

Birth Mothers and Oppression

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ABSTRACT

This study uses a heuristic method of inquiry to examine the adoption experience of six birth mothers. Using Young's (1990) theory of social justice and five categories of oppression as a framework, the participants were asked to relate the events of their adoption experience. Using computer electronic mail as the method of communication, participants were interviewed over a three-week period. Participants examined the events leading up to their pregnancy, the pregnancy itself and the short and long-term implications of the decision to surrender their baby to adoption. The major finding of this study is that all the birth mothers perceived and experienced forms of oppressive trauma across the spectrum of their adoption experience. Recommendations are made for change in adoption practice.

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Background

Birth mothers are women who have been pregnant, given birth and then surrendered their babies for adoption. Although birth mothers have always existed in human populations, it is only in recent years that we have begun to hear from these women regarding the impact of the pregnancy, the birthing experience, the process of adoption and the long-term effects of the adoption decision. Traditionally, the focus of adoption practise was to serve “the best interests of the child.” Little, if any attention was devoted by anyone, to understanding what was in the “best interests” of the surrendering mothers. As birth mothers have begun to tell their own stories, society is now beginning to understand the harm done to this group of women by well-intended health and social service professionals, religious groups and family members alike.

Recent history is replete with other groups of people, and even entire communities, who endured decisions made by governments and others about what was “best” for them. The Japanese Canadians who were interned in camps during World War II, people who were identified in Alberta in the 1930s and 1940s as mental defectives and sterilized without their consent, and Canadian aboriginal children who were sent away to residential schools are three current examples of groups of people who were wronged by the prevailing cultural imperialism. A fourth example is birth mothers who have been slower to tell their stories because of the shame and stigma that existed and still exist around the issue of pregnancy outside of marriage. Although the wrongs of the past cannot be corrected in retrospect, in the adoption community, people’s stories of trauma and pain can assist others in developing compassion for and understanding of the birth mother, “the

forgotten link” (McAdoo, 1992).

During the 1950s and 1960s adoption was considered to be the decision of choice for women who found themselves pregnant and unmarried (Yelloly, 1965; Young, 1954). There really were no other socially acceptable choices if marriage to the putative father was not possible. Social support systems for young unmarried mothers did not exist. People believed that it was best for everyone involved to surrender the baby to a set of married parents who would love and care for the child “as if born to” them (Kirk, 1964). To protect the biological parents, the adoptive parents and the adoptee, the adoption transaction would transpire in secrecy and all records of the event were sealed forever. Beginning in the 1970s however, the trend shifted toward unmarried mothers parenting their own children, and to openness in adoption where identities and contact between adoptive and birth parents were possibilities. This shift occurred as a result of birth mothers’ unwillingness to be excluded from their child’s life. In addition there was a dearth of adoptive parents. In the 1950s and 1960s potential adoptive parents could select babies using observable criteria. Hair colour, gender and eye colour were all considered legitimate discriminating factors for adoptive parents when choosing a baby to call their own, one who would be “as if” born to them. If well matched to their physical characteristics, the child could be mistaken for a biological child. Today, in the closed adoption system, couples can wait years for a healthy infant.

Who are these birth mothers who have never been given the opportunity to speak? Are they incapable of telling their story because of the emotional, psychological and social paralysis that resulted from the relinquishment? Or have they remained unwilling to tell

their stories because of the shame and secrecy which surrounded their pregnancy and the baby's birth? Where are they? What would they say if they gave voice to their experience?

My interest in this topic comes from my own lived experience as a birth mother. I was pregnant at sixteen and relinquished my daughter to adoption when I turned seventeen. My story is ordinary and typical of the times, but the long term effects of the event have been personally devastating and far reaching. It was only when I finally found my daughter in 1992, after a six-year search, that I began to allow myself to validate and grieve her loss, and to also piece together the patchwork of life events that led to my pregnancy, her surrender and the impact of the experience. Talking to other birth mothers, adoptive parents and adoptees, researching adoption, and learning to speak about speaking out, have all led me to a deeper understanding, but not to an acceptance, of the wrongs of the past. Whether or not adoption was the right decision is not the issue. I have no quarrel with the parenting my daughter received, her upbringing and the woman her adoptive parents encouraged her to become.

But what I continue to question is the past and present adoption system that perpetuates the level of exclusion, coercion, oppression and abuse that many birth mothers suffer. The expedient belief is that as "fallen women," I and other birth mothers will forget our babies. The secrecy and shame attached to being branded an unwed mother silenced us and we acquiesced to becoming invisible in society. Closed records were social constructions of a system created in the best interests it turns out, of social workers and adoptive parents, not necessarily of adoptees or birth parents. Today in Alberta and all other provinces in Canada, even in cases of reunions where all parties agree that the

adoption file should be opened, it is still impossible to do so. Who are the sealed documents protecting?

In pursuing my research for this project and from other experiences I have had while learning about adoption, I discovered that the recounting and narration of other birth mothers who have begun to find their voice reflect my own experience. The tacit inner knowing that occurs among people who have shared a similar traumatic experience has surfaced in the dialogues among birth mothers.

Literature Review

Researchers in adoption have traditionally begun their research by examining the lives and experiences of adoptees and adoptive parents. It was as if these children were “dropped from the sky” (Lifton, 1988, p. 88) and had no biological origins. Researchers ignored the women who were the biological mothers and therefore responsible for the lives of these children. In the literature, the birth mothers were invisible. In the 1950s and ‘60s the literature focussed on the psychological reasons behind pregnancy outside of marriage and predictors of the relinquishment decision. At this time, researchers were attempting to discover pathology and deviance in women that would lead to their experience of being pregnant and single (Yelloly, 1965; Young, 1954). Birth mothers’ personal stories were nonexistent in the literature until the 1970s.

Researchers in the 1950s and 1960s made composites based on psychoanalytic theory and psychological testing about the general profile of these women (Young, 1954). Women who kept their babies and became single mothers were seen by researchers to be

lacking, defective and deviant. For example, Yelloly (1965) noted that “the more unstable mothers tend to keep their babies” (p. 12). On one hand women were at odds with society’s view of the good mother (Bergum, 1997, p. 71). A good mother would not let her child go. Yet, because the baby came into existence outside the confines of marriage, the child was labelled illegitimate and the baby’s very existence became stigmatized unless adopted by a set of parents who were socially sanctioned, that is, married. For the birth mother, the shame and stigma bestowed upon her for having a child out of wedlock was overwhelming.

This shaming and resulting stigma have existed for centuries. In the novel, The Scarlet Letter, Hawthorne (1948) explores how the society of puritanical New England treated a woman who became pregnant outside of marriage. The mother and her child received libeling public ridicule. Unfortunately, it is no different in recent times, except that the derision is not as overt. Estes (1992) states in her book Women Who Run with the Wolves,

One of the least-spoken-about oppressions of women’s soul lives concerns millions of unmarried mothers or never-married mothers throughout the world, including the United States, who, in this century alone, were pressured by cultural mores to hide their offspring, or to live a half-life under assumed identities and as reviled and disempowered citizens. For generations women accepted the role of legitimizing humans through marriage to a man. They agreed that a human was not acceptable unless a man said so. Without that masculine [italics added] protection, the mother is vulnerable. (p. 178)

Centuries ago infanticide was frequently practised by women who found themselves with an untimely pregnancy (Jackson, 1996). Abortion was a possible alternative to untimely pregnancy, as it remains today. The mortality rate was high and the procedure was illegal (Kelman, 1998; Sachdev, 1981). As a result of the societal pressures that existed, 95 percent of birth mothers of the 1950s and 1960s who did not marry the father of the child, surrendered their child for adoption (Sorosky, Baran, & Pannor, 1984).

Beginning in the late 1960s and early 1970s the trend toward adoption began to shift. The literature, research and practise of adoption began to include birth mothers. The social and financial factors that affected the decision to relinquish babies gained attention. Grow (1979) and Festinger (1971) found that mothers who kept their babies tended to be older, had set up their own households, were less educated and had a lower socioeconomic status. They were less likely to come from homes that had suffered divorce or death. Parental influence in the decision to surrender was found to be a major determining factor. If a birth mother's own mother was in favour of the adoption decision, a teenage birth mother usually surrendered her child (Kallen, Griffore, Popovich & Powell, 1990). Many researchers attempted to find predictors of the relinquishment decision (Cocozzelli, 1989; Leynes, 1980; Pannor, Baran & Sorosky, 1978; Resnick, Blum, Bose, Smith & Toogood, 1990). However, what was absent in the literature was the failure to talk to the birth mothers about the events of their lives. Failing to do so resulted in observations of tendencies rather than identifying determinants of behaviour (Friedman, 1975).

The literature changed with the contributions of Baran, Pannor and Sorosky

(1977) who found that most birth mothers do indeed care for the baby they placed, never forget him or her, and hope for a reunion at some point. This group of researchers also found that these women who were negatively depicted by society as uncaring and heartless had suffered long-term psychological and emotional effects from their loss. Winkler and van Keppels' (1984) findings were the same. The "effects of relinquishment on birth mothers are negative and quite long-lasting. There is often an increasing sense of loss over time" (p. 67). Birth mothers stated that they lacked opportunities to express their sense of loss, felt that public and personal support was lacking, and that their issues were not well understood by their families, health and social service professionals, or the public. The fact that they had no information about their child's health and well-being also caused a large degree of anxiety. Other researchers who interviewed birth mothers found similar results. Deykin, Campbell, and Patti (1984) surveyed birth parents and found that "having surrendered a child is perceived by these respondents [i.e. birth mothers] as having a protracted negative influence on their lives, in the areas of marriage, fertility, and parenting" (p. 271). Silverman (1981) in her book Helping Women Cope with Grief states that grieving the loss of the birth child was not allowed by family, professionals, or society. Birth mothers were encouraged by those involved in adoption to be grateful that their baby was going to a "good and decent" home.

Watson (1986) wrote about the long-term effects of relinquishment. In 1995 he reinforced his views and findings from his practise in adoption placement when he described, during his theme address of the annual conference of the Adoption Council of Canada, the whole adoption system being steeped in denial. "Why would someone grieve

the loss of a child whose very existence was never allowed to be acknowledged openly?" he asked delegates. Everyone involved in the pregnancy and birth shrouded the events in shame and secrecy. Millen and Roll (1985) describe the pathological grief that existed in 22 birth mothers who had sought help for other psychological problems, but the root of their grief was the surrender of a baby for adoption.

A literature review on birth mothers' adjustment to relinquishment reveals that this group of women has experienced significant oppression because of an untimely pregnancy and the subsequent relinquishment of the baby. Emotional consequences such as unresolved grief, problems developing intimate relationships, overprotective parenting styles with subsequent children, prolonged feelings of anger and guilt, depression, fatigue and somatic problems are well documented (Baran, et al., 1977; Millin & Roll, 1985; Rynearson, 1981; Silverman, 1981; Weinreb, 1991; Weinreb & Murphy, 1988). One of the most difficult problems that exist for birth mothers is their continual grieving for a child who still exists but is lost to them (Millen & Roll, 1985). Until recent times, the voices of birth mothers' have not been heard. In her book Lost and Found, Lifton (1988) uses a quote from Rukeyser's poem Searching/Not Searching which describes the anguish and emptiness that birth mothers feel.

how to go on
 from the moment that
 changed our life,
 the moment of revelation
 proceeding from the crisis,

from the dream
and not from the moment
of sleep before it? (p. 139)

This question awaits a birth mother who awakes from the long numb sleep of denial and who then must question her right to search for her lost child.

Methodology

This project gives a group of birth mothers an opportunity to share their stories with the reader.

Young's (1990) theory of social justice forms a framework to elucidate the "five faces of oppression" that birth mothers may have experienced. In general, women in our society have been oppressed in various ways. Evidence of oppression of women exists in the work force, education system, how girls are socialized, and in the socially constructed limitations imposed on female sexuality (Firestone, 1970; Goffman, 1963; Lakoff, 1975; Laws & Schwartz, 1977; Schuf, 1984). The woman who steps outside the boundaries of what society considers being acceptable sexual behaviour by family, church, and state can pay a high price for her deviance (Schuf, 1984). During the 1950s and 1960s, many birth mothers were hidden away during the pregnancy in homes for unwed mothers. Ann Petrie (1998) explores this practice in her book Gone to an Aunt's.

This project describes my own experiences before, during and after my teenage pregnancy and the relinquishment of my daughter in 1968. I incorporate other birth mother's stories along with my own. Using a heuristic framework (Douglass &

Moustakas, 1985), this project seeks to identify the tacit knowledge, deeper meanings, learning, and consequences connected with the significant female human experience of being pregnant and unmarried, losing a child through adoption, and being a birth mother.

Heuristic research is a search for the discovery of meaning and essence in significant human experience. In their article on heuristic research, Douglass and Moustakas (1985) explain that a deep subjective process of reflection, exploration, sifting through life experience, and clarifying the nature of the phenomenon under investigation are the elements of heuristic research. Douglass and Moustakas state that an heuristic investigation involves disclosing the truth as the researcher knows it, and then the researcher moves to discern application of the same principles in others' lives who have lived a similar experience. "Through exhaustive self-search, dialogue with others, and creative depictions of experience, a comprehensive knowledge is generated, beginning as a series of subjective musings and developing into a systematic and definitive exposition" (Douglass & Moustakas, 1985, p. 40). The heuristic researcher is passionate about the subject matter and has a deep hunger for new insight and revelation on the topic. In order to be valid, the research process is guided not by rules and strict methodology but by urgency, passion, sensitivity in revelation, and discipline in the quest for knowledge.

Heuristic study is a series of processes of a highly individualized nature. Each heuristic inquiry is a unique, creative challenge aimed at revealing the intimate nature of reality and thus requiring methods that fit the particular investigation. Heuristics is concerned with meanings, not measurements; with essence, not appearance; with quality, not quantity; with experience, not behaviour. (Douglass

& Moustakas, 1985, p. 42)

However, heuristic inquiry must not be confused with phenomenology (Douglass & Moustakas, 1985). In phenomenology there is a quest to study ordinary, everyday phenomena to reveal the actual nature and meaning of an event, perception, or occurrence as it is exhibited. The researcher must step back from his or her biases on the subject before analysis of data and disclosure of the phenomenon is achieved through textural and structural descriptions.

