within the frame of the system of foster care institutions. As studies suggest (19, 20), the children may experience so profound a feeling of loss that it leads to psychopathology. On the other hand, the feeling of loss experienced by children adopted as infants is more latent, "covert" (21). It starts to manifest itself during subsequent stages of development, as the child is becoming more and more aware of the fact of being adopted.

The experience of loss among children adopted as infants changes as the child goes through particular stages of development. According to Brodzinsky (22), the meaning of the feeling of loss grows gradually and usually do not emerge until the moment when the child goes to primary school. Studies indicate that younger children usually have more positive attitude towards their adoption (22). Authors suggest that the understanding of the meaning of adoption does not appear before the child is 5-7 years old. So, it seems to be understandable that young children do not manifest feelings of despair or insecurity as far as their adoption is concerned. The notion "to be adopted" is understood by them as "to be included into a new family": "...so mummy and daddy came for Peter and they took him to our home and since then we have been family...".

The situation changes at younger school age, when children not only start to perceive the difference between biological and adoptive family but also begin to understand consequences of the fact of being adopted (22). At this stage of development the child is becoming aware of the fact that it has been abandoned by his biological parents. For a child in elementary school, the term "family" includes individuals who are linked with each other by "the bonds of blood" (23). Brodzinsky et al (22) suggest that becoming aware by the child of the lack of "biological link" with adoptive parents induces in him chaos, confusion, and finally stress which destroys the child's feeling of safety and belonging to family. As a consequence of such process of reasoning, the child comes to the conclusion that "...to be adopted, one must be first abandoned". At that time the child starts to perceive adoption not only in terms of "family building" but also in terms of "the family loss" (3). During the period of adolescence a new kind of experience of loss appears: the loss of belonging to genealogical line (3).

Regardless of the criterion of age at the moment of placement, adopted children experience the loss of biological parents, the loss of their roots, but also the feeling of loss of the stability of relation with their adoptive parents (18, 21). What is more, adopted children experience the loss of their "self" (3) and of their genealogical continuity (24). Adopted children experience also the feeling of being different (18, 25). Brodzinsky (3) noticed that adopted children live with the feeling of incompleteness, alienation, separation, abandonment, and being unwanted.
The experience of loss is an inseparable part of adoption. It concerns the child but also the spouses who made the decision of adoption. We can conclude that there are two sides who meet with each other in a newly created adoptive family, both of which have experienced, though to different extend, the feeling of loss. The theory of stress and coping suggests that when a person perceives a given situation in his life as significant but also potentially dangerous, stigmatizing, and including loss or excessively challenging, it can be predicted that he will experience a pattern of negative emotions connected with stress, such as confusion, anger, sadness, anxiety, embarrassment, and shame (3, 26). Person in such situation considers many different options of how to cope with stress. Coping with stress can be defined as "process of struggling and trying to overcome danger, stressful situations and problems in such way that will protect mental and physical health of the individual" (27).

It seems to be important to emphasize the fact that loss, as traumatic experience, requires grief. The programs preparing candidates for adoptive parenthood should include the problem of loss and help spouses deal with it before child's adoption.

REFERENCES

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