Contact with birth family in intercountry adoptions: Comparing families headed by sexual minority and heterosexual parents☆

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A B S T R A C T

Contact between adoptive families and birth families in the context of intercountry adoption, as well as adoption by sexual minorities (e.g., lesbians and gay men), represent understudied topics. In the current study, we examine the extent and type of contact with birth family in intercountry adoptive families headed by heterosexual and sexual minority parents. Data were drawn from the Modern Adoptive Families project, a nationwide, non-random survey of adoptive parents' beliefs and experiences that was conducted from 2012 to 2013. The current sample consisted of 479 families headed by heterosexual parents (H) and 38 families headed by sexual minority women (SM) whose oldest adopted child was younger than 18 years of age and who had been placed from another country. Although no family type difference was found in contact with birth family prior to or at the time of placement (H = 9.6%; SM = 13.2%), sexual minority respondents reported a higher level of contact with one or more members of their children"s birth families following adoptive placement than did heterosexual respondents (SM = 28.9%; H = 14.4%), as well as currently (SM = 21.1%; H 9.8%). They also reported more contact with their children"s birth mothers than did heterosexual parents, although no family type differences were found for contact with other birth family members. Policy and practice implications are discussed.

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1. Introduction

There is growing support for adoption by sexual minority adults, not only in the United States, but also in many western countries. At the present time, joint adoption by same-sex couples is legal throughout the U.S. and in 25 other countries (Carroll, 2016). In the U.S., most adoptions by lesbians and gay men involve domestic placements, either infants placed by their birth parents through private agencies and independent adoption practitioners or older children placed through the public child welfare system. Fewer adoptions by sexual minority parents involve intercountry placements (Goldberg, Gartrell, & Gates, 2014).

1.1. Intercountry adoption by sexual minority adults.

There are numerous barriers to intercountry adoption for sexual minority prospective parents. The laws, cultural mores, and religious beliefs of sending countries – those that allow native-born children to be placed for adoption in families residing in receiving countries – almost always prohibit the placement of children with LGBT adults (Davis, 2013). In fact, with the exceptions of the United States and South Africa, which are both sending and receiving countries, there are no other sending countries that knowingly allow same-sex couples to adopt a child. This is because same-gender sexual behavior is still criminalized and/or stigmatized in most sending countries, making it impossible for their authorities to consider placing children with families headed by sexual minority parents (Dambach, 2011; Mertus, 2011). As a result, sexual minorities who are open about their sexual orientation and/or same-sex relationship status generally find it extremely difficult to become parents through intercountry adoption. And yet, over the years, many have become adoptive parents of children born abroad, usually as single parents who do not disclose information about their sexual orientation and relationship status during the adoption process and/or by working with adoption professionals who elect not to include this information in the adoption paperwork (Brodzinsky, 2011a, 2011b, Brodzinsky, 2012, Brodzinsky, 2016; Davis, 2013; Goldberg, Downing, & Sauck, 2007; Mallon, 2012).

"Don't ask, don't tell" has been the primary strategy used by adoption agencies in dealing with prospective applicants' sexual identity and orientation in relation to intercountry adoption (Brodzinsky, 2012; Mallon, 2012). Although often leading to successful adoptive

placements, this strategy raises ethical dilemmas about possible violations of the sending countries' laws and cultural beliefs/practices. It also places sexual minority clients in the difficult position of "returning to the closet" when they are otherwise committed to living their lives as open, proud and self-confident sexual minority group members; in turn, such closeting can create interpersonal and intracouple stress (Goldberg et al., 2007). In addition, when agencies are unaware of their clients' sexual identity and orientation or choose to ignore this information, they run the risk of failing to address important issues during the adoptive parent preparation and education process (Brodzinsky, 2016; Mallon, 2012), including: how clients' sexual orientation and relationship status (single, partnered, married) will be represented in the home study; the extent to which clients are "out" and with whom; support from extended family and others in relation to their sexual orientation and relationship status; talking with children about parental sexual orientation and what it means to them to be a member of a sexual minority parent family; helping children cope with prejudice and homophobic comments from others; and coping with sexual orientation issues when traveling to their children's home countries, meeting officials from these countries, and possibly meeting birth family members and other previous caregivers.

1.2. Contact with birth family in intercountry adoptions

Open adoption arrangements, in which there is sharing of identifying information between the adoptive and birth families, including the possibility of pre- and post-placement contact between members of the two families, are becoming much more common in the U.S. (Grotevant & McRoy, 1998; Siegel & Smith, 2012). This is especially true in domestic adoptions from private agencies and, increasingly, public child welfare agencies. For example, data from the National Survey of Adoptive Parents (NSAP; Vandivere, Malm, & Radel, 2009) conducted in 2007–2008, which included information from telephone interviews of 2089 adoptive parents, found that 68% of families that adopted from private domestic agencies or independent adoption practitioners, and 39% of families that adopted from the foster care system, reported contact with one or more members of their children's birth families. In contrast, only 6% of families that adopted children from other countries reported post-placement contact with birth families. Unfortunately, the survey did not provide information about the frequency of contact or whether contact was face-to-face or through indirect means, including the use of an intermediary (e.g., a person or agency that relayed information, pictures, gifts, etc. from one family to the other). Given the challenges associated with developing open adoption arrangements in intercountry adoptions (e.g., institutional barriers, geographical distance, language barriers, finding a reliable intermediary, limited information about birth parents), it is not surprising that the rate of contact with birth families reported in the NSAP was significantly lower than for domestic placements.

Other than the data from the NSAP, we know of only three other empirical studies that examined contact with birth family in intercountry adoptions. Roby, Wyatt, and Pettys (2005), for example, examined the experiences with openness of 44 U.S. families who adopted children from the Marshall Islands. The researchers noted that although not governed by law or regulation, the cultural norm is for most adoptions from this country to begin as open placements. Their findings indicated that most families had very positive attitudes about and experiences with birth family contact. A slight majority reported about the same level of contact with birth family that they had agreed to or expected at the time of placement, whereas 19% reported an increase in contact and 28% reported a decrease in contact over time. Interestingly, relatively few adoptive families had actually met the birth family. Rather, contact typically involved an intermediary who relayed information, pictures, gifts, etc. between the families. The primary reasons for an increase in contact were having found a reliable intermediary, improvements in technology in the Marshall Islands that supported contact,

adoptive families' visits to the country, birth family moving closer to the adoptive family, and previous positive experiences with contact. The primary reasons for a decrease in contact involved a lack of response from the birth family, having no address for the birth family, concerns about the birth family contacting them, lack of an intermediary, mail delivery problems, and language barriers. Thus, in the majority of cases, structural factors, as opposed to beliefs or attitudes, led to increases or decreases in contact with birth family.

A second small-scale study on openness in intercountry adoption was reported by Scherman and Hawke (2010). Survey data were collected from 73 parents in New Zealand who had adopted children from another country. Unlike the adoptions in the study by Roby et al. (2005), the New Zealand adoptions all began as closed placements. At the time of the survey the average age of the adopted individuals was 14.5 years, with a range from 2 to 31 years. The researchers reported that, according to parents, half of the adoptive families had attempted to make contact with birth family, often when their children were still young; however, only 25% of the families had been successful in actually making face-to-face contact with birth family members.

Finally, a larger scale study of search efforts and contact with birth family among 1417 internationally-adopted adults in The Netherlands was reported by Tieman, van der Ende, and Verhulst (2008). The researchers noted that nearly 32% of the adopted adults had searched for birth family, with approximately 14% of the total sample having reunited with one or more birth relatives; another 32% were interested in searching but had not yet begun the process. The overall conclusion of these three studies is that there may be more interest in contact with birth family in intercountry adoptions, and possibly more actual contact occurring, than is suggested by the NSAP study.

It is possible that the efforts and successes of adoptive families and adopted adults in making contact with birth family are being facilitated, in part, by the increasingly salient role of the internet and social media. Indeed, the growth of the internet and social media has increased opportunities for adoptive families, including children and youth, to search for birth family members both within the U.S. and in other countries and, in turn, to be searched for by birth family members (Black, Moyer, & Goldberg, 2016; Howard, 2012). Little data exist, however, on the extent to which these relatively new forms of communication are being used for developing and maintaining contact with birth relatives, especially involving families who adopted from abroad. Some preliminary data do suggest that these technological tools are indeed being employed to find birth family and foster families located abroad, and/or to find intermediaries (e.g., adoption agencies, attorneys, country of origin authorities, and professional searchers) who can facilitate contact with birth relatives (Black et al., 2016).

Finally, in addition to using the internet as a starting point to locate information about a child's birth or foster family, or to identify an intermediary who could possibly facilitate contact, an increasing but unknown number of adoptive families are also traveling to their children's countries of origin. These trips are often undertaken by parents in an effort to help their sons and daughters better understand their background and strengthen their birth heritage identities – as well as possibly make contact with people who cared for them prior to adoption (Wilson & Summerhill-Coleman, 2013). Anecdotally, we know that these trips sometimes lead to contact with birth family members, though no statistics are available as to the number that are successful.

1.3. Contact with birth family in families headed by sexual minority adoptive parents

The National Survey of Adoptive Parents (NSAP) represents the largest-scale study, to date, addressing openness among families who adopted from abroad (Vandivere et al., 2009). Unfortunately, the survey did not code for parents' sexual orientation, thus making it impossible to compare the extent of contact with birth families by adoptive families

headed by heterosexual parents versus sexual minority parents. A few studies have addressed this issue, however, at least in relation to domestic adoptions. In a qualitative, longitudinal study of 30 lesbian, 30 gay male, and 30 heterosexual adoptive couples pursuing domestic adoption, Goldberg, Kinkler, Richardson, and Downing (2011) reported that heterosexual parents often saw open adoption as the only viable adoption option because few private agencies were offering closed adoption placements. In contrast, sexual minority parents tended to report more positive attitudes about open adoption, in that the philosophy underlying this practice was consistent with their desire to be transparent about their sexual orientation and same-sex partnered status in their daily lives. In a second study, Farr and Goldberg (2015) explored the extent of contact among lesbian/gay and heterosexual adoptive families ($n = 103$) and their children's birth families at 3 months post-placement and again at 1 year post-placement. Nearly 93% of families, regardless of sexual orientation, reported some type of contact with birth family, with most indicating satisfaction with contact. Although at 3 months post-placement, heterosexual and gay male parent families were somewhat more likely than lesbian parent families to have contact with birth family members, by 1 year post-placement there was no difference in contact as a function of family type.

The studies by Goldberg et al. (2011) and Farr and Goldberg (2015), while providing important information about the attitudes regarding open adoption and patterns of post-adoption contact among adoptive families headed by heterosexuals, lesbians, and gay men, used small samples and focused only on private domestic adoptions. To address these limitations, Brodzinsky and Goldberg (2016a) used data from a large, non-random survey study, the Modern Adoptive Families (MAF) project (Brodzinsky, 2015), to explore patterns of contact with birth family among heterosexual ($n = 671$), lesbian ($n = 111$), and gay male ($n = 98$) parent families, in both domestic private and public child welfare adoptions. Contact was examined prior to or at the time of adoptive placement, following placement, and in the families' current lives. No family type differences were noted in contact with birth family prior to or at the time of placement for either private domestic adoptions (H = 83.3%; L = 76%; G = 81.8%) or child welfare adoptions (H = 52.7%; L = 44.3%; G = 44.8%). In contrast, for child welfare adoptions, gay men (87%) reported more post-adoption contact with one or more members of their children's birth families than heterosexual (78%) or lesbian (67.2%) parents, with no family type differences in post-adoption contact for private domestic adoptions (H = 84.7%, L = 78%, G = 90.9%). Gay men who adopted through the child welfare system were also more likely to have face-to-face post-adoption contact with birth family than either heterosexual or lesbian parents (G = 75.9%, H = 60.9%, L = 54.1%). Regarding current contact, gay men who adopted through the child welfare system were also more likely than heterosexual or lesbian parents to be in touch with one or more members of their children's birth families (G = 74.1%, H = 55.2%, L = 55.7%). There was also a trend for gay men to report having a better relationship with birth relatives than did families headed by lesbian parents. No family type differences in current contact or relationship quality with birth families were found for those adults who adopted through private domestic agencies.

Thus, although research, to date, suggests that sexual minority adoptive parents are just as likely, and at times more likely, as heterosexual parents to be interested in and to seek contact with their children's birth families, this pattern may not apply for those who adopt children from other countries, especially in light of the legal, cultural, and religious barriers to adoption by sexual minority women and men in most sending countries (Davis, 2013). In order to better understand the experiences of sexual minority families that have been formed through intercountry adoption, and to inform social casework and clinical practice with these families, it is important to gather information about the extent to which they have contact with their children's birth families. Toward this end, we examined three major research questions: (a) What is the extent and pattern of contact with birth family for

intercountry adoptive families headed by heterosexual and sexual minority parents prior to or at the time of placement, following placement, and in their current lives? (b) To what extent is current contact with birth family face-to-face compared to indirect means (e.g., telephone, email, postal meal, social media), including the use of an intermediary, and are there family type differences in patterns of contact? (c) Are there family type differences related to search interests and/or plans for those who are not currently in contact with birth family?

1.4. Conceptual framework

Central to this study are theoretical constructs related to disclosure and emotion distance regulation. First, theories of coming out, or disclosure of sexual orientation, tend to assume that openness about one's sexual orientation is beneficial to sexual minorities' development and adjustment (Legate, Ryan, & Weinstein, 2012). The benefits of openness about one's sexuality may extend into the adoption process, insomuch as LG prospective adoptive parents have been found to strongly value openness and honesty about their sexual orientation and relationship status in the adoption process (e.g., they desire honesty with social workers and birth family; Goldberg et al., 2011). They also desire openness and honesty in general in the adoption process (e.g., they do not wish to hide details about their child's adoption from them; Goldberg et al., 2011). In fact, a desire for openness and transparency appears to be one motivator for pursuing domestic private open adoption, specifically (Goldberg et al., 2007). Unknown, however, is whether sexual minority adoptive parents who pursue international adoptions might also be especially likely to value openness – amidst or in spite of the serious structural challenges to contact that they face in such adoption arrangements.

Second, Grotevant (2009) suggested that the process of emotional distance regulation underlies the dynamics of contact between birth and adoptive families. In adoptive kinship networks, individuals may differ in their comfort level with emotional and physical contact versus distance, and thus the process of determining parameters of contact can be dynamic, as members establish and sometimes shift their approach to connection and separation over time. Flexibility, good communication, and commitment can enhance contact; yet, there are also circumstances where one or more members (birth family members and/or adoptive parents and/or adopted child) are unwilling or unable to participate in contact. Little is known about how sexual minority parents feel about and manage contact over time, especially in situations where there are multiple barriers to contact (i.e., in international adoption arrangements).

2. Method

Data were drawn from the Modern Adoptive Families (MAF) project, a nationwide, non-random survey of adoptive parents' beliefs and experiences that was conducted from 2012 to 2013 by the first author in collaboration with the Donaldson Adoption Institute (Brodzinsky, 2015). Although the MAF project was designed to explore the experiences and adjustment outcomes of a variety of different types of adoptive families, it purposely oversampled families headed by sexual minority adults. A total of 1616 non-kinship adoptive families were included in the MAF dataset. Stepparent adoptions and second parent adoptions were excluded. Readers interested in details about sample recruitment, demographic characteristics of the entire sample, and a full range of topics covered in the survey should see Brodzinsky (2015).

2.1. Participants

For the current study, the only families included were those that provided information on parent sexual orientation and whose oldest adopted child was younger than 18 years of age and had been placed from another country. Due to the limited number of gay male-headed

families ($n = 7$) who adopted internationally, only families headed by heterosexual adults ($N = 479$) and sexual minority women ($N = 38$) were included in the study.

Respondents ranged in age from 27 to 70 years, with a mean of 46.1 years. For heterosexual parent families, 95.2% of respondents were female. Seventy-six percent of families were headed by two parents, with 70% of respondents reporting that they were married. Approximately 94% of respondents stated that they were Caucasian. In two-parent families, nearly 69% of respondents reported that they and their partners were the same race. Parents were well educated, with 88.7% having a college or graduate degree (HS or GED = 1%; some college, no degree = 4.8%; Associate degree or technical school graduate = 5.5%; BA/BS = 33.7%; MA/MS = 34.4%; Advanced Graduate Degree = 20.7%). They were also financially secure, with 62.3% reporting a household income exceeding $100,000 (<$50,000 = 5.4%; $50,000–$100,000 = 32.3%; $100,000–$150,000 = 28.7%; $150,000–$200,000 = 15.9%; $200,000–$250,000 = 6.4%; >$250,000 = 11.4%). Families resided throughout the U.S., with only five states not represented in the current sample. The top states of residence were: MN (13.3%), PA (10.3%), CA (9.9%), NY (5.6%), NJ (4.6%), IL (4.4%), and MA (4.3%).

2.2. Procedure

Participants were recruited through adoption agencies and adoption attorneys across the country. At our request, they sent letters to previous clients describing the purpose of the study (i.e., to examine the unique perceptions, experiences, and needs of different types of adoptive families). Agencies and attorneys who worked with sexual minority clients were identified through prior research (Brodzinsky, 2003, 2011a, 2011b) and by their participation in the All Children-All Families Initiative sponsored by the Human Rights Campaign (2009). Announcements regarding the study were also sent to adoptive parent and LGBT parent organizations, posted on LGBT parenting websites, and disseminated by several colleagues who had conducted research with adoptive families.

After receiving the letter from an adoption agency or attorney, or seeing an announcement regarding the study, parents who were interested contacted the first author. A letter describing the study in greater detail was then sent electronically to the parent. Three options were offered for participating in the study: responding online through Survey Monkey (hyperlink included in the letter); receiving and returning the questionnaire through email; or receiving and returning the questionnaire through postal mail. Over 95% of respondents filled out the questionnaire online. Instructions noted that only one parent per family should fill out the questionnaire. No compensation was offered for participation. The project was reviewed and approved by the Institutional Review Board of Illinois State University.

2.3. Survey description

The entire MAF survey consisted of 203 questions covering a wide range of topics related to: family composition; respondent demographics; type of adoption; child characteristics, pre-adoption experiences, and adjustment outcomes; parental beliefs and attitudes about different aspects of adoption and family life; parent adoption preparation and service utilization; and experiences with community resources. Most questions required participants to choose a single answer; others allowed for multiple answers. Some open-ended questions were included to allow participants to elaborate on their answers. For a more complete description of the survey topics, the reader is referred to Brodzinsky (2015).

Respondents' status as sexual minority parents or heterosexual parents was determined by two questions: (1) whether they self-identified as heterosexual, lesbian, gay, bisexual, or other; and (2) whether they self-identified as a sexual minority (LGBT) parent. All women who identified as lesbian, as well as eight women who identified as either

bisexual or pansexual, and identified as being a sexual minority parent, were grouped together. Three women who identified as bisexual, but not as a sexual minority parent, were grouped as heterosexual parents.

For the current study, we focused on the following key survey questions (of note is that questions focused only on the birth family of respondent's *oldest adopted child*): (a) Did you meet any members of the birth family of your oldest adopted child prior to or at the time of placement?; (b) Has there been contact with any members of the birth family of your oldest adopted child since his/her placement,?; and (c) Are you in current contact with the birth family? Respondents answered yes or no to these questions. In addition, if there had been contact at one or more points in time, respondents were asked with whom (birth mother, birth father, birth grandparents, birth siblings, other birth relatives), and by what means they had contact (face-to-face, telephone, email, postal mail, texting, social media, use of an intermediary). Using a five-point scale, respondents were also asked how often they currently had contact with birth family members: more than once a month, once a month, every few months, once or twice a year, every few years. Those with current contact with birth family were asked to describe their relationship with them, using a five-point scale: very poor, poor, neutral, good, excellent. Finally, for families not currently in contact with birth family, we also examined their future search intent (i.e., yes, no, not sure), as well as concerns they might have about future contact related to the circumstances leading to the child's separation from birth family, known characteristics about them, or possible negative consequences to their own family related to contact.

2.4. Data analysis plan

Descriptive analyses were first conducted on all relevant respondent, child, and family demographic variables as a function of family type. Chi-square tests or *t*-tests were then used to compare families headed by heterosexual and sexual minority parents on outcome variables. In cases where expected cell frequency was <5, Fisher Exact tests were used. For some variables, the sample size was too small for valid statistical group comparisons. Because the current study is the first to examine patterns of contact with birth family in intercountry adoptions completed by families headed by heterosexual and sexual minority parents, descriptive data (but no statistical tests) will occasionally be presented.

3. Results

Findings are presented for family type differences in: (a) demographic characteristics of respondents and their oldest adopted child (the target of the study); (b) extent and patterns of contact with birth family prior to or at the time of adoptive placement, following placement, and in the family's current life; and (c) search intent and concerns about contact for those adoptive families not currently in contact with their children's birth families.

3.1. Demographic characteristics by family type

Table 1 presents demographic information for heterosexual and sexual minority women respondents. Although group differences were not statistically significant, sexual minority parents tended to be older ($p = 0.07$) and more educated ($p = 0.09$) than heterosexual parents. There was no difference between the two groups in respondent's racial status, having a partner of a different race, household income, and whether the family was headed by a single parent or two parents. Heterosexual parents (97.7%) were more likely to be married than sexual minority parents (34.3%), $X^2 (1) = 37.95$, $p = 0.000$, which reflects the reality that same-sex couples could not legally marry in most of the U.S. until very recently, but there was no difference in the length of the partnership/marriage between the two groups.

Table 1
Respondents' demographics by family type.

	Heterosexual (M, Sd, or %)	Sexual minority (M, Sd, or %)
Respondent's age (years)[+]	46.0 (7.36)	48.1 (6.88)
Respondent's race		
Caucasian	94.5%	92.1%
African American	0.4%	0%
Asian	3.6%	0%
Hispanic	0.6%	0%
Native American	0.2%	0%
Biracial/multiracial	0.6%	7.9%
Partner different race	11%	20%
Partnered	76.1%	84.2%
Married (for those partnered)[*]	97.7%	34.3%
Partnership/marriage (years)	16.7 (6.55)	16.4 (7.30)
Respondent's education[+]		
High school or GED	0.6%	2.6%
Associate degree or incomplete	11.3%	0%
BA/BS	33.5%	36.9%
MA or higher	54.6%	60.5%
Household income		
<$100,000	38%	37.8%
$$100,000–$200,000	43.9%	54.1%
>$200,000	18.1%	8.1%

[+] $p < 0.10$.
[*] $p < 0.001$.

Table 2 presents demographics for family structure and the respondents' oldest adopted child as a function of family type. There were no differences between heterosexual- and sexual minority-headed families in terms of total number of children or number of adopted children in the family. Heterosexual-headed families (31.5%), however, were more likely to include a child born to one of the parents than sexual minority-headed families (13.2%), $X^2 = 5.64$, $p = 0.01$. There were no group differences in the oldest child's age, gender, age at placement, years living in the family, or birth region. Both groups more often adopted children from Asia compared to other regions of the world and there was no difference between groups in children's racial status

Table 2
Family structure and oldest adopted child (OAC) demographics by family type.

	Heterosexual (M, Sd, or %)	Sexual minority (M, Sd, or %)
Number of children	2.06 (1.12)	1.87 (0.99)
Number of adopted children	1.50 (0.69)	1.55 (0.79)
Presence of biological children[*]	31.5%	13.2%
OAC's age (years)	9.48 (4.21)	10.36 (3.78)
OAC male	43.6%	34.2%
OAC race		
Caucasian	15.9%	15.8%
African American	12.7%	15.8%
Asian	50.7%	44.7%
Hispanic	15.4%	21.1%
Native American	0.2%	0%
Pacific Islander	1%	0%
Biracial/multiracial	2.1%	0%
Other	1.9%	2.6%
OAC transracial placement	77.7%	78.9%
OAC age at placement (years)	1.70 (1.88)	1.50 (1.17)
OAC time in family (years)	7.88 (4.29)	8.87 (3.93)
Birth region		
Eastern europe	17.7%	18.4%
Asia & Pacific Islands	47.6%	44.7%
Latin America & Caribbean Islands	18.0%	21.1%
Africa	11.9%	15.8%
Did not identify	4.8%	0.0%

[*] $p < 0.05$.

Table 3
Rates of contact with birth family by adoptive family type.

Time period	Heterosexual (%, N)	Sexual minority
Prior to/at time of placement	9.6% (46)	13.2% (5)
Following placement[*]	14.4% (69)	28.9% (11)
Currently[*]	9.8% (47)	21.1% (8)

[*] $p < 0.05$.

or whether the placement was transracial (i.e., child's race being different from the race of both adoptive parents). In fact, over three quarters of placements for both groups were transracial in nature. Eliminating those respondents who did not identify their children's countries of origin, a greater percentage of placements were from Asia (49.5%) than from Latin America (19.1%), Russia and Eastern European countries (18.6%), or Africa (12.8%). Although sample sizes were too small to compare family type by children's birth origin region, there was little difference between heterosexual-headed families (H) versus sexual-minority families (SM) regarding their oldest adopted child's birth region: Asia (H = 47.8%, SM = 44.7%); Africa (H = 11.9%, SM = 15.8%); Russia and Eastern Europe (H = 17.5%, SM = 18.4%); Latin America (H = 18%, SM = 21.1%).

3.2. Contact with birth family

Respondents were asked whether they had contact with one or more members of their oldest adopted child's birth family prior to or at the time of placement, following placement, and in their current lives (see Table 3). Rates of contact by heterosexual (9.6%) and sexual minority

parents (13.2%) prior to or at the time of placement did not differ significantly. In contrast, sexual minority parents reported greater contact with one or more members of their child's birth family following placement than did heterosexual parents (SM = 28.9% v H = 14.4%), $X^2(1) = 5.69$, $p = 0.017$. They also were more likely to report having had contact specifically with their child's birth mother than did heterosexual parents (SM = 23.7% v H = 10.2%), Fisher Exact test ($p = 0.027$). No group differences were noted in post-placement contact with the child's birth father (SM = 5.3% v H = 3.3%), birth grandparents (SM = 0% v H = 3.5%), birth siblings (SM = 13.2% v H = 6.5%), or other birth relatives (SM = 2.6% v H = 3.8%). The most common means of contact with birth family was through an intermediary (9.7%), followed by face to face contact (4.1%), email (3.5%), postal mail (3.5%), social media (2.1%), and telephone (1.9%). There were no family type differences in means of contacting birth family, although sexual minority parents reported a tendency to use an intermediary more often than did heterosexual parents (SM = 18.4% v H = 9%), Fisher Exact test ($p = 0.08$).

Sexual minority parents also reported being in current contact with birth family members more often than did heterosexual parents (SM = 21.1% v H = 9.8%), Fisher Exact test ($p = 0.049$). The vast majority of parents, regardless of sexual orientation, reported that contact was indirect and once a year or less often (SM = 87.5% v H = 85.1%). Respondents were also asked to rate the quality of their current relationship with birth family on a 5-point Likert scale (1 = very poor to 5 = excellent). No family type difference was found, with most parents reporting a neutral to positive relationship with birth family (SM = 3.50 v H = 3.74).[1]

Finally, secondary analyses (e.g., correlations, X^2, Fisher Exact tests, and t-tests) were conducted to ensure that family-type differences in contact were not accounted for by the few demographic/respondent

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[1] Although the number of families headed by gay men who met our inclusion criteria ($N = 7$) was too small for reliable statistical comparisons with other family types, it is noteworthy that none of them reported any contact with birth family either at the time of placement, following placement or currently.

differences that were noted between heterosexual- and sexual minority-parent families (see Tables 1 and 2). These analyses indicated no relationship between demographic and respondent differences and patterns of contact with birth family.

3.3. Families with no contact: Search plans and concerns about contact

Families that did not have current contact with birth family (H = 427; SM = 30) were asked about their intent to seek contact in the future, as well as about concerns regarding contact related to circumstances surrounding the adoption or because of known birth family characteristics. They were also asked about concerns regarding possible negative impact of contact on the adoptive family. No family type differences were found regarding search plans. Most families were unsure about whether they would seek future contact with birth family (Total = 45.2%; SM = 60%, H = 44.2%), with nearly a third (Total = 32.4%; SM = 23.3%, H = 33%) indicating that they would and slightly less than a quarter (Total = 22.4%; SM = 16.7%, H = 22.8%) stating that they would not. Sexual minority respondents were less likely than heterosexual respondents to report that their concerns about contact with birth family were due to circumstances surrounding the adoption or known birth parent characteristics (SM = 3.2% v H = 18.3%), X^2 (1) = 4.58, p = 0.03; no family type difference was found regarding concerns about the impact of contact with birth family because of possible negative consequences to their own family (SM = 12.9% v H = 15.7%).

3.4. Birth family contact as a function of birth region

Approximately 96% of respondents provided information about their children's birth country. Although cell sizes were too small to analyze contact patterns by specific birth country, we were able to do this for larger geographical regions (e.g. Africa, Asia, Russia and Eastern Europe, and Latin America). Contact with birth family was significantly more likely when children were born in Africa than in other regions: prior to or at time of placement (Africa = 52.4%, Asia = 2.8%, Russian and Eastern Europe = 4.4%, Latin America = 6.4%, Unidentified = 4.3%; X^2(4) = 146.84, $p < 0.000$), following placement (Africa = 47.6%, Asia = 6.1%, Russia and Eastern Europe = 17.6%, Latin America = 18.1%, Unidentified = 8.7%; X^2 (4) = 67.91, $p < 0.000$), and currently (Africa = 36.5%, Asia = 2.8%, Russia and Eastern Europe = 11%, Latin America = 14.9%, Unidentified = 4.3%; X^2 (4) = 62.82, $p < 0.000$). The high level of contact associated with Africa was due primarily to those children who were born in Ethiopia. For example, of the 63 Africa-born children, 52 (82.5%) came from Ethiopia. Because of small cell sizes, we were unable to analyze family type differences in contact by birth region.

4. Discussion

The current study is the first to compare birth family contact by heterosexual- and sexual minority-parent families who completed an intercountry adoption. Although no significant group difference in contact was found prior to or at the time of placement, sexual minority women reported having contact with birth family more often than did heterosexual parents following adoptive placement, as well as currently. They also reported more contact with birth mothers than did heterosexual parents but there were no significant family type differences for contact with birth fathers, grandparents, siblings, or other birth family members. In addition, most respondents reported neutral to positive relationships with birth family, with no family type difference found for this variable. Among families who had no current contact with birth family, sexual minority parents displayed less concern than did heterosexual parents about possible future contact related to circumstances surrounding the adoption or known birth family characteristics, but there was no family type difference for future intent to search.

The findings regarding different rates of contact between sexual minority and heterosexual parent families are somewhat surprising given

the barriers to intercountry adoption for sexual minority adults (Brodzinsky, 2016; Dambach, 2011; Davis, 2013; Mertus, 2011). No sending countries, except the U.S. and South Africa, openly permit adoption by non-heterosexuals. Furthermore, the laws and religious/cultural beliefs that stigmatize and often criminalize same-gender sexual behavior in these countries make it extremely difficult for sexual minority parents to be "out" to adoption authorities or birth families during the adoption process or when seeking contact in the post-adoption period. Yet a small but significant percentage of families headed by sexual minority women succeeded in making contact with one or more members of their children's birth families, and at a higher rate than heterosexual families (23.7% v 10.2% post-placement; 21.1% v 9.8% currently). This finding is in keeping with other work suggesting that sexual minority individuals may have a more expansive notion of family than heterosexual individuals, insomuch as they may be more willing to incorporate non-family individuals, including their children's birth families, into their kinship network (Oswald, 2002; Weston, 1991). What is unclear from our data, however, is whether most sexual minority women parents share their sexual orientation with birth family members or country of origin officials. Typically, sexual minority parents who seek to adopt from abroad do so as single parents; for those with partners, only one of them is usually identified as the prospective adoptive parent in the home study documents. If the partner travels to the child's country, she is often identified as a friend or support person, not as the adoptive parent's wife or partner. This pattern may continue in post-placement contact with birth family, or with sending country authorities who serve as intermediaries for contacting birth family. Thus, although our data indicate a higher rate of contact than expected with birth family by sexual minority women, and significantly higher than for families headed by heterosexual parents, the extent to which they are "out" with birth families and country of origin authorities is still to be determined. Future research, including large-scale surveys, should explicitly ask sexual minority respondents whether birth parents, foster parents, and others are aware of their sexual orientation and/or same-sex relational status, and if so, when this information was shared with them and what type of response they received from these individuals.

Our data are consistent with recent research on domestic open adoption that indicates significant support for contact with birth families among adoptive families headed by sexual minority parents. Goldberg et al. (2011) reported that lesbian/gay parents had very positive attitudes about open adoption, finding the practice to be consistent with their own beliefs about openness in relation to their sexual orientation. In addition, Farr and Goldberg (2015) noted that almost all families (93%), regardless of parental sexual orientation, had some type of contact with their children's birth parents at one year post-placement, and most reported satisfaction with the contact. Furthermore, drawing from the same (MAF) dataset (Blinded for review) as the one used in this study, Brodzinsky and Goldberg (2016a) reported substantial support for open adoption arrangements among sexual minority adoptive parents in both domestic infant adoptions and child welfare adoptions, at levels that were equal to and, at times, greater than for heterosexual parents. In short, the pattern observed across previous studies focusing on domestic adoptions, as well as the current study focusing on international adoption, indicates considerable support for open adoption among sexual minority parents, even in the face of institutional, cultural, and religious barriers that stigmatize same-sex relationships and parenting by sexual minority adults.

A difference between the current study and the one reported by Brodzinsky and Goldberg (2016b) involves birth family contact by gay men. In the MAF dataset, seven gay men reported that their oldest adopted child was placed from another country. Although too small a number for statistical comparison to include in the current study, it is noteworthy that none of these men reported any contact with birth parents, either at the time of placement or following placement. If confirmed by future research using larger samples, this finding would suggest that gay men who adopt internationally may face additional challenges in

establishing contact with birth family, including not only homophobic attitudes and behavior of others but also stigma and prejudice associated with male childrearing (Doucet, 2006; Goldberg, 2012).

In the current study, the overall rate of contact with birth families by U.S. families adopting from abroad (15.5% following placement; 10.6% currently), although higher than the rate reported in the NSAP study (6%; Vandivere et al., 2009), clearly demonstrates that openness in international adoptions is much less common than in domestic adoptions– for example, 68% for private domestic placements and 39% for domestic child welfare placements (Vandivere et al., 2009). In other words, the vast majority of internationally adopted children, regardless of their parents' sexual orientation, grow up without any communication from, let alone contact with, their birth family. This reality can pose challenges for them regarding their identity, as well as for their adoptive parents who often struggle to find ways of helping their boys and girls understand the reasons for their adoptions and their birth family origins. Parents must ensure that even in the face of a structurally closed adoption, which is characteristic of most intercountry placements, they create a home environment that is communicatively open, thereby supporting their children's curiosity about their origins and fostering a healthy ethnic/cultural identity (Brodzinsky, 2005, 2011b)

There may be several reasons for the higher rate of birth family contact in the current study compared to the NSAP study. First, the MAF project (Brodzinsky, 2015), from which our respondents were drawn, purposely oversampled adoptive families headed by sexual minority parents, almost assuredly resulting in a higher percentage of sexual minority women than was included in the NSAP. Given that contact with birth relatives is at least as high, if not higher, for adoptive families headed by sexual minority parents, it would be expected that the overall rate of contact in our study would be greater than was reported in the NSAP. Second, it is possible that the difference in contact rate reflects methodological differences in the survey, specifically related to the way questions were worded or the type of contact measured. The NSAP study did not differentiate between direct (face-to-face-) and indirect contact (use of an intermediary or by telephone, postal mail, social media, etc). In the current study, the most common means of contact was through an intermediary (9.7%), with only 4.4% of respondents reporting face-to-face contact. Future research will need to explore how adoptive families seek to maintain contact in intercountry placements, including the challenges faced when seeking to use different types of contact. Third, it is also possible that the current findings reflect a growing trend for families adopting internationally to seek or accept contact with birth family members, similar to what has been happening in domestic adoptions (Brodzinsky & Goldberg, 2016a). Fourth, given the time difference between when our study and the NSAP study was conducted, it is quite possible that the families in our study were more informed about the utility of the internet for purposes of searching, and also better able to access search-relevant information via the internet, than were those in the NSAP study. It is becoming quite clear that the internet, and specifically, social media, is playing an increasingly salient role in search and reunion, including in intercountry adoptions (Black et al., 2016; Howard, 2012).

As noted above, our findings indicate that most contact with birth family is through intermediaries, as opposed to face-to-face contact or through email, telephone, or social media. Given the geographical and language barriers inherent in intercountry adoptions, as well as the cultural differences related to acceptance of open adoption (see Pinderhughes, Matthews, Deoudes, & Pertman, 2013), it makes sense that most families seek the help of others in reaching out to birth family. More research is needed to better understand the challenges faced by families in seeking different types of contact with birth families living abroad. Undoubtedly, as more and more families travel to their children's countries of origin (Wilson & Summerhill-Coleman, 2013), it is likely that there will be an increase in the percentage of those having direct contact with members of their children's birth families. Helping families negotiate these experiences poses new challenges for child welfare and mental health professionals.

Finally, collapsing across family type, our findings suggest that families with African-born children, and specifically those whose children came from Ethiopia, were more likely to have contact with birth family prior to or at the time of placement, following placement, and in their current lives than families whose children were born in other world regions. We know of no research that has examined contact with birth family as a function of birth country or birth region. Clinically, and in our research, we have worked with a number of families who adopted from Ethiopia and who have had contact with birth family during the adoption process, as well as following adoption. Pinderhughes et al. (2013) also point out that contact with birth family in Ethiopia and other African countries, especially during the adoption process, may reflect a profound misunderstanding of permanence associated with adoptions. In placing their children for adoption and in meeting adoptive parents during this process, Ethiopian parents sometimes assume that adoption is similar to a board and care or fostering arrangement. If this is true, it raises serious ethical and practice issues in working with birth parents from cultural backgrounds that do not share the same understanding of adoption as prospective adoptive parents (see also Roby & