Betwixt and Between

An exploration of adoption reunion realities following New Zealand non-Maori adoptions, from a psychodynamic perspective

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Abstract

The aim of this paper is to help therapists to increase their understanding of the powerful psychological underpinnings of adoption reunions. It outlines significant psychological and interactional issues for people searching and engaged in reunion as they attempt to weave new relationships with one another against the background of their genetic, adoptive and relinquishment histories. Altering expectations and relinquishing long-held fantasies can be a very difficult task for all members of the adoption triangle. The paper argues that a lack of psychological understanding of adoption realities, combined with superficial therapeutic practice in supporting those involved in reunions, have been significant factors in many unsatisfactory reunion outcomes in New Zealand.

Definition of terms

"Adoptee" or sometimes "adopted person", has been used to describe the child, or grown-up adult, who was relinquished at or around birth into a family where both parents were adoptive ones, in law.

"Birthparent" has been used through the paper for the genetic father or mother of a child (later an adult) relinquished at or around birth for legal adoption. "Biological" or "natural" parent are other terms for this, but they have not been used in the paper.

"Adoptive parent" describes the legal father and mother of children adopted out, at or around birth, by people who wanted to legally relinquish their child.
The "adoption triangle" means the three people in the above three positions. "Triad members" has also been used to refer to people in those three positions. I have also used "protagonists", and "parties" to designate the people from all three positions.

Introduction
Lifton began her book on adoption by quoting from J. M. Barrie's *Peter Pan in Kensington Gardens*

"Then I shan't be exactly human?" Peter asked.
"No."
"What shall I be?"
"You will be Betwixt and Between", Solomon said, and certainly he was a wise old fellow, for that is exactly how it turned out (Lifton: 1994: 3).

Lifton was using this notion of "betwixt and between" to highlight an important truth about adoption: the ambivalent position of people involved in adoption and also in the reunion of those separated by adoption. I will develop the meaning of being "betwixt and between" as my paper proceeds.

Adoption is almost always a somewhat stressful experience, whether this is recognised or not. Significant psychological losses have invariably been sustained by each triad member. The adopted person has lost personal genealogy, knowledge of biological roots and often the right to enquire about the past and discuss it with those closest to him/her. Verrier (1994) argues persuasively that early separation of the adopted infant from the previously familiar life *in utero* is a significant trauma with psychological consequences for life. Birthmothers have suffered a profoundly traumatic loss in the relinquishment of their child, the effects of which are invariably "negative and long-lasting" (Winkler & van Keppel, quoted in Weaver: 1999: 47). Adoptive parents have often suffered painful losses through infertility which have left them feeling "defective, different, depressed and disappointed in themselves and each other" (Blum, quoted in Brodzinsky & Schechter: 1990: 53).

I believe that the needs of the adopted person should be given priority over the needs of birth parents and adoptive parents, and over social and legal expediency. It is obvious that birth and adoptive parents had a relatively developed 'self' before their adoption loss occurred, whereas the adopted person had no other 'self' at all to draw on before the relinquishment occurred. It is also clear that the powerlessness of the adopted person's birth circumstances leave him/her in a more compromised position than the other two parties.
A feature of interest to clinicians working with the main protagonists in adoption—adopted people, birth parents and adoptive parents—is that often the protagonists themselves are not fully aware of their own deeper psychological issues. Brinich has stated that “adoption imposes certain psychological stresses on each of its participants ... which are connected inextricably with some of the most basic human impulses: sexuality and aggression, procreation and rivalry” (Brinich, quoted in Brodzinsky & Schechter: 1990: 43). The common psychological scars they bear are the traumata from significant unresolved losses, mild and chronic post-traumatic stress disorder, dissociative states, repression, avoidance, denial, projection, splitting, depression and even suicidal ideation.

The most important issue to be worked with clinically is nearly always grief over the substantial losses associated with adoption. Further psychological losses become apparent in the process of reunion, as poorly resolved difficulties re-emerge with a different focus. Many dreams and fantasies must be devastatingly reshaped as the reunion protagonists get to know each other in reality. Coming face to face with the person who was lost, and discovering that he/she is a stranger in some ways, in spite of genetic similarities, can be a deep shock. Working through the challenging encounters in the reunion process requires honesty, maturity and courage.