Both phenomenology and heuristics reveal meaning and scrutinize data. Whereas phenomenology encourages detachment, heuristics encourages the researcher to remain intimately connected to the issue. While phenomenology seeks definitive descriptions of experience, heuristics emphasizes the personal significance and meaning of the individual's search to know. A synthesis of new knowledge that includes intuition and tacit understanding may bode a new beginning for the heuristic researcher rather than provide a distillation of the structures of the experience as in phenomenology. The two forms of research also differ in that the subjects in heuristic research are very visible in the examination of the data and are portrayed as whole persons. "Phenomenology ends with the essence of experience; heuristics retains the essence of the person in experience" (Douglass & Moustakas, 1985, p. 43).

Douglass and Moustakas (1985) state that "heuristic inquiry is a research methodology to be used by one who is ready to surrender to the pursuit of meaning via the inspirations of the self, the complexities of human experience, and the challenges of the reflective process" (p. 53). Because of its personal demands upon a researcher, I selected

heuristics as my investigative tool.

As a partner to heuristics, the theme of oppression balances my investigation. Young (1990) proposes a solution to oppression with a concept of justice as “enabling” (p. 39). She states “justice should refer not only to distribution, but also to the institutional conditions necessary for the development and exercise of individual capacities and collective communication and cooperation” (p. 39). To explore an enabled justice I engaged birth mothers’ stories as detailed written descriptions of their lived experience, by using Young’s “five faces of oppression” (p. 39) as a theoretical framework.

Through a series of questions and ongoing dialogue, I discussed their personal experiences as birth mothers using electronic mail. As a researcher, I used Young’s framework to outline and relate the birth mother’s lived experiences. Young (1990) states that oppression names a “family of concepts and conditions” and the five categories of oppression include “exploitation, marginalization, powerlessness, cultural imperialism and violence” (p. 40). I posed questions that assisted each birth mother to reflect on the five categories of oppression. I held an ongoing dialogue, using electronic mail, with the women over a three-week period. I reviewed and interpreted their written thoughts and feelings using Young’s framework. I encouraged the women to also discuss how they have survived, and thrived, through their birth mother experiences. I enquired into the ways in which they have become empowered.

I decided to use computer-mediated communication (CMC) for this project for several reasons. I have had personal experience with a face-to-face support group for birth mothers as well as with a list-serve support service via the Internet. I found both support

groups helped me grapple with issues that were causing or have caused me personal suffering. I have also helped to set up the Lethbridge SupportNet, a computerized e-mail system for pregnant and parenting women who have many high-risk factors associated with their current life situation. Given my personal interest and experience in using e-mail communication, I felt comfortable with this tool. More and more people are using the Internet in a variety of different ways, including support with difficult life issues. Current health literature describes how individuals can benefit from electronic communication (Galinsky, Schopler, & Abell, 1997; Kruger & Struzziero, 1997; Weinberg, Schmale, Uken, & Wessel, 1996; Zimmerman, 1987). It is also a way to enable people to write about their experiences, rather than communicating it orally.

Although a more traditional face-to-face interview may be preferable when researching such personal topics, there are advantages to CMC. Some of these include, a degree of anonymity, lack of visual cues of approval/disapproval [of individuals], non dominance of any person in the group, convenience of use (messages can be answered at the writer's convenience and perhaps after some reflection), the opportunity to withdraw from the experience and group at any time and the chance to meet other women who have had similar experiences from all over the world (Zimmerman, 1987). Disadvantages of the method would be antithetical to the above and may also include the lack of opportunity for physical closeness of the group. Sometimes there is no replacement for a hug or a tissue, from someone who cares. However, unlike a hug, CMC can be printed out, read over and repeatedly used to lift low spirits or witness growth in healing.

Research Aims

Themes and topics that constitute the core issues in adoption (Kaplan & Silverstein, 1996) have emerged during this project. These issues are loss, rejection, guilt, shame, grief, identity, intimacy, and control. In combination with the contexts of oppression as identified by Young (1990), these core issues have increased my understanding of the complexity of the birth mother's experience in surrendering her child and the lifelong implications of this decision for her.

As noted previously, birth mothers themselves have had no authoritative voices in the literature and in the discussion on the impact of surrendering a child to adoption. To counter this, my project will contribute to the growing movement among birth mothers to tell their own stories through a variety of media. My hope is that women, health and social service professionals, families and significant others, and society in general will benefit hearing from the forgotten contributors to the adoption experience, the birth mother. Because many people have seen adoption as a panacea to the age-old problem of unwanted pregnancy and as an alternative to abortion and single parenting, it is imperative that birth mothers tell their stories so society may understand the life altering events that they represent (Inglis, 1984).

How does a person such as a birth mother, come to know that she has been and is oppressed? Most birth mothers have lived in the silence that society assigned to them because of the shame and stigma associated with bearing a child while not married. Birth mothers were never to speak of this stigmatized event again and then, society promised all

would eventually be forgotten and forgiven. The silence was oppressing and oppressive.

What must occur to bring a birth mother to an awareness that she has been oppressed in her experience? If she is fortunate, a birth mother will have an unfolding of her experience. She will find opportunities in her life that move her from a dualistic black-and-white understanding of what has happened to her, to a position of acknowledgement, understanding, and integration. The birth mother creates meaning and truth from her experience. With true knowledge about herself and an understanding of the context in which the event occurred, she can reconstruct an authentic identity. Young (1990) writes that “the authentic self is autonomous, unified, free, and self-made, standing apart from history and affiliations, choosing its life plan entirely for itself” (p. 45). This healing and renewal are for most birth mothers, the authenticity which we seek.

In her theory of social justice, Young (1990) views justice as an enabling concept rather than just a method for distributing goods and services equally in a culture. Most birth mothers would acknowledge that they were disabled by their experience, no matter how altruistic their motives were at the time. Young (1990) writes that

Justice should refer not only to distribution, but also to the institutional conditions necessary for the development and exercise of individual capacities and collective communication and cooperation. ...injustice refers primarily to two forms of disabling constraints, oppression and domination. (p. 39)

Young (1990) uses the word oppression to

Systematize the meaning of the concept of oppression as used by these diverse political movements, and to provide normative argument to clarify the wrongs the

term names. All oppressed people suffer some inhibition of their ability to develop and exercise their capacities and express their needs, thoughts and feelings. (p. 40)

Given this definition of oppression, the experience of being a birth mother fits with Young's framework with its hallmarks of exploitation, marginalization, powerlessness, cultural imperialism, and violence. In its traditional usage, oppression means the exercise of tyranny by a ruling group. However, Young (1990) goes on to state that:

Oppression refers to systematic constraints on groups that are not necessarily the result of the intentions of a tyrant. Oppression in this sense is structural, rather than the result of a few people's choices or policies. Its causes are embedded in unquestioned norms, habits, and symbols, in the assumptions underlying institutional rules and the collective consequences of following those rules.

...Oppression refers to the vast and deep injustices some groups suffer as a consequence of often unconscious assumptions and reactions of well-meaning people in ordinary interactions, media and cultural stereotypes, and structural features of bureaucratic hierarchies and market mechanisms—in short, the normal processes of everyday life. ...For every oppressed group there is a group that is privileged in relation to that group. (p. 41-42)

If we relate the experience of birth mothers in the closed adoption system of the 1950s and 1960s, birth mothers like me were subjected to the cultural norms of the day. We were relegated by society to a life of hiding, shame, secrecy, and silence. Although no one may have intended to overtly hurt us, and certainly many believed that they were actually helping us, we became victims of social norms, stereotypes, and assumptions. Our

voices and choices were lost to us. We became invisible as individuals and as a group. I knew many young women who had surrendered a baby for adoption, but it took me twenty years to actually talk to someone who would acknowledge and mirror my experience and the path that I had walked since my daughter's conception.

We were not aware, in our role as birth mothers, that we were part of an oppressed group. Society refused to acknowledge our individual pain so why would it be acknowledged collectively?

Despite this code of silence, a birth mother finds others like her to whom she begins to relate to directly, and a group identity begins to emerge. A comradery develops, and although not all experiences are alike, there are universal themes and similarities. Most women talk of their need to finally grieve their loss and make peace with the baby they lost. Many have a deep desire to meet and reunite with their lost child whom they may not have seen or even held at birth. Denial, injustice, feelings of being violated, powerlessness, anger and rage at individuals, themselves, and society in general for what has happened to them begin to emerge. As birth mothers find their voices and begin to learn about themselves and develop an affinity with others, the numbness and isolation begin to dissipate. During this process of becoming one with themselves, birth mothers recognize, face, and acknowledge many cruel realities. Recognizing that they are not the only women who have experienced this stigmatized event brings comfort. From a group affiliation comes a deeper sense of validation and acknowledgement that the birth mother has never before exhibited or perceived. Young (1990) reinforces this validation when she states that groups are

a specific kind of collectivity, with specific consequences for how people understand one another and themselves. ...Members of a group have a specific affinity with one another because of their similar experience or way of life, which prompts them to associate with one another more than with those not identified with the group, or in a different way. Groups are an expression of social relations; a group exists only in relation to at least one other group. (p. 43)

A social group is defined not primarily by a set of shared attributes, but by a sense of identity (Young, 1990). Fiss (as cited in Young 1990) states that “group meanings partially constitute people’s identities in terms of the cultural forms, social situation, and history that group members know as theirs, because these meanings have been either forced upon them, forged by them or both” (p.44). Heidegger (as cited in Young 1990) adds that

Group affinity has the character of “thrownness,” one finds oneself as a member of a group, which one experiences as always already having been. For our identities are defined in relation to how others identify us, and they do so in terms of groups which are always already associated with specific attributes, stereotypes, and norms. (p. 46)

Birth mothers have slowly discovered each other. “Groups may come into being; they are never founded. Those who identify with a group can redefine the meaning and norms of group identity. Oppressed groups have sought to confront their oppression by engaging in just such redefinition” (Young, 1990, p. 46). Through the process of finding each other, birth mothers have begun a journey of healing. First, they confront the

fictitious or misplaced identity that society assigned to them in the role of birth mother; second, they face the oppressive forces of the past and go through the grieving that must take place as a path to healing. From this process, the birth mother can begin to carve a new identity for herself.

The birth mothers and the interviews

As a researcher I randomly chose to interview five birth mothers from more than sixty women who responded to a request I sent out on the CanAdopt list-serve. In addition to these five voices, the heuristic nature of this study allowed me to also participate as a subject.

The CanAdopt list-serve required me to supply in-depth information about the purpose and nature of the study. The CanAdopt list-serve administrators required a letter from me describing the overall goals of the study and wanted to know how I would respect confidentiality. After complying with CanAdopt's requests, my letter asking for study participants appeared on the CanAdopt server. Within twelve hours more than thirty women had responded directly to my request for research participants. Another twenty-four hours later, more than sixty interested women had responded. The reception and interest were overwhelming. Although I intended to interview between three and five women initially, I randomly selected ten. I gave each of them more details on the study, participant requirements and what they could expect from me, as the researcher (see Appendix). None of the ten women opted out, so I randomly selected five subjects from the pool of ten women. From this overwhelming response to my request, I observed that

these birth mothers wanted and needed to tell their stories.

I interviewed the participants through the use of electronic mail via the Internet. I had never met any of the participants and had no background information or history about any of them. The format and requirement for involvement in the interview were that both the interviewer and the subjects were to be very open and honest about their lives and responses to questions. The women were given some background notes and definitions based on Young's (1990) work on oppression. I instructed them to reflect on their experience as a birth mother through the continuum of their adoption experience. I approached their experience chronologically: before the pregnancy, the pregnancy, labour and delivery, and the short and long-term phase of adoption to the present day. After each woman reflected upon and wrote about the various stages of her adoption experience, I asked her to frame the experience and name which of the forms of oppression (Young, 1990) she had experienced. None of the participants met or talked to each other directly or indirectly during the study. They only talked to me directly via electronic mail. I printed and sorted each woman's writings.

I established rapport quickly with each individual birth mother. We talked electronically almost daily for a period of three weeks. The common bond of being birth mothers was the glue that seemed to hold me to each participant. As we talked it became evident that electronic mail is a valuable tool to add to a birth mother's repertoire of communication methods. It does not replace face-to-face contact or even telephone contact, but electronic mail seems to have a unique niche. As a research tool, electronic mail gave me the ability to contact and talk with women from different parts of the

country. Had I not used this tool, I would have had difficulty finding such geographic diversity in the participants. Electronic mail was also very effective because participants were able to consider the questions and answer without being interrupted. Other studies that have been done on birth mothers follow a more traditional survey style of questioning (McAdoo, 1992; Kelly 1998; Van Keppel, 1984). As a therapeutic tool, electronic mail is cathartic in that the birth mothers relished the opportunity the study gave them to tell their story and for giving them the feeling that they were being heard.

The women collectively

As a large group, the birth mothers in the study had a strong sense of similar experience. The age range was from 16 years to 26 years at the time of pregnancy. The adoption experiences occurred between 1958 and 1979 and all occurred in the closed adoption system. One woman, who had surrendered her baby in 1979, got to choose her child's adoptive parents from a collection of profiles of prospective parents and was promised pictures of her child at regular intervals. However, the adoptive parents never fulfilled that commitment. All five birth mothers had been unmarried at the time of surrender. The majority of the pregnancies occurred in long-term monogamous relationships. Marriage was either not considered or not an option because of the woman's choice, the birth father's reluctance, or family pressure not to marry. None of the women had overtly planned the pregnancy. All admitted to feeling that given the circumstances they had no choice other than adoption and stated that they had suffered a variety of long-term effects from surrendering their babies.

Today, the birth mothers range in age from thirty-seven to sixty-five years of age and all live in Canada. They have diverse occupations including teacher, nurse, market researcher, a computer technical writer, homemaker, and artist. All of the women had married and all but two had gone on to have more children. Most of the women have lived fulfilling and rewarding lives but admitted that there has always been something missing from their lives; that something being the baby they had surrendered for adoption.

The women as individuals

Each birth mother had unique experience, but there are many common threads that hold us together as a group. The following introductions of each participant reveal some of these threads.

Sylvia

Sylvia and I met on the CanAdopt computer list serve in the spring of 1998, when I first started this project. When I joined CanAdopt, I stated that I wanted to talk to other birth mothers via electronic mail and Sylvia answered my call. As we talked through electronic mail, I told Sylvia about my study and asked if she would participate. She said that she would, but because of a personal crisis in my life I delayed the study for six months. I reconnected with Sylvia when I was ready to undertake the interviewing segment of the study.

Sylvia lives with her husband and two children in a large city in western Canada. She is a homemaker and helps her husband with his very successful business. Sylvia gave

birth to her first baby, David, in 1967 when she was a university art's student. She was 19 years old at the time. Initially, Sylvia planned to marry the father of her child but he became increasingly unsure and unwilling as the pregnancy progressed. He was a Catholic and she was not. Her father vetoed the idea of marriage from the start. A maternity home was chosen as a safe haven and a place to hide the fact and shame of her pregnancy. Her feelings about the child growing within her were ambivalent at best; at times she loved being pregnant but hated the reality of her situation. She writes,

I wished it would go away. But my feeling toward my child grew into a loving attachment that I came to cherish deeply as he grew inside me. When I was alone in my room at the maternity home there were only two people in the world—him and me.

After giving birth, Sylvia relinquished her son for adoption, not seeing or being offered any other alternative or option. For many years she obeyed all the rules of being a birth mother: be silent, forget, pretend it never happened. But there was always a void in her life. That void was filled in 1997, when David found her and they were reunited. On her relationship with her birth son, Sylvia writes,

I have struggled to find a place to put this “man-child” who I love absolutely in a comfortable place. There exists a strong attraction between us which has been uncomfortable for me at times but that discomfort is being replaced by a strong attachment to this person who is more like me than anyone else in the world...mannerisms and physical appearance.

Sylvia meets with her son frequently although the distance between them is great.

She finds that David's wife is a great facilitator of communication. In May 1999, Sylvia became a grandmother for the first time.

Martine

The second birth mother is Martine, a 65-year-old grandmother. She and her husband of thirty-two years live in eastern Canada. Martine has had many interesting jobs during her working career, including recreation director, hand-knitting designer, assistant to a theatre producer, puppeteer and a project director for a marketing research firm. She and her husband have two daughters together who are grown and live on their own. Martine is writing a book about her experiences with her step-granddaughters and the many adventures that they have brought to her life.

Martine grew up in Winnipeg and at twenty-four left to take a job in northwestern Ontario. She became pregnant in 1958 during a casual relationship. She moved to Toronto where she took a job as a mother's helper, where she was made to feel like a "cockroach," until she was admitted to a home for unwed mothers near the end of her pregnancy. No one, except one brother and his wife, who Martine later approached to see if they would be interested in adopting her son, would know of the baby's birth. She writes that

My mother had drilled it into my head that if a girl made a mistake, the right, the only, thing to do was to give the baby up for adoption. It was better for the baby and it was better for the girl. I believed this without question.

She did not want her child to be raised in a society where he would be known as a "bastard" if she kept him as a single mother.

During her stay in hospital Martine writes that she had been rational about giving her child a better life by letting him go to a good home. By mistake, a student nurse brought Martine's baby to her for feeding. The intense emotions that surged through her body that very first time she held her baby were overwhelming. She writes

the shock and intensity of the love rolled over me like a tidal wave as I held the dear little fellow and watched him drink his formula. Never before or since have I experienced the powerful emotion that enveloped my body as I held him those few precious minutes.

Shortly after, someone realized the mistake and the baby was torn from her arms. She wept for the remainder of her stay but did not change her mind about the adoption. It was the right decision for the baby. When she left the hospital, her destination was nowhere. She ended up at the YWCA and they helped her find a place to live and she quickly found a job. Then, she "got on" with her life.

Martine says that although she was too embarrassed and ashamed to actively look for her son, she made a habit of reading the Toronto Star's Personal/People Search columns. On November 28, 1997, she saw an ad in that column that seemed directed to her. She called the number in the paper and was reunited with her son on the telephone. Martine and her son, Alexander, who is now forty-years old, are both committed to building a strong relationship with each other and their respective families.

Josée

The third birth mother is Josée who lives in Quebec. Besides her first-born, she has two children who are thirteen and nine years old. She and her current partner have been together for three years. Presently, she is a writer of computer-user guides and a freelance English/French translator. She describes herself as quiet and withdrawn, a real homebody, who enjoys activities such as golf, cooking, and reading.

At eighteen, Josée remembers herself as being “wild.” She had been raised in an abusive home, had gone to school in a convent and did not feel accepted by her peer group. She says, “I was a very naive, confused and resentful teen who just wanted to be loved and to get attention, even if it was the wrong kind.” Her thoughts at the time were that if she got pregnant she would accomplish several goals at the same time. She would punish her parents and would acquire glamour at school. She writes, “This was attention-getting behaviour. Little did I know that I was hurting myself the most.”

After running away from home she met a new boyfriend whom she thought she loved. They became intimate and very quickly she got pregnant. Marriage was not a consideration for the couple at that time. Josée’s parents sent her away to Ottawa where she lived with friends of relatives until she had the baby. This was necessary because if anyone knew of her pregnancy it would “ruin her reputation and future.” Her siblings were told that she had gone to Florida to stay with her grandmother.

Josée remembers a compassionate social worker who was interested in knowing who she was as a person and what she wanted. When Josée announced that she was keeping her baby, who she had named Julie, the social worker gave her best wishes and a

hand knit layette for her baby. But Josée had not yet asked her father's permission. When the time came to announce her decision, and although her mother was supportive of her choice, Josée's father would not hear of it. They drove back to Montreal without Julie and Josée was expected to forget her experience and her baby and "get on" with her life.

Three years later Josée married the father of her baby. They were divorced three years after that. She knew that deep inside she had never forgiven him for not making it possible for her to keep her baby. She tried to bury her feelings and believed that she no longer cared about the adoption.

Josée admits that those patterns of self-destruction and self-sabotage followed her through two additional failed marriages. The thought of searching for her daughter occurred during a discussion with her stepdaughter. As Josée started her search, the "feelings that started to emerge at that point were so overwhelming and scary that I had a very strange reaction," she writes. She was "furious, angry, jealous, filled with overwhelming rage and grief." When she received her daughter's records from the hospital, she wanted to cry like the baby she had surrendered for adoption.

Josée goes on to write,

I am convinced that I have only scratched the surface of my repressed emotions. I have begun to understand that a reunion will not magically heal me, in the sense that I will not undo the hurt. I cannot let go anymore. I have to see this through. Josée hopes for a reunion with her daughter and has finally hired a private investigator after her individual efforts failed to locate her daughter. Her relationship with her father was never reconciled because Josée felt that he had forced her to give up her baby. He

died in 1978.

Gwen

Gwen is thirty-eight-years old and lives in a major city in western Canada. She is married and did not have more children other than the son she surrendered for adoption in 1979. Her passions are her art work, which has brought her much recognition, her love of languages, reading, and travelling. Gwen has found her son but has not yet been reunited with him.

At eighteen, Gwen was finishing her first year of art school. Events leading up to Gwen's pregnancy included the fact that she had lost the love of her life when he moved back to a foreign country with his parents. She found herself on the rebound, feeling lost and abandoned, unloved and uncared for, and in a new relationship that was loveless. Although not interested in a sexual relationship, her boyfriend had other ideas and convinced her to have sex with him. She became pregnant. Abortion was out of the question for her and single parenthood was not an attractive option. Adoption came to the fore as the "best" choice.

Gwen lived with her sister in a remote community in British Columbia until the last two months of her pregnancy. Then, she moved to a home for unwed mothers where she delivered a healthy baby boy in the local hospital. She was advised not look at or hold her baby but wisely, she ignored it. She writes,

my heart breaks for those vulnerable women who followed such heartless counsel as to not connect face-to-face with the little one to whom they had given the gift of

life itself. For these women have suffered a kind of death by not witnessing that life.

Leaving her son behind, Gwen attempted to return to the life she had left behind. She often wondered why she felt so sad, why she would go into rages, why she ground her teeth causing damage to her jaw joints and developed psoriasis. Over the course of many years, her truth was revealed to her through her art work: she was grieving the loss of her son. No one who had been involved with her during her emotional experience had encouraged or allowed her to grieve. She was expected to carry on as if nothing had happened. Her pain and sorrow had to be acknowledged. She has begun that journey.

Susan

The fifth participant in the study is Susan, a successful secondary-school teacher from Ontario. She has found her birth daughter but has been denied a meeting with her. This has left her distraught and troubled. Being rejected is one of the fears that all birth mothers face in reunion. When this reality hits, it is devastating.

As a teen, Susan describes herself as outgoing, popular, involved in many school activities, a good student and elected as the class valedictorian. When she found herself pregnant at seventeen, her life was turned upside down. She writes,

guilt was a big thing. I had felt guilty all my life for everything. I think I felt guilty for just living. And the guilt for getting pregnant, and for all the trouble and pain and sadness I was causing everybody was just one more lump of guilt. I was scared to death—terrified, actually. What the hell was I going to DO?

Susan goes on to say that when her mother drove her to the home for unwed mothers she thought that she was going to jail.

Her family was disappointed in her, her boyfriend rejected the idea of marriage, and she was devastated when she realized his lack of commitment to her. She felt totally humiliated and shamed, guilty and terrorized by these events.

Although Susan has had a very active and busy life she states that the events of 1965 have affected her life profoundly. After giving up her daughter, she attempted to set the whole episode aside. A few years ago, she found herself dealing with a major depression that inhibited her from working. A doctor prescribed antidepressant medication. She began to recognize the far reaching effects that the surrender of her baby had on her life and she initiated a search for not only her daughter but her daughter's birth father as well. When she found her old boyfriend, she learned that he had been diagnosed with a chronic illness twenty-five years previously and he had felt a need to transmit that information to their daughter via the Children's Aid Society in Ontario. She also believed that her daughter needed to know her medical history of chronic depression. Social workers contacted the daughter who has denied a reunion. The daughter has said that she is just not ready.

Susan remains in a state of limbo not knowing whether she will actually have a reunion in the future or not. She is torn and hurt by the state of affairs but is trying to heal and move on with her life. The wound she opened was deep and wide and she knows that she will not get through the healing process without a lot of soul searching and hard work on her part. She writes that for many years, her adoption experience existed only on a

subconscious level. Over the past three years “all of this stuff finally has jumped up to the front of my head instead of sleeping in a corner of the back of it.”

Kathy

The last participant is me. My name is Kathy and I live in Lethbridge, Alberta with my husband Ken. We have two daughters. Julie is 21 and Karly 24, is married and lives in Calgary. I have been reunited with my daughter, Jackie, for almost seven years. It has been a wonderful, scary, and exciting time.

I met my daughter’s birth father in 1966. He had come to town to play junior hockey. It was love at first sight and we quickly became an item. After dating for just over a year I found out that I was pregnant. At sixteen I was terrified but believed that things would work out as my boyfriend and I had planned to marry when I finished high school. When my parents found out about my expanding girth, our plans changed dramatically. My parents, my oldest sister, and I agreed that I would move to Calgary to live with her and her family, have the baby, and give it up for adoption. The plan was all very quickly decided, neat and tidy. I went along with everything. I did not feel I really had any other choice. The ramifications of other choices (as pointed out to me by family and social workers alike) included predictions that I would live in poverty, become a child abuser, never get an education and eventually get divorced. There was no alternative. Giving my baby up to a couple who “deserved” her, in exchange for my old life and freedom seemed a fair trade. I had no idea what was in store for me emotionally, psychologically, and spiritually as the consequences of the adoption decision unfolded.

I spent many years trying to forget my daughter, but a day never went by without thinking of her and worrying about her welfare. Nor did a day go by when I didn't wonder if I would be found out for the awful person I was: I wore the invisible label of an unwed mother. I expended a lot of energy on becoming an imposter; pretending for example, that when my husband and I were expecting our first child that it was actually my first as well.

In 1986 my father-in-law was diagnosed with terminal cancer and my daughter whom I had surrendered for adoption was turning eighteen. Her non-identifying information would be available to me and I would be able to register for a reunion. The two events, happening at the same time in my life, helped me recognize that I may not have forever to find my daughter. I registered with the post-adoption registry and began an active search.

It took me six years to find my daughter who had lived just a few miles from me while she was growing up. I was reunited with her on September 16, 1992. It was a day that I will always remember. Finally, my lost was found, and I felt whole again.

Reunions are difficult. It has been tough emotionally for me. Jackie seems to have taken the reunion in stride. She is the strong one; I am often overwhelmed with emotions that range from anger and rage at the injustice of losing a child unnecessarily, to being ecstatic and full of joy and hopefulness. Healing takes a long time. My hope is that it doesn't take forever.

The birth mothers whom I have introduced are typical women who have interests, jobs and families, but we are different in a unique way. We share the common experience

and ramifications of losing a baby through adoption. Until recently, little was known about, nor was there much societal interest in, the consequences of that decision to the women themselves. Birth mothers need to speak of the deep impact that adoption has had on them so that society, and the adoption community specifically, can learn from them and make adoption more sensitive to everyone involved. In the pursuit of this goal in the following pages, six birth mothers tell of the oppression they have had to bear throughout the course of their lives as the reality called adoption has unfolded.

Applying the criteria

In her book Justice and the Politics of Difference, Young (1990) states that the criteria she uses in determining a group's oppression are objective. Rather than being constricted and bound by the comparisons of one oppressed group to another, she uses the categories of exploitation, powerlessness, violence, cultural imperialism, and marginalization to refute or determine the validity of a group's oppression. "Each criterion can be operationalized and each can be applied through the assessment of observable behaviour, status relationships, distributions, texts and other structural artifacts" (p. 64). Most oppressed groups experience cultural imperialism along with one or a combination of the other forms such as exploitation, powerlessness, marginalization, or violence. It is also important to view oppression and oppressive actions within a historical view and context. The goal of any oppressed group is to "change the cultural images, stereotypes, and the mundane reproduction of relations of dominance and aversion in the gestures of everyday life" (Young, 1990, p. 63). If a birth mother is able to name what has happened

to her she begins healing, a process that can lead to empowerment and growth and development of her authentic identity as a whole person. Such naming of experience follows in the excerpts which provide examples of the different forms of oppression that birth mothers have faced and continue to face with their experiences.

Violence

When most of us think of violence and oppression, visions of gay bashing, police brutality, or rape may come to mind. Young (1990) includes

harassment, intimidation, or ridicule simply for the purpose of degrading, humiliating, or stigmatizing group members as forms of violence as well. ...What makes violence a face of oppression is less the particular acts themselves, though these are often utterly horrible, than the social context surrounding them, which makes them possible and even acceptable. (p. 61)

This type of violence is a social practise and part of a dominant cultural way of thinking about a group. Members of a group are singled out simply because they are members of that group. The motive behind this kind of violence is not necessarily generated because of hatred or fear; it is power and victimization of the vulnerable. In the case of birth mothers, these women have not conformed to the cultural norm of being married before conception. Patriarchy dictates that a baby and mother is the property of a man. Where no legal contract exists, the right to property does not exist. Young asserts "To the degree that institutions and social practices encourage, tolerate, or enable the perpetration of violence against members of specific groups, those institutions and practices are unjust and should

be reformed” (p. 63).

Words can be used as weapons of violence. The words that are used in our culture to describe a birth mother, are terms such as slut, whore, tramp, and loose woman. Few birth mothers have ever been called these names to their faces, but most have felt the sting of the labels that society assigns to a woman who has a baby outside of marriage.

Another form of violence that occurs, and yet seems innocuous, is the silencing of a marginalized group of individuals. In my interviews, most of the women recounted feeling violated because they had no voice or say in their own lives. The long-term ramifications of being voiceless are experienced as a type of violence.

Martine states that the only violence that she experienced during and after her pregnancy was the violence that she inflicted upon herself. She was twenty-four when she got pregnant and had high expectations of herself as she dealt with her problem and her future life. She writes of her experience in a unique way which exhibits her deep feelings about her loss. The following is a short story that she shared in her electronic mail.

Christmas Flight

We were already fifteen minutes late. People in the lineup were getting impatient; how much longer until we could board? Our luggage had already preceded us and it was just a matter of getting on the airplane.

The lady beside me was fidgety. "What's taking so long?" she asked. How should I know?

It was her first flight and she was going to the Lakehead to visit her daughter and family for the holiday. We'd started chatting when we met, waiting for the

airport bus. She was very nervous and enjoyed talking, taking her mind off going up in an airplane for the very first time.

Our luggage was being brought back now; everything was in reverse from what it should be. The steward asked us to come forward and identify our own bags.

"What's going on?" people were murmuring. I knew. Someone had phoned in a bomb scare. I wasn't going to tell my friend, the nailbiting first-timer.

My luggage appeared, and I stepped forward. Digging out my key, I opened the suitcase. Inside, all the carefully-wrapped gifts for my family were nestled compactly into the space available, with my clothes wedged around them. "I hope I don't have to open these gifts?" I said. That would have been too much.

"No, miss, this is fine," the man said, and he smiled at me as he closed my bag and let me lock it. "Just go to the waiting area until the boarding call is announced."

My friend said, "What's this all about?"

"Just a routine check, ma'am." She joined me as we waited for the exercise to be done.

On the plane, my friend had the window seat. It was a good sized plane, a Viscount, and fairly new.

When the stewardess came around to make sure we had our seat belts done up, the woman asked her why we'd been delayed, was it because there was a bomb on board like she heard someone say? The stewardess smiled her vacant

stewardess smile and said, "Oh, is that what you heard? Heavens no!"

We took off and I got my seatmate talking about her daughter and the three grandchildren, their ages, how excited they were that Grandma was coming for Christmas. She decided to make the trip by plane at the very last minute, when her daughter insisted she shouldn't spend Christmas alone in Toronto. By then it was much too late to take the train.

I didn't want to think about travelling alone, and as long as she was talking I could focus on what she said. Not think about him, not think about leaving him behind for Christmas. Not think about why he couldn't come with me.

I got her telling me about the gifts she'd bought for her grandchildren, gifts she had already sent to her daughter by mail.

The plane was circling for its descent into the Lakehead. The woman turned to me. "Thanks for being such a help. You know, when they started searching our luggage at the airport there, if you hadn't been so calm, I would have just turned around and gone home! You made my first airplane trip such a pleasant one."

We wished each other a Merry Christmas, because Christmas day had arrived as we flew across bleak north-western Ontario. Then she was gone and I had the short trip to Winnipeg by myself.

The tears were starting. I missed him so much. I wished he was with me, the two of us cuddled up together in the cosy aircraft. How proud I would have been to show him off to my family! What a wonderful, fantastic Christmas we could have had, together. Our first Christmas.

I let my imagination run wild, and I was glad the aircraft was dark so no one could see my face. Chain smoking cigarette after cigarette, I thought ahead to what was waiting for me.

My brother and his wife were going to meet me, this snowy Christmas morning. How happy I would have been if I could have introduced them to him. The start of a long relationship, the four of us.

To hand him over to them, to let them raise him as their own. I would have loved that, my own baby, raised as my nephew—but I would always know where he was, how he was. My brother had declined the responsibility; felt it 'wouldn't be good' for me.

Reality set in. I didn't have my son with me. One month old in just two days, he was in a foster home back in Toronto. I had no choice, I had to give him up; I knew no one who could raise him for me, and I wouldn't subject him to the nastiness that society would pelt at him, being brought up by an unwed mother.

He would be lost from me forever. I would miss his first smiles, his first words, his first steps, going off to school...everything, some other lucky woman would share.

The other mammoth hurdle for me today was to meet, for the first time, my sister's new baby. My new niece was two months older than my son. Meeting her would take some control on my part. But after the things I had gone through in the recent past, I knew I could handle it.

When we had waited in the airport, they played Christmas music. The songs

were about this special baby boy whose birthday was being celebrated today. "What child is this." "Away in a manger." "Oh come let us adore him." What about my special baby boy? Never again would I hear Christmas music without bringing to mind MY son.

The stewardess came around to tell those of us still awake, to extinguish our cigarettes and make sure our seat belts were done up. I carefully wiped my face and practised the smile I would wear for the next few days.

No one knew about my son, except the brother and his wife who were meeting me. For everyone else, I would play the screwball sister who chose to live in Toronto.

I thought back, as the plane circled the wide grid of streets of the prairie city, sleeping in its Christmas blanket of twinkling street lights and shiny snow. That woman who got off at the Lakehead. She was so happy I was calm.

She didn't understand. I was calm about the bomb because I hoped it was real.

Martine's story is a form of grieving that says so much about being a birth mother. Many women, who do not view themselves as poets or artists, are able to write, draw, paint and sculpt on this theme. Other examples of grief, transformed through creativity, appear in the women's texts.

Gwen, who surrendered her son in an open adoption, gave a variety of examples of her feelings about the violence she has experienced as a birth mother. She was promised pictures of her child intermittently from his adoptive parents. She writes that

the fact that anyone, let alone a third party—a body that governs people—can decide that a birth mother is deemed deserving of the ongoing anguish of the total withholding of any further atom of knowledge about a human being who is owned by no one, is a form of cruelty. It is a social injustice, a kind of violence, which sees not a batted eyelash because the grasp of the withholding is tightened by habit, thereby achieving legitimacy and becoming the norm of the adoption experience.

She describes her immediate post natal period,

after I returned to the family farm to recuperate, my mother forbade me to cry or to speak further of my son or of my experience while I sat at her feet grieving, watching her hand knit a tiny baby outfit that would be the one gift allowed by birth grandparents through the B.C. adoption registry. Her gift and her silencing seemed a perverse oxymoron, but my sense of self was so distanced that I ignored my resistance to this gross neglect of the truth.

Of birth mothers in general Gwen writes, “these women have suffered a kind of death by not witnessing the life of their child. I believe this to be a form of ignorant violence.” And of her ongoing anguish,

...for most of the years that followed, I ignored such signals of unrest except when they erupted in self violence (crying, yelling, verbally abusing my husband). The biggest trigger was feeling that someone else was arranging my life.

She also speaks of the self-imposed silence for many years and a tamping down of her true self and identity. Her own violence arose from a profound sense of powerlessness.

In my own experience, I remember being told by the resident doctor who had delivered my daughter that he would just put an extra special stitch as he repaired the episiotomy incision for my future husband's benefit. There was not an advocate anywhere; no one to speak up for birth mothers, or to encourage us to speak up for ourselves.

"How can people get so low that they allow others to bury them while they are still alive?" I asked in one of my electronic mailings. The main form of violence that I felt was that of being silenced. In a later electronic mail I stated that

I would go into rages while I was pregnant. I believe that it was my body screaming, because I had no voice in or about what was happening to me. I didn't have anyone to talk to about all that I was feeling. ...I could not speak about my experience. The denial of motherhood. The pretending to be someone and something that I wasn't. It all took its toll.

Do not remember your child—forget, was the message I heard from those who were supposedly there to help me with the loss of my daughter.

Susan, who was popular and outgoing before becoming pregnant, continues to struggle with chronic depression which she links directly to her adoption experience. She tells of her feelings of violation. "I felt violence against my soul. And I still do. I was totally humiliated, stigmatized, intimidated, ridiculed, and harassed. How could this be happening to me?" When she thinks of what others might have thought of her she asks, "How do you hold your head up and face the world when you think the world is smirking as you walk down the street?" She adds, "I have said to a few of my friends that know about my past that the experience ruined my life. I didn't know what I was saying when I

said it. I'm afraid that it destroyed my soul." Adoption is an event so deeply traumatic to a birth mother. It was an event in Susan's life that was never really recognized for its potentially destructive force.

"I had no desire to expose myself to any more questions about my abilities or intentions," writes Sylvia. "This was a chance to do something fine and noble...how desperately I needed to have those labels associated with me." Many birth mothers made the adoption decision for their babies under the fabricated belief that it was best for the child. The reality for most birth mothers in closed adoption was that neither their families of origin nor the authorities had any interest in seeing them parent their baby as a single mother. The issue of choice was a fiction at best. Sylvia adds,

The need to hide my pregnancy and eventually myself was to escape the violence of humiliation. The stigma was always there. ...Why else were all these professionals planning to hide the truth about that birth. They still hide the truth...quite legitimately in people's minds by refusing to issue real birth certificates. The view that we could not expect better treatment...be thankful that there was this much support. The view that this system was for the best was supported by families and professionals because it kept everything hidden. Silence was golden.

About her reunion experience and still feeling silenced Sylvia writes,

I was expected to be silent. I wanted to be silent, for fear of what reaction I would receive. Even now in reunion I experience the message to be silent. I become someone else. I feared losing my husband's and mother's respect if I searched for

my son. Silenced to acknowledge that I had lost not just a child but a lover who was important to me...the first person I had ever considered marrying. The violence of enforced secrecy. I was clearly the enemy...it (secrecy) was to protect the family from me. For me this was the most violent act.

Josée, whose father demanded she relinquish her daughter, does not specifically write of any violence that occurred to her during her adoption experience. She had a compassionate social worker and a family that cared deeply about her and visited her often after she had been sent away to live with friends while she completed her pregnancy. Yet, she has been profoundly affected by her experience. She had changed her mind about letting her daughter go, but in the end surrendered her because of opposition posed by her father. She wrote the following to her dad, to express her feelings to and about him. He died before she had a chance to resolve many of the issues that continue to haunt her.

I Forgive You Dad

...for not having known how to love me

...for having cared more about appearances than about substance

...for not having believed in me

...for having expressed so many demands and so little affection

...for having been an unhappy and frustrated man

...for not having known how to free your playfulness

...for having repressed my playfulness

...for having been ashamed of your feelings

...for having only been able to express displeasure and anger

...for making me believe that only displeasure was an acceptable emotion
...for having prevented me from believing in love and intimacy
...for having prevented me from believing that someone could love me
...for making me feel less valuable than my brothers
...for having abandoned me by dying
...for having taught me so much to be ashamed of my feelings that I was never able to grieve for you.

I love you Dad, please be in peace. ...

And if you can, grant me your assistance and your support.

Josée writes that,

...the current stage I am at is that of bursting the abscess and dealing with all the repressed stuff. It is important that I work through all those feelings and sort them out because I might be reunited with Julie (her birth daughter) quite soon.

The participants of this study have vivid recollections of the violence of the past. Violence in the form of silencing, labelling, and loss of voice is evident. As Young (1990) states “Each criteria [five faces of oppression] can be operationalized; each can be applied through the assessment of observable behaviour, status relationships, distributions, texts and other cultural artifacts” (p. 64). For the women who found themselves pregnant and unmarried in the 1950s and 1960s, oppression in the form of violence seemed inescapable.

Cultural Imperialism

The norms of a culture become entrenched over time. When an individual does not conform, she bears the social consequences for her behaviour. In the event of a woman having a child while not married, society's attitudes today may be changing somewhat, but for the women who experienced this during the 1950s and 1960s, the morés and values of the day were very harsh. The woman received, from society, condemnation for her grievous action. This condemnation is a form of cultural imperialism because the dominant culture sets the norm for society. If an individual or group does not conform, they are rendered outcasts, marked by stereotypes, and become invisible. The dominant culture has no room for, nor does it want to contend with, this marginalized group.

Young (1990) states that "the stereotypes confine [the oppressed group] to a nature which is often attached in some way to their bodies, and which thus cannot easily be denied. These stereotypes so permeate the society that they are not noticed as contestable" (p. 59). Individuals so ostracized find themselves internalizing images and feelings of inferiority projected by the dominant group. The oppressed person knows that the image is not who she is, but she is hard-pressed to deny it when it so permeates the dominant culture. She is "different, marked, or inferior" (Young, 1990, p. 60).

For birth mothers, this cultural imperialism imposes a dual identity upon them. One identity, that of birth mother, must be hidden, so that she will not be identified as a member of a deviant and degenerate group of women. The other self is a false public identity because the woman is forced to become an imposter; she is a mother but she

cannot admit the fact to anyone—even herself. She is not allowed or encouraged to grieve her loss. She is expected to forget and erase from her memory the fact that she has given life to her own child. Her reward for this denial is to be accepted back into the dominant culture and to assume her old identity. Many birth mothers spend numerous years of their lives in a state of bewilderment, unable to comprehend or understand fully what has happened to them. They have a new but secret identity that cannot be integrated into the public self. Carlini (1992) calls this a “fracturing of the self” (p. 18). All of the birth mothers in my study recount this loss of identity followed by their assumption of a false identity.

To incorporate her true identity into her total being so that the birth mother can become her authentic, whole self, is the challenge that faces birth mothers who want to confront what the loss of their child has done to them. Search and reunion are often the catalysts that bring this realization to fruition, for birth mothers soon discover that finding their lost child is just the beginning. The core issues of relinquishment, including dealing with the feelings of loss, grief, rage and anger, low self-esteem, hurt, forgiveness of self and others, begin to emerge from deep, dark places long since forgotten.

As each of the birth mothers in the study told her story, there was evidence of cultural imperialism. Martine, the oldest participant in the study, tells of feeling like a “social pariah” and a “low-class nothing.” She states that “the attitude of the nurses and doctor who examined me was callous indifference and insensitivity. They added to my humiliation.” It seemed that almost everyone wanted her to know that they knew just what kind of a woman she really was. Other words she uses to describe her image of herself

were, “garbage, a cockroach, I did not exist, never had a voice, and humiliated.” About the workers at a home for unwed mothers she writes,

Insensitivity, thoughtlessness, disregard of my feelings—all this and more, came my way. This from supposed professionals in the field, folks who specialized in helping ‘wayward girls’ such as I. Their behaviour has to be considered oppression, marginalization, and cultural imperialism.

When Gwen went to her doctor to have her suspicions of pregnancy confirmed, she was confronted with, “You’re smarter than this! How could you do this? You of all people should have known better.” The doctor used a contemptuous tone of voice, which made Gwen feel even worse. She had gone to this health professional, whom she had known and trusted for years, and was met with disdain and disgust. Gwen writes,

I could see that, in her eyes, I was falling from the predominant world of admirable, good people who normally move upward in society through education and culture, and I was sinking to a life of ruin and forfeit, inhabited by such people as the single mother who breeds like an animal in poverty.

Birth mothers who were well thought of before becoming pregnant, were immediately thrown from their pedestal because of their infraction against the norms that society expected. Motherhood is supposedly valued by Western society, but only under socially sanctioned conditions it seems.

Of the need to forget and get on with her life Gwen writes of her encounter with her mother who was knitting a sweater for her just relinquished son.

Mom put down her needles and said loudly, ‘Don’t. Just don’t dwell on it or torture yourself.’ I seethed. Wiping away my tears, I knew I was raising deep

unhealable welts into my soul with every tear that tore across my face and sucked itself up into my sweater sleeve. But I couldn't understand why anger and loathing should accompany carrying out an order that I thought was given in love, stopping the tears, if it was the right thing to do. But I did it unquestioningly and, without question, a piece of me died that moment...

Gwen so eloquently describes the beginnings of the imposter syndrome that a birth mother accepts as she conforms and becomes invisible as part of her new non-identity. Not being allowed to cry in front of her own mother, for the baby she had just surrendered; knowing her baby would be raised and loved by another woman—a woman who he would call “mother,” left Gwen shattered and alone. Gwen expressed her grief in her art work. After having tried to forget the past, it was actually her art work that told her that she was grieving the loss of her son. In this art piece Gwen is hanging her “dirty laundry” out in public.

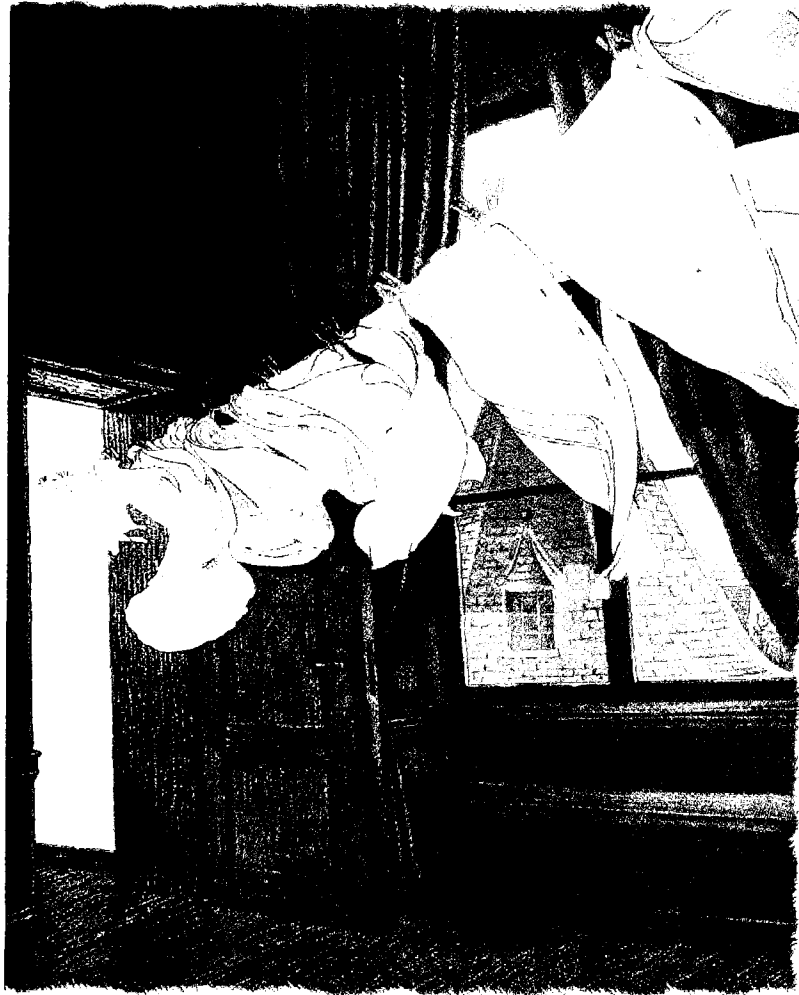


Figure 1: *"Inner Weather," Intaglio: multiple plate etching and aquatint by K. Gwen Frank (1996)*

As I reminisce about my own teen years, I remember myself as being quite typical for the times. I was an average student, a leader on student council, was a member of the community band and played basketball. As a pregnant teen my life changed dramatically. I met cultural imperialism in the form of scorn and disgust from some of the people I

encountered on my journey. I was ill-prepared to face some of the social workers at Alberta Social Services. In one of my electronic mail responses to a study participant I wrote,

My visits to social services were dreaded. I had one nice social worker who treated me with some dignity and respect, but the rest were people who I wish I could track down today. They treated me like garbage and accused me of being a slut. They never said it to my face, but I could feel it. They believed the stereotypes about the girls who got pregnant—and they thought that I was one of “them.”

Again, this is self-reflection that reinforces the stereotypes that existed about unmarried mothers. Most unwed pregnancies that occurred in the 1950s and 1960s came from meaningful relationships that more often than not contained love and long-term commitment (Sorosky et al., 1978).

Susan comments about her culturally assigned label. She had been a very popular and outgoing student in school. After having her baby daughter, Susan remembers, “...feeling free. I could leave that place and go back to society as I knew it.” But things were never quite the same again. She writes,

I wanted people to think of me as just Susan, not as ‘that’ Susan. I didn’t feel like any person other than myself, but believed everybody thought of me first as that girl who had that baby. And that those thoughts coloured their opinions about everything about me. Inferior. And certainly with the red A [reference to the book The Scarlet Letter by Hawthorne] on my forehead. Maybe not an A—perhaps a T for tramp.

Like many other birth mothers, Susan experienced the outfall of her body's fertility. She became a marked woman. The labels were not printed on these women in bold writing, but they were worn nonetheless. Susan goes on to write of her dual personality,

I believe there are two of me. And I have always felt like that. There's the me that I know. And there's the me that everybody else knows. There are people who see through the facade, but very, very few who actually know me even slightly well. Sylvia also experienced cultural imperialism in several ways, ...as previously stated I ceased to exist as an autonomous individual. My parents and the social workers knew what was best ...who was I to argue...pretty ironic...I had spent my whole life arguing against the status quo...suddenly I was the compliant young woman. The need to hide was a powerful message about how my condition was viewed. I applied most of the thoughtless stereotypes to myself. I knew I wasn't a slut, but who could I tell? You did not talk about your sex life then. I lived and breathed the stereotype that young unmarried woman have no hope of successfully raising a child. The stigma that would attach itself to my child...illegitimacy...for all to see sent me running for the security of adoption. My kid was not going to be called a 'bastard!' Even the love I felt for my child was illegitimate because I could not act on it...beyond 'doing the right thing.'

Sylvia felt the judgements and ran for the safety that conformity would bring her. Of her post relinquishment Sylvia writes, "there was an assumption that I would forget, instead I suffered from 'disenfranchised grief,' no societal acknowledgement of the need

to grieve, no rituals to mark the awesome contribution I had made.”

For many birth mothers, the odds against them were overwhelming. They had stepped out of line by getting pregnant; it was time to step back in. To rebel against the status quo was almost unheard of at the time and it was during the early 1970s that birth mothers began to parent their children rather than surrender them for adoption. Society was having increasing difficulty finding homes for the babies of unwed mothers and mothers were beginning to get support from families and social agencies to keep their children.

Josée echoes the voices of the other birth mothers in the study. She says,

I was an object of shame to be hidden away, and all the decisions were made for me. I also was too subdued to dare protest. It was easier to go along with everything. I felt that I had so shamed my family that I deserved everything I got.

About her ongoing feelings she writes,

The validity of my feelings was denied. I was supposed to be a good submissive girl and get on with my life on cue. No one understood the lingering grief and obsession, not even my baby’s father. I was apathetic, I was uncooperative, I wanted to forget, I wanted to be carefree again, I wanted another baby. I was so torn with contradictions.

Two weeks after Josée had her baby, her father had his first heart attack. “I felt as if his heart attack was entirely my fault, because of all the stress I had caused him,” she recalls. Saddled with guilt and remorse over her loss, Josée engaged in self-destructive behaviour. She became involved in several loveless relationships which is a common coping

mechanism that many birth mothers use to deny their pain (Millen & Roll, 1985).

Birth mothers were given an unwritten script from society. They became outcasts during pregnancy as a result of a biological accident. They were to be out of sight and out of mind. Once the pregnancy was over, the invisibility remained in the form of self-imposed silence and exile as an imposter—a surreal person. Birth mothers internalized the labels that were assigned to them and developed a sense of inferiority. As Young (1990) states, “the dominant group constructs the differences which some groups exhibit as lack and negation. These groups [birth mothers] become marked as Other.” All participants talked about their feelings of otherness in relating their interpretation of cultural imperialism as described by Young (1990).

Powerlessness

Although Young (1990) writes of powerlessness in the context of domination by the middle class over the working class in relation to the division of labour, her concepts can be transferred to the position in which many birth mothers find themselves. “The powerless are situated so that they must take orders and rarely have the right to give them” (p. 56). Many birth mothers describe themselves as second class citizens and admit to a low self-esteem. In the 1950s and 1960s public confidence in health and social service professionals was high. Professionals had a university or college education, status and respectability, authority, and power because of the positions they held. Many birth mothers and their families felt powerless when it came to decisions stemming from an unwanted pregnancy. Birth mothers and their families looked to the professionals for direction,

guidance, and answers.

One solution was homes for unwed mothers. Such homes had their origins in religious organizations that were interested in preserving social and moral order. While in a home for unwed mothers, a young woman was expected to tow the line. Many compare their experience to going to jail (Petrie, 1998; Schaeffer, 1992). Carol Schaeffer, in her book The Other Mother (1992) describes her first encounter with the nun in charge at the Catholic home for unwed mothers where she was sent while pregnant with her son. When she directed the discussion beyond the topic and questioned adoption, Carol was silenced. The idea that a mother would be allowed to parent her own baby existed but not for the middle class. If the single mother insisted on parenting, she was virtually on her own if she did not have a supportive family. There were scant resources to support an unwed mother. No programs or social agencies provided assistance to women with their needs of learning to be mothers, completing their education, or providing financial support.

If marriage was not a possibility, the next best option was adoption. Neither abortion nor single parenting were viable alternatives. Women felt powerless to do anything but surrender. The guilt, shame, humiliation and lack of feasible choices made them powerless and willing to acquiesce to the forces they faced.

Other pressures of powerlessness included the scar of illegitimacy on a child and mother that could not be erased and the threat that they would live in poverty for the rest of their lives. A common message was that being a single mother would ruin their lives or that they would never amount to anything and would probably end up abusing their child. If they were to marry the father of the child, they would certainly end up divorced. No

wonder the pregnant woman dreaded the visits to social services. No wonder self-esteem was low. Rather than being encouraged to face our challenges, we were encouraged to run and hide forever. “Put the whole thing behind you. Forget that this ever happened. Don’t tell a soul,” were messages we all received.

For some of us, the care we received from hospital staff was excellent. For others it was sadly lacking. I remember being a student nurse in the early 1970s and hearing the nurses talk in a derogatory way about the unwed mothers on the maternity ward. “I’m one of them,” I thought. “What if they knew? Is that how they would see me?”

Reminders of my past were everywhere I turned. How could I forget my daughter? Why should I have to?

Unwed mothers were frequently discouraged from looking at or holding their newborn baby. Some were even refused the right. What did the professionals accomplish by doing this? Who were they protecting? The fear was that the mother might bond with her baby and change her mind about the adoption. Professionals did not know much about the secret relationships that many birth mothers had with their child prior to birth. Bonding was well established for most much in advance of the birth date. One of the regrets that I have in my own experience is that I did not hold my daughter after she was born. I was following orders. I ignored and denied the feelings and wishes in my heart. In my powerlessness I had acquiesced to the orders of others. The conspiracy of secrets and lies became my shroud.

In exploring powerlessness as a part of oppression, Sylvia describes how she felt about her social worker.

Theoretically, I had a choice; to not hide, to work, to keep my child. But the powers stacked against me were overwhelming. I was young, relatively uneducated and a drop out. The social worker was mature, experienced, sensible and educated. All the things I aspired to be and clearly wasn't. I knew it was her job to save this child. I was secondary...Even before I got pregnant I felt some powerlessness in my relationship with J. To get and keep my man I had to give up my good sense, my instincts and my sense of self.

Sylvia's narrative is an excellent example of how the social worker had the perceived control and power in the relationship between professional and client. Despite such counsel, Sylvia, considered keeping her son.

By the fourth day my resolve was being washed away by my aching heart and my leaking breasts. I asked to have my baby. I fed him, undressed him, watched him, talked to him, loved him and held him in my arms until we both fell asleep. I cried holding the centre of my universe and wanting to make a life for us. My roommates came and we schemed about how we could make this work. I had never really considered this alternative, too caught in the conventional propaganda of the day. No one had challenged me to consider it. ...Walking out of that hospital and away from forever, I have no words to express it. It just makes me weep. That was the day that my thirty years of numbness began.

Sylvia admits to suffering from long-term depression and describes herself as a very angry woman in the post relinquishment years. Until she met with her son, the root of her problem—his loss—escaped her. After meeting him, she was able to grieve and has

begun to heal. Sylvia concludes her feelings on powerlessness with this comment,

How did the reality of all these losses in a few months coupled with a crucial development stage and the hormonal and physical stresses of birth affect my decision-making abilities around relinquishment? I suggest there was a high degree of impairment that increased my powerlessness and caused me to cling to the noble and previously planned course of action against the needs of my soul.

In the enforced public conspiracy of silence, a deeper, inner sense of knowing was silenced within Sylvia.

Gwen also wrote about her feelings of allowing others to make her decisions for her.

There was a profound sense of powerlessness in believing that my mother would know what was best for me when she ordered me to set aside the moaning and groaning about how sad having to say goodbye to my son was. I thought that I was supposed to follow her advice, because it was consistent with being led by my parents right from the beginning of my pregnancy, to do the right thing. A lack of guidance reinforced this tack.

In maintaining the code of silence parents and professionals alike refused to acknowledge openly an awareness of an unmarried mother's plight. There was no recognition that this decision, to surrender a child for adoption, would forever impact the woman's life. To support the denial was a belief that the adoption decision would have little, if any long-term effect. The goal for the authorities was to obtain the baby and place her or him with a bona fide two-parent family.

As the youngest birth mother in the study, Gwen did have access to legal abortion.

In deciding not to abort she writes,

...the strongest feeling of power arose right after conception when I had instantly decided that abortion was out of the question, and this person, this child who was already here, already present in that room, deserved the best and was going to get it—through adoption. Ironically, I hadn't yet begun to realize that carrying out this plan was to be an avenue strewn with intense feelings of powerlessness among many other painful feelings.

And for Susan powerlessness was the strongest form of oppression.

Of all the five faces of oppression, this has to be the greatest one. Someone else may as well have just stepped into my body and gone through the motions of life for the months of my pregnancy. I had no rights, and no right to expect that I should have any. During those months, I simply did what everybody told me to, and waited for it all to end.

In acquiescing to the oppression, most pregnant women gave up any right to decision-making. The powerful held out the “appropriate” choice and we followed through with this choice. For most of us, we could not vote, hold property, or go to a bar, but we were old enough to sign away all rights to our own flesh and blood.

Powerlessness became physically apparent during Susan's labour and delivery. I didn't want to be alone during the labour but felt totally powerless to ask for support. Apparently, the home and whoever else was in power, determined that notification of family was to be only after delivery. At least, that's how I recall it.

Susan states that she felt

...powerless to fix the wrongs. I couldn't undo getting caught [pregnant]. I couldn't escape the feelings of inferiority I now had, and still can't. I couldn't stop feeling that I had to confess. The injustice for what happened to me as a result of simply loving somebody—having to go get locked away, not being able to even be seen, not counting to anybody anymore—incensed me and still does. It was dehumanizing.

The powerlessness even suppressed Susan's emotional needs to discuss her pregnancy. There was no avenue to explore her emotions.

Perhaps I could have expressed my fear and anger and helplessness. Maybe somebody would have read it. The act of writing anything at all about it might have made me feel better. I like to write, and I've always found it therapeutic.

Like their birth mother companions, Josée and Martine both felt powerless. Josée states that she felt that she had no choices either, except to go along with the choice made for her by her father. This led to life-long strife between the two of them. Although Martine was older and may have been able to survive on her own, the stigma of being unmarried and having a child was the pressure that drove her to the adoption choice.

“Being raised by an unwed mother provided a stigma I wouldn't wish on any child, not if I had a choice.” Martine has a pleasant recollection of the nurses at the hospital where she delivered her son. “Their kindness touched me deeply, and made me feel I was a worthwhile person after all.” However, she did experience powerlessness in the first of two homes for unwed mothers where she had been abysmally treated.

Evidence of powerlessness existed for all birth mothers in the study. As they recount their inability to make decisions for themselves. Professional counselling to look at all options was lacking except for the choice of surrendering the child for adoption. The person who carried the power and respectability in the adoption decision-making process was the professional. People are “prepared to listen to what they [professionals] have to say or to do what they request because they have some authority, expertise or influence,” writes Young (1990, p. 56). Certainly the power person in the adoption equation was the professional and they usually had the support of the young woman’s parents. Most families were reluctant to have their reputation sullied by a bastard child in its midst. Thus, the most powerless people in the adoption equation were the mother and her child.

Marginalization

Marginalization is being forced to live on the outer edges of dominant society. In her discussion on marginalization, Young (1990) discusses an economic and political system of labour as a marginalized group of people the system cannot or will not use. Her examples of these groups are single mothers and their children, old people, the disabled, and the mentally ill. Groups of people, such as the aboriginals who were sent to Church run residential schools, are expelled from useful participation in society and thus are potentially subjected to severe material deprivation and social isolation. Some groups such as the mentally ill, were traditionally excluded from participation through denial of citizenship based on dependency. Many social dependents were housed in institutions modelled on the modern prison. Unwed mothers, for example, were formally housed in

institutional homes for unwed mothers (p. 54).

Fraser and Ferguson (cited in Young, 1990) state that:

Being dependent in our society implies being legitimately subject to the often arbitrary and invasive authority of social service providers and other public and private administrators, who enforce rules with which the marginal must comply, and otherwise exercise power over the conditions of their lives. Often with the aid of social scientific disciplines, welfare agencies also construct the needs themselves. Medical and social service professionals know what is good for those they serve, and the marginals and dependents themselves do not have the right to claim to know what is good for them (p. 54).

Dependency in our society thus implies, as it has in all liberal societies, a sufficient warrant to suspend the rights to privacy, respect, and individual choice (Young, 1990). Young also declares that “dependency should not be a reason to be deprived of choice and respect. ...Marginalization also entails the deprivation of cultural, practical, and institutionalized conditions for exercising capacities in a context of recognition and interaction” (p. 55). The activities of society take place within the context of institutions and social structures. To have institutions disregard the views and opinions, choices and wishes of the people that they were created to serve, begs the question of purpose for those institutions. Does the institution serve the people, or do the people serve the institution?

When birth mothers describe themselves as having been marginalized, a counter argument could be posed. It could be debated that women who were pregnant and unmarried were actually saved from the marginalization that occurs as a single mother

because of the stigma associated with this status. The child, through adoption, can be saved from marginalization because he or she will not be identified as illegitimate or as a bastard. The adoptive parents can deal with their infertility by providing a home for an unwanted child. By concealing the fact that a woman had a baby out of wedlock and surrendered it for adoption, the birth mother would be spared from a life of shame and ridicule.

While the intentions may have been honourable, the outcome did not evolve as anticipated and the cost for women and adoptees has been high. Social patriarchy and a socially constructed adoption system dictated the process and outcome for most birth mothers. There were no viable alternatives. The invisible script read that a woman would keep the pregnancy a secret, be hidden in shame while pregnant, forget her baby, and live life as if the event did not happen. This was, and is, cold and callous. Denying and forgetting significant life events such as pregnancy, birth, and becoming a mother is not possible. Many birth mothers say a piece of themselves died when they left their baby and their attempts to assume their old identity never succeeded. When I wrote of my post-surrender experience to the study participants I stated that,

I remember that I couldn't wait to get home from the hospital to try on some new clothes that I had bought with some of my savings from babysitting my niece. I had been to 'Bay Day' and got some good deals on clothes for school. So I tried on a new, form fitting skirt that I had bought and lo and behold I couldn't get the damned zipper done up. In my 17 year old naive mind, this was the first inkling I had that I had been lied to about all that had happened to me. I expected,

demanded even, that I would be the person I was before I got pregnant, that teen who was carefree and happy and skinny. But I wasn't skinny. My abdomen was still big and very flabby. I had stretch marks all over my boobs and bum. What was this? I was supposed to be the person I'd once been. Wasn't that the deal? I had been betrayed.

I also remember sitting watching TV about seven days after I had Jackie and all of a sudden my breasts began to flow, not leak, they were like a river. I didn't notice at first and then everyone in the room began to laugh. I was hurt and started to cry. I didn't understand how my body worked. Of course the 'dry up' pills hadn't worked. Why would my body produce something that was not needed? My mom and sister insisted that I call the doctor myself for more pills. I felt humiliated, lost, confused and terribly alone. All these reminders of my loss were just beginning to creep into my awareness without my consent.

For most birth mothers the burden of the secret becomes too much to bear.

Eventually, usually after years of trying to forget and “getting on” with life, birth mothers face reality. The denial surfaces and this frequently precipitates search and reunion.

Open adoption practise, where the parties involved in the adoption are known to each other, attempts to include all parties in the pre and post outcome decisions. Still, the infant has no say in what will happen to his or her life. And once the adoption papers are signed, the birth mother has no legal right to any further demands regarding her child. The adoptive parents have no legal obligation to abide by the terms of the open adoption, including, agreed visitation, exchange of pictures, or ongoing contact with the child. The

obligations are of a moral nature. Birth mothers become dependent upon others for the very knowledge that would ease the pain of loss. They are still marginalized.

As Martine reflects on her experience of growing up in the 1940s and 1950s she comments that “before becoming an unwed mother I was conditioned to be oppressed, dominated, exploited, marginalized and powerless. It was just there, wherever you looked. I hated it, but what could I do?” Part of her upbringing and socialization was to believe she was less valuable than a man and being unwed and pregnant magnified her sense of worthlessness. Martine had to leave her job because of her pregnancy and ended up working as a mother’s helper. Petrie (1998) states that many women found themselves in this position while pregnant. While in the employ of a wealthy family, Martine writes that she was to be “seen and never heard.” Her opinion did not matter and her working conditions were less than ideal. While prior to the pregnancy she had been a professional doing market research, she now found herself doing domestic work and child care for room, board, and little pay.

Gwen looks at marginalization through different eyes. She says,

My experience involves marginalization in that. ...Not by informed choice did I keep out of sight and out of mind to nurture the inner world of the ostracized, but because I had no means to make a living, being pregnant (a type of physical frailty), uneducated and a totally inexperienced dependant on society. Society’s dependants are not society’s card carrying members with responsibilities. So, I waited it out until my return ticket to student status arrived.

Gwen eloquently reinforces Young’s concepts of marginalization because of the state of

dependency and powerlessness she experienced. She goes on to say,

As a marginalized person, I believed it was in my best interest to disappear into a home for unwed mothers. ...I had to keep my experience quiet too, with regard to the relationship I had with my developing baby...I thought of myself as abandoned, whoreish (or at least thoroughly unholy), ridiculed, weak, stupid and very careless.

About her experience of the doctor berating her for getting pregnant she writes,

I walked out of that office unspeakably angry at her lack of compassion, yet unable to utter a word in my defence, as through marginalization, I felt like I had no right to use my own voice as of course I was now deserving of any reminder of my stupidity and carelessness.

Gwen felt that her rights to privacy, respect, and individual choice had been suspended. She made herself believe that “she deserved what she got” and her role was “to take it.” She tells of an experience where she was not even asked if a group of interns and residents could examine her while she was in labour.

I’d not been notified that class was now in session, and I was the object of study. I thought, well this is a hospital and they’ve got to study somewhere, but on the edges, through the pain, I felt violated. They spoke about my dilation as if I weren’t present and one of them shoved what felt like sandpaper up my vagina. ...I was in a rage, but then they’d gone.

Although this experience is shared by many women, birth mothers or not, for many birth mothers who encountered student interns, residents and nurses, as Gwen did, they made the situation seem doubly humiliating. The health professionals did not consider Gwen’s

respect, dignity, privacy, or permission.

One of the saddest events which Gwen describes is her experience with the minister whom she asked to visit. She wanted to have her son baptized. She writes, I told him all about it being the one and only thing that could be shared, mother and son, about my wanting to feel that I was a genuine part of all of this. He persuaded me that if I had the courage to give these people a gift of a brand new son, could I not find the courage to give them ‘the whole package’ (my words), as baptism is very much a family thing to share and it’s part of the ongoing rearing of a child in a Christian family. ...Oh what a sad remembrance. ...I had to give up all dreams associated with giving a child a life. ...My right to choose this rite for my son, for whom I was still responsible for at least ten days, seemed to me revoked by a higher authority, on whom I had to depend to perform the rite, and whom I respected more than myself.

Gwen tried to secure a ritual for remembrance of and good-bye to her son. For birth mothers there is no sanctioned or recognized ceremony, like a funeral, for saying good-bye. The only official action is the signing of her name to the surrender document. She does not get any official acknowledgement, not even a receipt.

Of the ongoing feelings of marginalization that haunts all birth mothers, Gwen notes that her “dependency on others continued in the years that followed, as I assumed that I was limited in choices. An emotional leftover from my earlier painful experiences.”

I can sympathize with what Gwen experienced. I was sent off to live with my sister and babysit my niece in Calgary until I had the baby. Then the plan was to surrender it for

adoption. I was marginalized—not able to have much of a say in anything that happened to me—and I went along with everything. I became little Miss Agreeable. It was easier to acquiesce than to stand up and say what I thought and wanted. I wrote to the study participants,

I was powerless. I had no voice. ...Because I had sinned big time I felt that I got what I deserved and anything that was dished out was okay. Of one particular incident that was most humiliating I remember going to social services with my mother to sign the final adoption papers surrendering Jackie. I didn't really understand all of what was happening at the time. I just wanted to get "it" over with and so did what I was told. While my mother and I were with the social worker, the social worker started asking me some very personal questions about my relationship with my boyfriend. She finally asked me how many times we'd had sex, where, and over what period of time. My mother was sitting right there listening to it all. I could hardly believe what was happening. What choice did I have but to respond?

Regarding the long-term implications of being a birth mother and feeling marginalized I became an imposter. I always thought that people would literally die if they ever found out that I am a birth mother. I was also concerned for my husband and what it might do to him socially and professionally. As I have emerged from the shadows, it has been gratifying to discover that there are compassionate, understanding individuals in our world.

For Susan, the oppressive face of marginalization was part of being sent to a home for unwed mothers. She reflects that,

I am part of a group that was literally cast away from regular society, and required to put in time as though we were criminals. And wherever we were sent, it was to prison. We were taken from our homes, our friends, schools or jobs, partners, hobbies, pets...It was complete and cruel shunning. And the shunning went on after we returned home. ...Everybody else knew what was best for us. We had to follow the rules and in my case it was even extended to exactly what I ate and when I ate, when I went to bed for the night, when I got up in the morning, when I went to the doctor, that I had to go to mass ...

Susan still grapples with the long-term effects.

I felt, and still do, that I'm on the outside looking in. ...The good life, as I always saw it, was for the good people, and I wasn't one of them any more. Society at large told me that, and that's the way it had to be. ...When I can't talk openly about being a birth mother from the 1960s who gave her baby up for adoption I get angry. I hate it that society has this power over me. But you know what? I have always believed that the shit would hit the fan about us [birth mothers]. And I was right, damn it, I was right!

Sylvia felt marginalized throughout her experience. Whether she met with doctors, nurses, social workers, or a priest, the feedback she always received was that she was a "slut." She had to disappear like the rest of us. She says that "for four months I ceased to exist outside the confines of the Woodside Maternity home. ...I felt under a lot of pressure not to disappoint anyone by changing my mind—my parents, the potential parents, the social worker." Of losing herself and her own identity Sylvia felt that "the only time I was

in touch with myself was when I was alone in my room—me and my tummy.” Sylvia notes that she was lauded for her decision to surrender her baby and she received a lot of reinforcement to do so. “This was a chance to do something fine and noble, how desperately I needed to have those labels associated with me.”

Josée still feels marginalized, “but less and less so as I become more and more assertive. I am beginning to reclaim my pride and self-respect, and that is wonderful. Thank you Kathy for being an instrument of healing.” Josée’s father added to her pain by telling her that no man would want another man’s child if she kept her baby. She writes, “...the future he was painting was so bleak that I could not put myself and my daughter through it for the ‘selfish pleasure’ of keeping her, that pleasure soon turning into a life of drudgery, deprivation and loneliness.” Josée writes that she became emotionally distant and has had a difficult time attaching to others since the loss of her daughter.

Marginal people are those for whom society has no use nor a place. Privacy, respect, and individual choice are suspended for these groups and individuals. Rather than garnering respect and participation in society, the dependent are deprived of their right to choose and have a say in their own affairs and in the affairs of society. The birth mothers in this study experienced marginalization while pregnant because they were ostracized and sent away to have their babies in shame and secrecy. They were also deprived of support and knowledge in making an informed choice about the long-term ramifications and consequences of adoption.

Exploitation

Webster's dictionary (1990) defines exploitation as "to be used for another's gain or to be taken advantage of." Although Young's (1990) theory of exploitation is based on a model of labour and its relationship to capitalism, her ideas transfer to the social and institutional domain. She states that

the injustice of capitalist society consists in the fact that some people exercise their capacities under the control, according to the purposes, and for the benefit of other people. ...workers in a capitalist society suffer material deprivation and a loss of control, and hence are deprived of important elements of self-respect." (p. 49)

How does the construct of exploitation apply to the world of adoption in the 1950s and 1960s? Professionals of this era, using a socially constructed script, were given the responsibility to decide what was best for women who found themselves pregnant while unmarried. The pregnant woman faced a dilemma; as did an infertile couple. Adoption was seen as the perfect solution to everyone's problem. The woman resumed her pre-pregnancy identity, the child received a home and real parents, and the adoptive couple received a child to call their own.

The complications to the parties involved were not anticipated and if they were, they were denied. It is hard to imagine that no one at the time anticipated that in the long-term there would be traumatic implications for the parties involved. The unfortunate outcome for birth mothers is that they have had to live with the traumatic decisions; the professionals did not.

Young (1990) writes about work and exploitation in this way:

Exploitation enacts a structural relation between social groups. Social rules about what work is, who does what for whom, how work is compensated, and the social process by which the results of work are appropriated, operate to enact relations of power and inequality. (p. 50)

Take the word work from the preceding sentence and substitute the word adoption and adoption practises of the past reveal themselves as exploitive. Birth mothers provided a product, their baby, and yet they had no control over, or say in, the practise of adoption or influence on the decisions made. The institution of adoption was unjust and oppressive to birth mothers.

Young (1990) states that “bringing about justice where there is exploitation requires reorganization of institutions and practices of decision-making, alteration of the division of labour, and similar measures of institutional, structural, and cultural change” (p. 53). Adoption practise did begin to change in the 1970s for a variety of reasons (Sorosky et al., 1977). Birth mothers became better informed and demanded more say in the placement and long-term relationship that they would have with their child. They were allowed these liberties because healthy white infants were becoming a high-demand commodity. Because of changes in societal attitudes toward single parenting, more support for single mothers, the attitudes and desires of women themselves, the trend to parent their own babies, and the availability of legalized therapeutic abortions, fewer babies were available for adoption. Birth mothers gained some control in the decisions around placement. However, in 1999 birth mothers still have no legal rights to enforce agreements made regarding ongoing contact after the adoption papers have been signed

and the child has been placed.

Birth mothers in this study also felt exploited because their bodies were being used to house and nurture an infant for someone else, the adoptive couple. One participant even saw her experience as a form of forced surrogacy as depicted in the futuristic society of Margaret Atwood's Handmaid's Tale (1985). In this science fiction novel, birth mothers are sex and fertility slaves for infertile couples. Gwen gives an example of her feelings when she states that

bringing a child to term for the raising of others and then to have those others renege on the original agreement to provide me with a few photos to carry with me in the many silent years to follow the separation of me and my son, was a form of exploitation that I found difficult to bear.

Sylvia states that she was told "that this noble act [surrendering her child] would give a child to a childless couple." She was not told that he would go to "a family that already had two kids, not one; who would make him a citizen of another country...or split up within ten years of their marriage saving adoption that did not work." She goes on to state that in reunion "my body produced this perfect baby...with a superior brain. Now others question my right to take any credit for who he has become!"

Susan feels her exploitation deeply. She states that she feels exploited because I was considered by others and by myself as inferior to everybody else. When I got pregnant I became part of a lower class of people. And I have believed, sometimes consciously, sometimes subconsciously I'm sure, that is where I have belonged and still do for the rest of my life. ...some people will always consider me as inferior

because I loved somebody before I was supposed to, and had a baby in circumstances of which they didn't approve. Exploited also because to pull myself out of a state of exploitation is exceedingly difficult. It requires much courage and bravery.

And Sylvia's thoughts about exploitation declare that from the beginnings of my pregnancy I was painfully aware of what an incomplete unit I was without a man. If my man was not by my side how could I raise a child. The 'public patriarchy' was powerful and understood.

Without a man willing to endorse the legitimacy of the child through marriage, Sylvia and other birth mothers were not allowed to mother and parent her own child.

Birth mothers in this study also experienced sexual exploitation. Some felt that their boyfriends sexually exploited them. Following the relinquishment of the baby, some women found themselves in unfulfilling sexual relationships. Some describe themselves as being "sexually promiscuous" and unable to understand or appreciate that they needed to grieve the loss of their baby. Others found themselves using alcohol or drugs and engaging in personally destructive behaviour to try to forget. A few were unable to connect intimately with another human being on a long-term basis. Two of the women in the study did not have other children.

In expanding on the term exploitation, Young (1990) states that, "the right to appropriate the product of the labour of others [a baby from a birth mother] partly defines class privilege, and these societies legitimate class distinctions with ideologies of natural superiority and inferiority" (p. 48). Society did not want women who were without

husbands to raise their own children, unless the woman was a widow. Society was unwilling to support women who found themselves dependent on others because they had become mothers without the endorsement of marriage. Therefore, the appropriation of babies was justified and encouraged. The outfall for many birth mothers because of this practise, and certainly the women in this study, has been significant as witnessed by their testimonies.

Young's (1990) five faces of oppression: violence, cultural imperialism, powerlessness, marginalization and exploitation were evident in all of the birth mothers stories. Some of the women in the study seem more profoundly affected than others by their experience but all have been traumatized just the same. The effects of this trauma are well outlined by Block-Jones (1993) in the book Birthmothers. She outlines a birth mother syndrome that can occur when a woman surrenders a child for adoption. The syndrome manifests itself through some or all of the following traits:

1. Signs of unresolved grief, such as lingering denial, anger, or depression.
2. Symptoms of post-traumatic stress disorder, such as flashbacks, nightmares, anxiety, avoidance, or phobic reactions.
3. Diminished self-esteem, passivity, abandonment of previous goals, or feelings of powerlessness, worthlessness, and victimization.
4. Dual identities, divided into outer pretenses of 'perfection' or 'normalcy' and secret inner feelings of shame.
5. Arrested emotional development, typified by the sense of being 'stuck'

where they were when they relinquished.

6. Self-punishment, often inflicted through participation in abusive relationships, abuse of drugs or alcohol, eating disorders, or other self-destructive behaviours.
7. Unexplained secondary infertility.
8. Living at, or vacillating between, various extremes. (p. 272)

With such significant effects, the trauma of being a birth mother has become recognized. But unplanned pregnancies will likely continue to happen and birth mothers need a different, more respected role in the adoption process. But how can this occur? How can adoptions not create a traumatic aftermath for birth mothers? Many people involved in adoption work are hopeful that open adoption will ease the pain of loss and trauma for birth mothers. In some cases it works; in others, it does not. Perhaps, after all the suffering experienced by birth mothers, it is time to include their input into the practices associated with adoption.

Summary

This study uses Young's (1990) five faces of oppression as a framework for birth mothers, communicating using electronic mail, to describe their lived experience and perceptions before, during, and after surrendering a child to adoption. The testimonies of the women reflect the fact that they indeed feel oppressed individually and as a group because of the norms of our society surrounding out-of-wedlock pregnancy. Through recounting their memories of the adoption experience over a three week period and

communicating their thoughts to me using electronic mail , the birth mothers in the study have described how they have felt exploited, marginalized, victimized by cultural imperialism, made powerless and violated. All of the women have either had a reunion with their child or are hopeful for a reunion in the future. Despite the negative aftermath of being a birth mother, they are integrating their experiences into their whole being.

Recommendations

With the acknowledgement that birth mothers have been oppressed in the past, and may still be in the present, and that adoption will be with us in the future, everyone involved in the adoption process must consider changes in adoption practice. In using the heuristic methodology that I selected at the outset, suggestions have occurred. These have their genesis either in me or the other birth mothers. Our lived experience has forged the following list.

1. Every effort should be made to keep birth mother and child together. Although society is slow to value all mothers, including those who are not married, it is imperative that social workers and those working with single pregnant women remain as objective as possible given the circumstances. Counsellors need special training in working with birth mothers. They must have an appreciation for the short and long-term emotional, psychological and spiritual ramifications of surrender. In the joy of seeing adoptive parents obtain a child to call their own, the counsellor must be aware that the birth mother and her family lose a member of their clan.

2. The birth mother's counsellor must remain her advocate. In order to do this, it is recommended that two different counsellors represent the different parties in the adoption, the adoptive parents and the birth family respectively. There is an obvious conflict of interest when one counsellor represents both parties and especially so when adoptive parents pay a fee to the counsellor.
3. No money should change hands in an adoption. A baby is not a commodity, and yet prospective adoptive parents who enter the private adoption system are expected to pay a variety of fees before they can obtain a child. Is this fair and just practise? Could the quest for profit become the focus and incentive for an adoption agency?
4. Long-term counselling should be available to all parties involved in adoption but especially for the birth mother and birth father if he is involved. This recognizes the life-long impact of the adoption decision. It is important to acknowledge that across the life-span many issues will arise that can be related to the adoption experience. Help should be available when needed over the long-term.
5. Adoption records should be accessible to the parties involved in adoption. Although all adoptions completed after January 1, 2000 will be open, the adoption records of the past will remain sealed in Alberta. Access to information about the identity of birth parents, adoptees and adoptive parents is currently denied to another party unless birth parents or adoptees consent. Identity is a core issue for most adoptees. Birth mothers need vital pieces of their missing history—information about their child—in order to heal. Our society is becoming more and more open on

all issues. Why not adoption? Denial, anonymity, secrets, and lies bear the bitter fruits of depression and sorrow.

6. Birth mothers need to tell their own stories and find their own voices. If this is not done birth mothers will allow others to continue to speak for them. Support groups and well-prepared counsellors who understand and are prepared to deal with adoption trauma are essential to this process of finding and forming the voices of birth mothers. As they emerge from the shadows and birth mothers hear their own voices uniting in a common anthem, society will have the opportunity to begin to listen and to acknowledge the great injustice and oppression that has been tolerated and endorsed.
7. Adoptive parents need intensive education regarding their role, commitment and the nuances in open adoption. Flexibility is key in making this type of arrangement successful in the long-term for all parties involved.

Conclusion

In my study, birth mothers told their stories about their experience of being a birth mother. At the conclusion of the study, I gave them an opportunity to tell me how they had survived the trauma and pain that they had experienced. All of the women stated that they had wanted to keep their babies, but realized that life and circumstances at the time made it difficult, if not impossible.

Perhaps the biggest challenge for birth mothers, including me, is to forgive ourselves for our part in the past and if we have it in our hearts, to forgive others as well.

Susan states that

now that I am acknowledging, consciously, the profound effect this experience has had on my life, I resent it that other people made decisions for me and I was expected to just accept those decisions. I resent it also that I actually did accept that 'crap.' This is totally contrary to the 'me' [image] I have of myself. ... I'm trying to live with it, and accept the totality of what happened so long ago. It's like I've been faced with an actual death of someone I love. ...My goals are to recover as much as I can, in every way; to be a whole person again; to find faith in people. But most of all to come out of the closet.

Gwen, who speaks with an artists' brush states,

The intuitive process of excavating my innermost emotions and yearnings through developing a career in visual art has been my saving grace. ...the visual images that floated up to the surface from the depths by my own hand could not be denied. I was aware of the power of my artwork to reveal my true being to me, and for so long I was afraid to look. About five years ago, I recognized and began to repair the damage I had done by denying and ignoring the pain...

Martine explains that she was

in a black limbo for thirty-nine years between his [her son's] birth and relinquishment and our reunion. I survived because I'm a survivor, tough-minded, stubborn, with a strong will to live. [Now] I find my self singing, humming, feeling good about things, most of the time. I have no more secrets. Do you have any idea the freedom that gives me? I'm proud of what I did, and how I survived, all by

myself. And most important of all, I have a wonderful new son and a relationship with him and his family that gives me intense happiness.

Sylvia, who has just reunited with her son in the past year says that

I am in the midst of grieving my loss...this did not consciously begin until after my reunion. ...I need to trust myself. I know that I need to take every painful step and I need to take it on my terms, and in my time. I have recognized that I needed to grieve not just the loss of my child but the loss of my relationship, my innocence, plus my loss of my status as the golden child in my family. Just one of those losses is significant. I had them all at the same time!

In a moment of reflective poetry Sylvia wrote the following.

They said we would forget each other

Another would be your mother

Someone more worthy

More responsible

They said I would forget the pain

Of you torn from my body

Torn from my world

We did not forget you and I

We remembered that we were once one

Your memory sent you searching

Our souls remember our bodies remember

When we were one

We could not forget

And Josée, who is hopeful for an imminent reunion states

Well, I think that the current stage I am at is that of bursting the abscess and dealing with all the repressed stuff. It is important that I work through all those feelings and sort them out because I might be reunited with Julie quite soon.

As for me, I live every day of my life remembering the trauma that my adoption experience and the loss of my daughter has caused me. In reunion I have begun to heal but appreciate that a wound so deep will never heal completely and that even if it does, there will always be a scar. Adoption has permeated every aspect and dimension of my life and being. It would be easy to become mired in bitterness and resentment and sometimes I have to watch my level of anger and frustration when I see that things are not progressing and changing fast enough or people just don't seem to "get it." I have survived by finally having the courage to come out of the closet and in my own way, and in my own words, try to help people understand what it is like to lose a child through adoption. It is a hard job. It is a job which takes me on a journey of challenge and obstacles, but it is a journey that I feel I must take.

The dedication in the book Traumatic Stress (1996) states:

This book is dedicated to Nelson Mandela and all those who, after having been hurt, work on transforming the trauma of others, rather than seeking oblivion or revenge.

I hope that the trauma of adoption that I and others have experienced can be transformed today and in the future into positive change in adoption practise. I have faith and hope that our society will eventually face and reveal all the truths in adoption. My own search for meaning in my experience as a birth mother has brought me closer to the inner knowing that I have had about adoption from the beginning of my pregnancy. Facing the truth, rather than denying or ignoring it, has had a profound positive influence and effect on my life.

You never find yourself until you face the truth.

~ Pearl Bailey ~

REFERENCES

- Atwood, M. (1985). The handmaid's tale. Toronto, ON: McClelland & Stewart.
- Baran, A., Pannor, R., & Sorosky, A. D. (1977). The lingering pain of surrendering a child. Psychology Today, 11(1), 58-60, 88.
- Bergum, V. (1997). A child on her mind: The experience of becoming a mother. Westport, CT: Bergin & Garvey.
- Bloch-Jones, M. (1993). Birthmothers: women who have relinquished babies for adoption tell their stories. Chicago: Chicago Review Press
- Carlini, H. (1992). Birth mother trauma: A counselling guide for birth mothers. Toronto: Morning Side Publishing.
- Cocozzelli, C. (1989). Predicting the decision of biological mothers to retain or relinquish their babies for adoption: Implications for open placement. Child Welfare, LXVIII(1), 33-44.
- Deykin, E. Y., Campbell, L., & Patti, P. (1984). The postadoption experience of surrendering parents. American Journal of Orthopsychiatry, 54(2), 271-280.
- Douglass, B. G., & Moustakas, C. (1985). Heuristic inquiry: The internal search to know. Journal of Humanistic Psychology, 25(3), 39-55.
- Estes, C. P. (1992). Women who run with the wolves: Myths and stories of the wild woman archetype. New York: Ballantine Books.
- Festinger, T. B. (1971). Unwed mothers and their decision to keep or surrender children. Child Welfare, L(5), 253-263.

- Firestone, S. (1970). The dialectic of sex: The case for feminist revolution. New York: Bantam.
- Friedman, H. L. (1975). Why are they keeping their babies? Social Work, July (1975), 322-323.
- Galinsky, M. J., Schopler, J. H., & Abell, M. D. (1997). Connecting group members through telephone and computer groups. Health & Social Work, 22(3) 181-188.
- Goffman, E. (1963). Stigma: Notes on the management of spoiled identity. Englewood Cliffs, NJ: Prentice-Hall.
- Grow, L. J. (1979). Today's unmarried mothers: The choices have changed. Child Welfare, IVIII(6), 363-371.
- Hawthorne, N. (1948). The scarlet letter. New York: Washington Square.
- Inglis, K. (1984). Living mistakes: Mothers who consented to adoption. Boston: George Allen & Unwin.
- Jackson, M. (1996). New-born child murder: Women, illegitimacy and the courts in eighteenth-century England. Manchester, England: Manchester University Press.
- Kallen, D. J., Griffiore, R. J., Popovich, S., & Powell, V. (1990). Adolescent mothers and their mothers view of adoption. Family Relations, 39(3), 311-216.
- Kaplan, S., & Silverstein, D. (1996). Seven core issues of adoption. Proceedings of The Forget Me–Not Adoption Conference. Vancouver, B.C.
- Kelman, S. (1998). All in the family: A cultural history of family life. New York: Viking.

Kirk, D. (1964). Shared fate: A theory of adoption and mental health. New York: Collier-Macmillan.

Kruger, L. J., & Struzziero, J. (1997). Computer-mediated peer support of consultation: Case description and evaluation. Journal of Educational and Psychological Consultations, 8(1), 75-90.

Lakoff, R. (1975). Language and woman's place. New York: Harper Colophon Books.

Laws, J. L., & Schwartz, P. (1977). Sexual scripts: The social construction of female sexuality. Washington, DC: University Press of America.

Leynes, C. (1980). Keep or adopt: A study of factors influencing pregnant adolescents' plan for their babies. Child Psychiatry and Human Development, 11(2), 105-112.

Lifton, B. J. (1988). Lost and found: The adoption experience. New York: Harper & Row.

McAdoo, L. L. (1992). Birth mothers: The forgotten link of the adoption triangle. Unpublished doctoral dissertation, University of New Mexico.

Millen, L., & Roll, S. (1985). Solomon's mothers: A special case of pathological bereavement. American Journal of Orthopsychiatry, 55(3), 411-418.

Pannor, R., Baran, A., & Sorosky, A. D. (1978). Birth parents who relinquished babies for adoption revisited. Family Process, 17, 329-337.

Petrie, A. (1998). Gone to an aunt's. Toronto: McClelland & Stewart.

Resnick, M. D., Blum, R. W., Bose, J., Smith, M., & Toogood, R. (1990). Characteristics of unmarried adolescent mothers: Determinants of child rearing versus adoption. American Journal of Orthopsychiatry, 60(4), 577-584.

Rynearson, E. K., (1981). Relinquishment and its maternal complications: A preliminary study. American Journal of Psychiatry, 139(3), 338-340.

Sachdev, P. (1981). Abortion, readings and research. Toronto: Butterworths.

Schaefer, C. (1992). The other mother. New York: Soho.

Schuf, E. M. (1984). Labelling women deviant: Gender, stigma, and social control. Philadelphia: Temple University Press.

Silverman, P. R. (1981). Helping women cope with grief. Beverly Hills, CA: Sage Publications.

Sorosky, A. D., Baran, A., & Pannor, R. (1984). The adoption triangle: Sealed or opened records: How they affect adoptees, birth parents, and adoptive parents. Garden City, NY: Anchor Press/Doubleday.

van de Kolk, B. A., McFarlane, A. C., Weisaeth, L. (1996). Traumatic stress: The effects of overwhelming experience on mind, body, and society. New York: Guilford Press.

Watson, K. W. (1986). Birth parents: Living with the adoption decision. Public Welfare, 44(2), 5-10.

Watson, K. W. (May, 1995). The future of adoption. Paper presented at the Canadian Adoption Council Conference, Calgary, AB.

Weinberg, N., Schmale, J., Uken, J. & Wessel, K. (1996). Online help, Cancer patients participate in a computer-mediated support group. Health and Social Work, 21(1) 24-29.

Weinreb, M. L. (1991). The psychological experience of women who surrender babies for adoption (birth mothers). Unpublished doctoral dissertation. Boston University.

Weinreb, M. L., & Murphy, B. C. (1988). The birth mother: A feminist perspective for the helping professional. Women & Therapy, 7(1), 23-37.

Winkler, R., & Van Keppel, M. (1984). Relinquishing mothers in adoption: Their long-term adjustment (Institute of Family Studies Monograph No. 3). Melbourne, Australia.

Yelloly, M. A. (1965). Factors relating to an adoption decision by the mothers of illegitimate infants. The Sociological Review, 13(1), 5-14.

Young, L. (1954). Out of wedlock. New York: McGraw-Hill.

Young, I. M. (1990). Justice and the politics of difference. Princeton, NJ: Princeton University Press.

Zimmerman, D. P. (1987). A psycho social comparison of computer-mediated and face-to-face language use among severely disturbed adolescents. Adolescence, 22(88), 828-839.

APPENDIX

Letter of Understanding and Consent

146 Laval Court

Lethbridge, AB T1K 4G3

January 10, 1998

Dear potential research participants,

Please consider being a part of the research project that I am conducting called “Birth mothers: The silence of the lambs”. The purpose of this study is to conduct an inquiry into the nature of the lived experience of women who surrendered a baby for adoption in the closed adoption system. I anticipate that you and others will benefit from participation in this study by having an opportunity to discuss and learn from each other what it was like to live in an era where social justice was not considered when it came to dealing with women who had babies outside of marriage. To learn and hear about a seldom discussed issue from the perspective of the birth mother is the aim of this research. We will also identify key examples of oppression experienced by these women and the outcomes of that oppression in their lives. The findings of this study have implications for adoption practise today and in the future.

Using the Internet as a communication device in the form of computer mediated communication (CMC), women involved in the study will be given the opportunity to discuss

their lived experience after receiving questions and feedback from the researcher. The focus of the inquiry will be based on the work of I. Marion Young and her theory of social justice. The discourse will take place over a three week period between the researcher and the women on an individual basis. No fewer than three and no more than five women will participate. No real names will be disclosed by the researcher at any time and no messages will be read by others without the expressed permission of the individual involved. If the group or certain individuals wish to speak to each other, that will be accomplished with their permission only. I would hope that you will agree to participate in this study. If at any time you wish to leave the study you may do so. I hope that we could discuss your reasons for doing so in advance of your leaving. At no time will your name or any identifying information be released about you without your written permission. All efforts to keep our “conversations” confidential will be taken. In reporting the results of the study, again, no individual will be identified and results will be reported in summary only.

If you choose to participate, please indicate your willingness to do so by signing the attached form and returning it to me at the above address.

If you have concerns that must be addressed by university personnel you can contact my project advisor, Dr. Cynthia Chambers, by e-mailing her at the following address: chambers@uleth.ca . You can also contact Dr. Richard Butt, Chair of the Faculty of Education Human Subject Research Committee, University of Lethbridge, by telephone (403) 329-2434 or at butt@uleth.ca .

I very much appreciate your assistance in this study. If you have any questions please

feel free to contact me via e-mail or by telephone at (403) 381-1889.

Sincerely,

Kathy Lewis

Master's of Education Student - University of Lethbridge

Consent Form

Name of Project – Birth Mothers: The Silence of the Lambs

I, _____, agree to participate in this study.

Name

Signature

Date

January 26, 1999

Dear

Thanks for being patient with me as I get participants organized for my study. I had over 50 women who wanted to participate. I was overwhelmed with the response and interest. What I have had to do is randomly choose from those who applied to participate. Presently, I have narrowed the field to 10 women; eventually I will narrow the number to 5. I thought that I would give you my guidelines for my expectations for participant and my involvement before you totally commit to participate.

First, let's go through what you can expect of me:

1. I will be open and honest with you at all times about what I am doing, who I am as a birth mother and what the intents and purposes of the research are. "What you see is what you get!"
 2. Your confidentiality will be protected. I will not share your electronic mail messages that you write to me or those that I write to you with anyone. When I write up my findings I will use quoted excerpts from our correspondence and will use a pseudonym for you as you choose.
 3. You can expect me to reply to your messages within 24-48 hours of receiving them.
- Length of my messages to you will probably vary.

4. We will probably converse daily or at least every two days during a three week period of time. We will discuss your adoption experience as well as mine.

Now, what I will expect of you:

1. I anticipate that you will be open and honest with me about your experiences and feelings as a birth mother. You can share at whatever level you would like, as long as your story is yours as you remember it and lived it.

2. I hope that you will keep our correspondence confidential and that you have respect for my writings to you. Trust between us is of primary importance.

3. Your time commitment to the study will be for a three week period. After that I will write my paper and will give you a copy of the final product when completed.

4. I hope that you have supportive people in your environment. If our conversations trigger a need in you to seek counselling and support for your feelings and emotions, I trust that you will do so. You will need to look after yourself.

5. You will sign and return the consent form to me (see attachment) at:

Kathy Lewis

146 Laval Court

Lethbridge, AB

T1K 4G3

6. No telephone conversations will be held between us until the study is completed, unless it is of an urgent matter.

7. Your computer must be equipped at a level that will handle e-mails, photos and attachments.

Can you think of anything I missed? If you are still interested in participating please let me know so that we can get started. If all ten of you are still interested then I will randomly select once again. Sorry about the delay in getting going but I must be certain that I've covered all the bases with you!

I hope to hear from you soon regarding your final agreement to participate.

Sincerely,

Kathy Lewis

P.S. Please see attachments for further clarification.