

Birthmothers: A Fresh Look at Post-Delivery Care

By Sharon Fox

There is a new opportunity to support birthmothers post-delivery. Historically the birthmother, who is the third critical component of the Adoption Triad of child, adoptive parent and birthmother, has often experienced passive treatment once the adoption has been completed. By incorporating after delivery, a three point educational program on grief recovery, revising outdated terminology, and understanding data on the teen brain and post-delivery brain function, adoption professionals can enable birthmothers to become emotionally healthy and impact society's perception of her value.

What is "grief" as it pertains to Birthmothers? Grief is neither a problem to be solved, nor a situation to be overcome. It is the natural response to the loss of something or someone we love. We must recognize and acknowledge grief as normal and appropriate. Grief is not a sign of weakness or loss of faith, nor should it be a lifelong companion of the birthmother.

The depth of grief felt by a birthmother upon the sudden separation from her child through adoption, creates an overwhelming sense of grief and loss. The physical intimacy of gestation, as her life supporting energy flows into her unborn child, creates a unique and sacred bond. The transfer of the child, for adoption added to the heartache fueled by other losses, such as her family and social group's perception and the pregnancies' economic impact, make grief recovery essential for birthmother to become content post-delivery.

Five areas where grief can impact the Birthmother:

Physical. Outward physical changes are obvious because of the pregnancy, but the inner stress of loss is often revealed in other physical manifestations. Every organ of the body can be affected including heart palpitation, digestive issues, rashes, and headaches. These may occur before or after delivery and are hallmarks of grief and stress.

Emotional. The birthmother is on a hormonal roller coaster creating feelings which are intensified by grief. Recognizing and understanding the causes of profound sadness, anger, guilt, shame, resentment, forgiveness, and the trauma reactions of fight, flight and freeze, can ease fears and reduce stress levels.

Spiritual. This impact can be examined in two ways. If the birthmother is a person of faith, she may question her belief regarding forgiveness or what God's plan is for her life. The other spiritual area is the joy of living. There can be consistent joy without guilt, in the life of the birthmother who is content with her decision for adoption.

Intellectual. Anyone who has had a significant grief event suffers from momentary or periodic disconnect with time and normal thinking. Grievers report struggling with completion of routine tasks or recalling details. These reactions are normal and will improve over time.

Social and relational changes. During and after pregnancy, the birthmother may no longer share the same freedom or interests of her friends. She may experience broken relationships with family, friends or the biological father.

Each of these five areas of impact should be discussed and explored with the birthmother post-delivery to help her understand her new life situation and to enable her to identify healthy coping responses.

The Formula for Contentment:

There is a formula which is powerful in its ability to assist those who grieve. All four elements of the formula need to be addressed. Omitting one or more lengthens the recovery and diminishes the path to a healthy emotional future.

W2+ T2 = Contentment

(2 W's and 2 T's)

1. **Wweep.**

The tears shed while grieving hold elevated toxin levels. When someone says they have had a good cry and now feel better, it's really true, because toxins have been released. The only risk is dehydration. If someone cries for over an hour at a time they can become dehydrated. They **MUST DRINK WATER** to insure the brain is not deprived of the needed hydration to function normally.

2. **Write.**

Birthmothers should be encouraged to write out their response to difficult questions from others about the decision to choose adoption. Journaling will also ease stress and clarify feelings. Handwriting, in cursive, uses the right and left sides of the brain and helps the brain to reconcile the reality.

3. **Think.**

Anyone who grieves needs to think about how the event will impact their future life. Thinking about how this brave decision can be a positive turning point in her life can be empowering for the birthmother.

4. **Talk.**

Talking to someone who will listen, without making a judgment, can ease the pressure of extreme feelings and establish clarity. Birthmother support groups, with a facilitator, can assist in this step.

Change the Birthmother perception by simply changing the terminology. Several elements of society have been transformed from "secretive and shameful," to open public discourse in

the last forty years. HIV and same sex relationships, are only two commonly portrayed on TV, in movies and books. Yet, the birthmother has remained in a “shadowy gray light” of public awareness. By using the terms **Brave choice**, when abortion is **not** chosen, and using the term **Gifting a child through adoption**, instead of “giving up a child for adoption” and using the term **Unexpected pregnancy**, instead of “unwanted pregnancy” we can transform the public discourse in a positive way. As we recognize the internet’s power to connect adoptees and biological parents, the new terminology can transform birthmother perception to one of honor, respect and value which can enable a healthy relationship bond to form.

The Teen Brain

The frontal cortex, where good judgement overrules the emotional and risk taking portion of the brain, is typically not fully mature until the age of twenty-two. It is therefore no surprise that statistically, most infant adoptions are from teen parents.

One of the hormones that is released at delivery is oxytocin. This hormone creates a desire to hold and cuddle a child. When a baby is not present, the drive to cuddle and nurture is confusing and difficult for the birthmother and may cause her to seek affection in inappropriate ways.

Finally, the challenge to the adoption professional is not only to ensure pre-delivery support, but to enable the birthmother through education, to transition into an emotionally healthy future. An emotionally healthy birthmother throughout the adoption process can create an opportunity to raise the awareness of society and validate her critical contribution to the Adoption Triad. It is my prayer that each birthmother, no matter the circumstances’ of her pregnancy, will be upheld and honored for her brave choice of adoption through these educational steps.

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