Adoption in New Zealand

In New Zealand there were 2617 applications for adoption in 1968. This was the highest number ever recorded. It is now estimated that 3.2% of the New Zealand population are adopted, and that about 16% of New Zealanders are triad members, or are closely related to triad members. Thus, large numbers of New Zealand people have been, and continue to be, affected by adoption issues. Weaver noted that New Zealand “still has by far the largest number of adoptions in the western world” (1999: 147).

“Closed” adoption of Pakeha babies has been practised in New Zealand from 1955—when the Adoption Act we still use came into force—until the present day. This Act sealed off the records of children being relinquished for adoption by their birthparents. When the 1955 Act was passed it was never envisaged that another Act would later take its place. In 1985, however, with the passing of the Adult Adoption Information Act, reunions of adopted people and their birthparents became legally possible. (They had been possible before that time if people could find each other without ‘official’ help.) Since 1985, staff of the
adoption department of Social Welfare (now Child, Youth and Family Service) have been mandated to assist adult adoptees to find the whereabouts of their birthmother and to help birthmothers to locate the present whereabouts of their relinquished son or daughter.

Adoptees over 20 years of age can get the name of their birthmother on their original birth certificate from the Registrar of Births, Deaths and Marriages, provided no ‘veto’ has been placed. Birthparents can receive the name of their relinquished child through the Adoption Information and Services Unit of the Child, Youth and Family Service. In 1998 Iwanek reported that “about 65% of people who can, under the 1985 Act, make contact with each other, have done so. 95% of this group has gone on to meet face to face” (Iwanek, quoted in Weaver: 1999: 14).

Effects and defects of adoption law

Adoptive parents, birthfathers, birth siblings and birth grandparents, though they might have had integral psychological input into the reunion, were not included in the provisions of the 1985 Act. It was disappointing that more effort was not made, statutorily, to help all people involved to understand the reasons for some form of early inclusion of adoptive parents and other emotionally significant relatives in the reunion process. Sometimes adoptive parents know nothing about a reunion application made by their son or daughter, as they are legally excluded from the situation unless the adoptee wishes them to be informed. This was unfortunate in the light of psychological knowledge as well as clinical experience which help us to know that the adoptive parents are the primary “introjects” in the adoptee’s psyche (Hamilton: 1988; Stein & Hoopes cited in Brodzinsky and Schechter: 1990: 162).

Many birthparents and adoptive parents who had thought that their decisions about relinquishment or construction of new families were decisions for life, have felt shocked and betrayed to receive an enquiry from someone who has managed to track them down. Preparation for only one person in the reunion has been common, and sometimes even this has not happened either. The person searched for has often received no professional support of any kind. Betty-Ann Kelly, in her study of New Zealand birthmothers after reunion, found that they had had “considerable frustration in obtaining consistently good services” (1998: 26). The most significant information 46% of the birthmothers wanted the government to be aware of was the need for “free, well-advertised counselling” (p. 31). There were also reports in Kelly’s study
of the lack of helpfulness from counsellors they had consulted because of “no adoption knowledge” (p. 26).

The 1985 law gave the adopted person a small advantage by requiring him/her to be briefed by a Justice Department appointed counsellor to receive his/her original birth certificate. However, many adoptees—with some justification—saw this simply as a further intrusion into their lives, another way the law infantilised them. But at least it gave adoptees the choice of using professional help if they felt they needed it. In this they were more fortunate than many birthparents, adoptive parents and the extended family of triad members, who largely missed out on professional help.

In the early days of the 1985 Act, Departmental social workers were extremely pressured by the high number of adopted people and birthparents coming forward to start a search for their lost relation. In addition, Departmental staff were not briefed in understanding the deeper emotional and psychological issues which underpinned their clients’ searching behaviours. Social workers were trained to be information-bearers only and were instructed not to exhibit any emotional response lest they inadvertently sway their clients’ decisions about reunion. Trauma therapists have now learned that clients who have self-disclosing, empathic practitioners reach their therapeutic goals more successfully (Dalenberg: 1998; Van der Kolk: 1996).

In 1985, however, a reserved, impersonal approach was preferred by social workers, and also by some therapists. Many social workers did not understand their clients’ use of unconscious defence systems to help them cope with the pain of adoption wounds. People pursuing an adoption search were often treated fairly casually. This probably happened partly because of the way adopted people presented their requests, with unconscious denial and minimization of their emotional responses. Searching adoptees were also often determined to be in control of their own searching process. This was an understandable defence to counter their powerlessness about their adopted status at birth. It meant, however, that many adopted people waived any professional help.

There also seems to have been a dearth of therapists trained and specialising in the adoption area. The Adoption Information and Services Unit of the Child, Youth and Family Service has only recently employed counsellors, and they are currently only available from selected offices. Another problem has been that if private agencies are helping, some form of funding is usually needed. People with adoption or reunion issues have often been encouraged to attend adoption
support groups, where people from all sorts of situations told their stories of anguish and occasional delight to strangers, who were themselves often so preoccupied with their own pressing personal issues that they found it difficult to listen and respond to the other person's passionate story. While some found these support groups helpful, many wanted "to work in a focused ongoing way on issues, and thus concluded that support groups were not sufficient on their own" (Kelly: 1998: 31).

Overall, a "she'll be right" mentality has been encouraged by busy Departmental staff, and an institutional rationalisation has supported the view that autonomous searching without help would increase the searcher's chances of being successful. While empowering people and personalising tasks leads to more satisfaction for the person undertaking the action, lack of psychological preparation lessens the adoptee's chances of gaining a longer-term positive reunion relationship. Often futile attempts at reunion have occurred with little understanding of the other person's feelings, and many, sadly, have been aborted in confusion.

Adoption myths

It seems now that while the 1985 Act was enterprising and innovative in some ways, not enough research into the psychological challenges of adoption was undertaken before its inception. Many of the principles and assumptions of the 1955 Act were left virtually untouched in the 1985 Act. Some of the myths—ideas "widely held and yet untrue or unproven" (Collins: 1998)—that surround closed adoption and adoption reunions have been maintained and propagated both by the 1955 and 1985 legislation and by adoption authorities. They have become disseminated into popular belief systems.

Widely accepted adoption myths hold that:

- adopted people do not need to know about their biological heritage;
- adopted children are just the same as children born to non-adoptive parents;
- birthfathers do not really exist or matter;
- birthparents will carry on their lives happily after the relinquishment of their child, as if the child never existed;
- relatives of the adopted person should carry on as if the relinquishment had never happened;
- secrets like this in families' lives are acceptable; and
• it is acceptable for the courts and adoptions authorities to perpetuate "legal fiction" about the child's birth in Adoption Orders (Griffith: 2000: 23).

Perhaps the most surprising myth of all, however, is that now coming to light about reunion. According to this myth it is acceptable for an adult adopted person, with trepidation, curiosity and much ambivalence, and a birthparent who may well have all but deleted the birthing experience from her memory, to be given each other’s phone number and address, in small-town New Zealand, often with little preparation, help or therapeutic support in the process, resulting in perhaps a one-off encounter with each other. After this it is expected that both parties will carry on as usual in their lives, as if the meeting had been of some interest but little longer-term consequence for themselves or anyone else. An important part of this widely held myth is that the reunion contact is likely to be completed at the first encounter, because it is believed that what most people want is merely to satisfy their own curiosity about themselves and/or the other person.

Research in Australia indicates high levels of satisfaction about the initial part of reunion (Cowell, Crow, & Wilson: 1996). Ninety-nine percent of the subjects in this outcome study indicated that they did not regret having the opportunity for a reunion. My own findings from clinical and personal experience, however, about people who are well into the reunion process, is that many have become hurt, puzzled, confused and unhappy about the outcomes that arise over time. In reunion relationships simple communications can be misinterpreted and misunderstood. People often talk past each other and avoid addressing day-to-day misunderstandings, because of the deeper psychological forces that are impacting on their own and the other person’s life, and because of the insecurity inherent in new relationships.

Societal ignorance and lack of acknowledgment of the enormous affectual lability which adoptees and birth parents often undergo in reunions contribute to the difficulties in reunions over time. The tumultuous surges of feeling which we now understand are normal responses to contemplating, entering and participating in the reunion process, are still not widely enough recognised. Verrier states that:

Reunions are very emotional. I have heard some birth mothers say that the reunion was perfect and that they have a wonderful relationship with their child, and I have held others as they cried and said that their child doesn’t care and never phones or even writes (1994: 167).
However, it is important to realise that we do not have enough hard data to be sure of basic empirical facts about long-term reunion outcomes.

**Reunion**

A successful outcome in reunion is defined as a situation when two people and some members of their families have the type of contact that both wish to have, in a time frame and at a frequency that is mutually acceptable. It is successful when the satisfaction in their relationship gives them some pleasure, even though there may still be some adjustment difficulties at times. But “Success” is when the people want to continue knowing each other, despite stresses in the relationships.

Reunions often result in psychological conflagrations with many different emotional peaks and valleys, and with people finding themselves in an unknown land where no-one seems to have maps. Situations often develop where people have to weave new ways of interacting with each other, while withstanding tough psychological onslaughts.

It is important to understand that the stages of reunion outlined further on are not discrete, and that they tend to overlap with one another significantly.

The whole reunion process, through its four stages, can take anything from two to ten or more years to undergo, depending on people’s pacing, their matching of each other’s rhythms, their motivation for the reunion, and their resolution of psychological issues, particularly their own traumatic adoption losses.

Other factors are:

- the insight people have into their projections onto the other person;
- their ability to communicate openly with one another;
- their ability to grieve their losses;
- their capacity to share and integrate new people into their family structure;
- their integrity, honesty, and generosity with the other person; and
- their psychological and social maturity.

An important factor in the progress of reunion is the attitudes of the people closest to the protagonists. Many a developing reunited relationship has foundered because some significant family member or friend has some unconscious projection from their own psyche, or from a previous encounter.
with an adoption experience, which inhibits their support of the person in reunion.

**Stages of reunion**

I have identified four stages in the reunion process, which have implications not just for one lifetime, but affect people in the next generations, and in the extended families of all those in the adoption triad. I have called them:

1) Searching  
2) Meeting  
3) Reality  
4) Integration

**Searching**

There are many factors that lead some people to want to seek out their biological relations in real life, and become “searchers”. Some wish to search from childhood. Others have no interest in searching, or vehemently resist the idea: these may instead become the people who are “searched for”.

In their outcome study on reunion, Cowell et al. (1996) found some interesting differences between people who searched and people who were “found”. Those who experienced more satisfaction in reunion appeared to be those who were “found” — perhaps because the disparity between the expectations and the reality of the “found” group was lower than that in the “searchers” group. The conscious or unconscious dynamics of people who begin the search may also be correlated positively with more rigid defence systems, and thus more vivid projections onto the biological family. This may explain further the disappointments of the searching group noted by Cowell et al.

There are wide variations in initiating searching and also in continuing searching. However, one clear finding from research is that adopted people are not stimulated into searching primarily because they come from troubled adoptive families.

Research indicates that adopted people, especially women, usually want to know about their roots simply because of curiosity. Schechter and Bertocci write that the search helps the adoptee

repair a sense of loss, relieve the sense of disadvantage, consolidate identity issues including body image and sexual identity, resolve cognitive
dissonances, internalize the locus of control, and satisfy the most fundamental need to experience human connectedness (cited in Brodzinsky & Schechter: 1990: 89).

There is some evidence that the majority of adopted teenagers, in the earlier stage of adolescence, become curious about their roots. Joyce Pavao hypothesized that

Although all families and individuals go through developmental stages, the special circumstances that adoption creates add issues and complexity to the process of development. These issues are normal and healthy under the circumstances that surrender and adoption create (1997).

Other triggers for adoptees beginning a search, in addition to curiosity about themselves, are the death of an adoptive parent, getting older (into their 20s or 30s), or having children of their own.

However, adoptees as a group have high sensitivity to the covert wishes of their adoptive parents. This is a common significant psychological characteristic of adopted people—that they often try to “please” people in their significant relationships, to their own emotional detriment. The “pleaser driver” is an important constraint preventing some adopted people starting to search for their biological parents.

Adopted people have other psychological vulnerabilities which make reunions difficult to contemplate. Many have major fears about being abandoned and/or rejected again. Many also have a need for firm controls over their own life situations, given their powerlessness in the face of some things non-adopted people take for granted, for instance their loss of genealogy.

Other psychological characteristics adoptees commonly display are:

• difficulty round terminations of all kinds;
• lower tolerance of frustration in new enterprises;
• a tendency to “shoot themselves in the foot”, often in catastrophic ways, unconsciously inviting their close ones to offer support;
• high loyalty to close friends and family; and often
• a deep identification with people who are hurt and oppressed.

All these factors may inhibit adoptees from searching, or from taking the next step in reunion with their birth mothers.
The impetus for many birthparents to search for the adoptee is often the knowledge of the adoptee's growing maturity, and sometimes a change in their own social circumstances, such as the loss of a hostile partner.

Adoptive parents may be driven to search by a desire for accurate answers to their child's questioning, and a wish to help their child or young person become more psychologically whole, particularly if their youngster is an adolescent, and is having problems. Health questions may also be a reason for beginning to make enquiries.

An important point was raised by Brinich. He suggested that the lost (fantasised) relationship “must be mourned before the new (real, adoptive) relationships can flourish” (cited in Brodzinsky & Schechter: 1990: 47). For psychologically healthy outcomes all triad members should, at least in part, have addressed their losses and grieved over them before the reunion starts.

Meeting

The “meeting” stage, which may also be termed the “honeymoon” stage, begins when the adopted person and the birthparent, and possibly their partners/families, meet together for the first time. Meetings of people in the “honeymoon” stage have attracted media coverage because of their human interest. Many highlight the “sunny side” of adoption and tend to gloss over the more difficult aspects, which then perpetuate the earlier adoption myths. People's attempts to be in reunion become fascinating to many television viewers and magazine readers.

The “honeymoon” stage usually has a short intense life, and is notable for its euphoric qualities. However although many people do experience extreme delight and heightened satisfaction, often accompanied by high and low moods in quick succession, it must be remembered that there are some reunion participants who appear to be only minimally emotionally affected—for a variety of reasons.

After the first reunion connection, however, most people do notice an improvement in their daily satisfaction with life, once the initial emotional turbulence is over. Whilst there are some exceptions, research on birthmothers after reunion has shown that usually their mental health improves following reunion, no matter how poorly the reunion progresses. Field's New Zealand study on birthmothers in reunion yielded a conclusion that “the feelings of enhanced psychological wellbeing... were widespread” (1999: 241).
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_Reality_

After a short or long time the third stage, the 'reality-testing' stage, starts. The contact may begin with the first encounter, which is often when a strange adult who looks like the adopted person, (but who has different values and beliefs because her life has taken a different turn from the adoptee's after she relinquished the child), phones the adoptee asking for a letter, a photo, or contact, or when an adult stranger who looks like a young ex-lover walks in off the street with no introduction or preparation. Adoptive parents may find that their adopted adult/child has already met a stranger and her family secretly, and experience their son's or daughter's attitude as subtly colder and more critical towards them.

In this stage of the reunion the protagonists start to get to know not only the positive aspects of the other person, and their family, but also some of their more negative characteristics, including their vulnerabilities and their less adapted aspects. It must be emphasized that some people never reach this point. They let go of the reunion at one or other of the earlier stages, feeling disappointed, sad or angry about the brief encounter they have had with each other. Others feel satisfied with what they have achieved, but decide to finish off at an early point, not wanting to take the contact further.

However if people do decide to continue their association, assertive encountering of each other is often needed, with a generous spirit about differences. It is often difficult for people to be open with each other, because many people find their new relationships have a fragile quality on account of present strangeness, and past rejections and losses. Often people need to forgive one another for old and current rejections and sensitivities. This, of course, is no mean feat.

A point for clinicians and others to note is that people often mistakenly assume that the other protagonist is coming from a similar psychological position to themselves, because their euphoric experience appears the same as the other person's at the beginning of the "honeymoon" stage. However, it must be remembered that the adoptee is looking for another way to gain psychological integration inside himself/herself, whilst the birthparent is wanting to resolve the deep loss of the relinquished person.

These different agendas and aspirations usually become clearer as time goes on, but they are a factor in many people feeling scattered emotionally and sometimes rejected during the early part of a reunion. They are significant in the problems around delays and pacing which are frequently reported, and they are probably a reason for reunions failing to move to the next stage.
**Integration**

The fourth stage is reached when people accept one another and their families, on the whole. They then find a way to meet with one another in a way that gives mutual satisfaction. At this stage, too, some people lose interest in each other, or decide to maintain a liaison only with selected family members.

Reunions, like anything else in life, can go well or badly. The outcomes can be successful for the seeker and for the sought, over time, or not. In my clinical and personal experience reunions go best when:

- people are psychologically prepared, with real opportunities to get help both in individual therapy if they wish and also in support groups;
- people are accepting of the different timings desired by each individual in the reunion;
- people understand and are sensitive to the significance of birth order roles, and to the difficulties that changes in these entail for other members in the reunited families;
- adopted people and birthparents are not deceived by their seemingly similar “honeymoon” presentations, but realise that underneath, the two parties are coming from psychologically different places;
- adoptive parents’ perspectives are taken into account;
- careful attention is given in the process of getting to know each other to the task of “mirroring” each other. As the infant is mirrored and mirrors back his/her mother’s gaze, so reunion participants need to engage in looking, gazing, touching, listening, speaking, comparing, getting to love, getting to hate, and becoming real with each other;
- when the main protagonists make a point in the beginning of spending quality time with one another—possibly with partners, to mitigate against GSA/AIR (see page 118)—so they can get to know each other better before other relatives are introduced;
- it is understood that the different parties may need some time—months, perhaps years—to have space from one another and integrate the new relationships. Pacing is important in the process of getting to know one another. Unfortunately there can be a temptation in the early times to rush the process too much, without enough honest checking out of comfort levels with one another;
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- it is remembered that all reunions go through minor and sometimes major disjunctions at different points; and
- generosity and toleration of difference prevail as much as possible.

Therapists and friends who are aware of and sensitive to the complexity of the psychological issues in adoption and in reunion are invaluable to the process.

As adolescence is an opportunity to rework the developmental psychosocial crises of the preschool stage of a child (Erikson, cited in Brodzinsky & Schechter: 1990: 145), reunion is another chance to rework the psychological issues of earlier times, and reach more integrated, more human, more satisfying outcomes. It is a chance to attain more therapeutic resolutions of earlier dysfunctional psychological processes.

Clinical issues for therapists working with clients in reunion

As helping practitioners, we have a professional responsibility to know something about the well-developed psychological dynamics present for people in the adoption triangle, even before reunion takes place.

Reunion and ambivalence

Brinich (1986, cited in Brodzinsky & Schechter: 1990: 47) noted that Freud emphasized that mourning is especially difficult if “the relationship to be mourned is an ambivalent one”. Brinich went on to observe that many resolutions of internal psychic conflict (in the triad members) develop in ways “which keep feelings of love and hate apart, with one set of feelings reserved for one point of the triad, and another set reserved for the other point” (p. 47).

Thus “splitting” (Hamilton: 1988: 76) is a common defence used by all triad members. The adopted child particularly often defensively projects his negative emotions onto the ‘bad’ fantasized biological parents.

Evidence about adoptees suggests that fantasizing about their biological family is maintained by the majority of adoptees. It is often kept secret because of subtle societal and parental inhibitions. It seems to be flourishing by the time the adopted children reach latency age, and helps the child to “tolerate ambivalent feelings towards parental figures, and leads them to ameliorate real or imagined disappointments within the parental relationship by imagining something better” (Hoopes: 1982, cited in Brodzinsky & Schechter: 1990: 152).
Hartman and Laird noted that “adopted children piece their stories together from many sources, a little factual information, a chance remark, stories they have heard from others and their own fantasies” (1983, cited in Brodzinsky & Schechter: 1990: 231).

Moreover, if adoptive parents give critical or subtly hostile messages about the adoptee’s biological parentage, the adoptee’s projections onto the birth parents are likely to be more intense. These unconscious negative ideas about the birth parents have a detrimental effect on the adoptee’s developing sense of identity. Frisk (1964, cited in Brodzinsky & Schechter: 1990: 164) reported that adolescent adoptees interpreted unfavourable reports about birth parents “as proof of their own genetic inferiority”. However, it must be realised that the projection of fantasies onto biological parents seems to occur as a normal feature for adopted children, no matter what sort of views adoptive parents hold.

Interestingly, my own clinical work with young adoptees has led me to observe that, though many children may have fantasised prolifically about their birth family at latency age, by later adolescence most adopted people seem to be using psychological introjects modelled on their adoptive parents, and fantasies about birth families have receded in significance in their day-to-day lives.

A study by Stein and Hoopes reported a similar finding. “None of the [18 year old] adoptees included their biological parents either spontaneously nor on suggestion from the researcher... in an imagined life space” (1985, cited in Brodzinsky & Schechter: 1990: 162).

Sants (1964, cited in Brodzinsky & Schechter: 1990: 152) highlighted a further point that is significant for adopted people and particularly pertinent to the reunion process. The author coined a term “genealogical bewilderment”, which he noted many adopted subjects seemed to suffer from. It was described as an emotional uncertainty and confusion that adopted children seem to experience, from the loss of forbears and from having no way of getting knowledge about them.

Kaye found that “a strong sense of self is inseparable from a sense of belonging” (1982, cited in Brodzinsky & Schechter: 1990: 142). Winnicott too, propounded the concept of the “holding environment” being important for the development of an integrated self (1965, cited in Brodzinsky & Schechter: 1990: 142). An adoptee who searched told a researcher that she hoped “to find a person that looks like me and who looks at life the way I do” (Brodzinsky & Schechter: 1990: 115).
1990: 89). This statement underlines the deep longing many adoptees have, to know people who have physical and psychological qualities like themselves.

**Transference**

It is crucial for therapists to be aware of their countertransference responses to the powerful primal material that may come into the session from the client's subtle transferences. Lifton states “Many professionals are in the same denial as the rest of society about the adoptee's invisible connection to the invisible birth parents” (1994: 261). Therapists who unconsciously side with the alienated “split-off” parts of their client’s psyche, or criticize a person or family in another triad position, are not helping their client work towards integration and resolution of differences. Many practitioners collude with denial and omit any reference to the adoptive parents, as the client and the law already have done. But it is important not to avoid mention of the adoptive parents, and to challenge gently the denial and splitting. It is also important to keep in mind that the adopted person’s mature projections are mostly based on the psychological input from the adoptive parents.

**Other therapeutic issues**

Other points for therapists to be aware of are:

- the importance of understanding the dynamics of coping with object loss;
- the importance of recognizing the underlying traumata, and working with clients' repressed and dissociated states. There is often an opportunity, once well engaged, to do grief work with parts of the early trauma that present themselves again in reunion, as well as to work through the adjustment difficulties in the present;
- the importance of managing ambivalence with skill;
- the need to help people to grieve the “loss of the imagined future as well as the loss of assumptions” Bowman (1997: 76);
- there is sometimes a need to work cathartically with primal rage, conflict about dependence, avoidance, revengeful feelings, regressed helplessness, and anxiety about terminations, if the client can be engaged well enough, and if their defence systems can be disarmed;
- there is sometimes a need to help with poorly resolved oedipal conflicts.

indicates that the progress of many adoptees through the oedipal stage may be impeded by dreaming that the fantasised biological parents might be better for them than their adoptive parents.

- the importance of helping adopted people particularly, and other triad members, in stabilising their identity and strengthening their ego systems;
- the need to consider a political and social analysis of adoption issues in New Zealand. Therapists need to understand about the subjugation that society's laws and practices have imposed on all three triad members, and be able to challenge sensitively the sexism inherent in these social structures, which has become subtly embedded in their clients' intrapsychic functioning. A useful book to read to understand the New Zealand adoption context is *A Question of Adoption* by Anne Else (1991).

**Psychological risks in reunion**

Some of the main psychological risks in reunion are:

- that a veto is in place so the reunion does not occur at all;
- that a veto is in place, but people find ways around it, and this creates a setback at the beginning of the reunion;
- that the first contact is so abrupt and shocking that unresolved traumata are triggered, and the parties do not meet at all, or perhaps only once briefly. This can affect them adversely for the rest of their lives;
- that after a few contacts the differences in people's beliefs and values become so significant that one party or both cut off contact;
- that a close relative or friend influences the main protagonist negatively over the reunion, so the relationship dies out in the early stages;
- that there is not enough opportunity to get to know each other well enough in small groups;
- that there is not enough honest communication to learn about the other person's non-adapted behaviour;
- that assumptions are made which do not get checked out. These lead, over time, to hurts and estrangements, and sometimes to complete disjunctions; and
that sexualised behaviour develops, which in time usually leads to long-term estrangement.

The issue of some adopted people not having been informed of their own adoption has also led to much heartache at reunion. Resultant feelings of betrayal by adoptive parents have been significant detractors from the adoptee's good mental health. Some people have seen it as an emotional advantage for the child not to know that their biological relatives even existed. These people argue that this removed the possibility of dual attachments, which was easier for the child to maintain psychologically (Brinich, cited in Brodzinsky & Schechter: 1990: 42). It also eliminated the chances of psychological splitting between parent figures, real or imagined.

Another significant problem that has emerged over time has been that the reunion process disturbs the equilibrium of the old family structures. A new person entering or leaving a family usually alters the roles that go with birth order, and this is linked to attachment issues, which are deeply entrenched in most families. Many adoptees find they are the oldest in their new biological family, and Oedipal envy, jealousy and sibling rivalry can abound in the reunion process.

**Genetic Sexual Attraction (GSA) or Attraction in Reunion (AIR)**

A significant issue for many people in the meeting or honeymoon stage of reunion is a sense of euphoria and feeling physically, sensually and/or sexually attracted to the other person. This can emerge in father/daughter dyads, mother/son dyads, sibling dyads, and also across the same genders, e.g. mother/daughter or father/son. These feelings of pleasurable sensual attraction to the other person have been reported in many reunion situations (see, for example, Fitsell: 1994; Gonyo: 1967). The widespread nature of the feelings of attraction, and hence the normalcy of the response for many people in the early stage of reunion, are confirmed by Greenberg (1993), Gonyo (1967), Fitsell (1994), Griffith (2000) and by the subjects in my own study (Nation: 1996). In 1993 I interviewed 12 reunited relatives. A high percentage of these subjects reported having been aware in themselves of being physically drawn to the other in the beginning of the new contact, when their emotions were volatile.

I know from my wider clinical practice that a small number of people do consummate these feelings of attraction in a full sexual relationship. Griffith reported that he had been contacted by people in reunion who were involved
with each other sexually. He wrote "Most were bewildered by the intensity of the relationship and the unique aspects unlike any other they had experienced" (Griffith: 2000: 93).

Griffith suggests that these relationships are neither safe nor healthy for the protagonists. Over the time I have been working as a therapist in the adoption field I have found the same. In nearly all reunion relationships where people have become fully sexual with each other, there is no satisfaction longer term. On the contrary, my experience has been that most genetically linked people in reunion who sexually consummate their relationship, end up being hurt, depressed and sometimes suicidal—often with one person in the dyad feeling more unhappy than the other. The reunion relationships normally break down as well, and the affair causes grief to the participants and to their close families.

Theorists have pondered this attraction in reunion. Gonyo (1967) first used the term "genetic sexual attraction", and Greenberg (1993) developed some hypotheses about it. Other people in adoption circles, and particularly the people in my study, preferred to name it "attraction in reunion" (AIR), to indicate how normal and frequent it is in these situations.

Greenberg noted that a reunion itself is "a highly abnormal situation". He highlighted in his paper that "the intensity and explosiveness of the feelings, and the sudden and almost irresistible sense of falling in love, was universal" (1993: 8).

The subjects in my study believed that AIR was a normal response to the other's physical presence after the trauma of the relinquishment of the lost infant, when the people in reunion as adults were mature in their physical and sexual development. They considered that it arose probably because of the loss of early chances to cuddle and fondle each other, and to engage in "mirroring", as parents and babies usually do. This is in my view a compelling explanation.

Dr Michael Stadter, (2000) an object relations theorist and therapist, describes a category of human psychological development delineated by Ogden and labelled "the autistic contiguous stage". This stage is a primitive psychological state which the infant experiences in the first few months and which focuses on rhythm, smell, and skin surface sensory pleasurings. Stadter observed that some of the clients in reunion that he interviewed "focused on how their relatives smelled. A number were struck by the quality of their relative's skin... they frequently felt a desire to touch, stroke or probe their birth relative..."
Stadter's ideas about the autistic contiguous stage may relate to this common reunion experience. The deprivation of shared sensory experiences between mother and child, may well be a sound explanation for AIR.

For the therapist, it is important to support intensively, and without judgmental criticism, any people who are already fully acting out their sexual feelings in reunion relationships.

If clients are still on the "edge" of this sort of situation, however, one way to assist them is to strengthen the older (or the more psychologically healthy) person's responsibility in the relationship. It is useful to invite both people to understand that the longer term prognosis in these sexualised unions is likely to be the destruction of the relationship. It is important that the therapist alerts clients to the emotional risks of pursuing a sexual path, and that he/she informs people before the reunion, if possible, that pleasurable sensual responses with each other in reunion are widespread, human, and normal. People need to be informed that explicitly sexual contact seems to bring about extreme psychological and family stress, and possibly the end of the relationship.

This phenomenon, and indeed longer-term reunion relationships generally, require much more research. Once again, if a therapist is dealing with this sort of problem it is essential that he/she examines his/her countertransferential responses to the clinical material, and makes full use of supervision.

Conclusion

In reunion, adopted people, birthparents, adoptive parents and their families discover they are "betwixt and between", and that family losses and anomalies continue down future generations. The most important task in reunion is for these "intimate strangers" to find a basis on which to trust one another, despite the differences in values and in the ways they have been brought up. This paper highlights ways to achieve partial resolutions.

D. H. Lawrence, though not writing about adoption issues, aptly evoked the generosity of spirit needed in reunion relationships.

Oh we've got to trust
one another again
in some essentials.
Not the narrow little bargaining trust
that says: I'm for you
if you'll be for me —
But a bigger trust,
a trust of the sun
that does not bother
about moth and rust,
and we see it shining
in one another.
(1950: 259)

References


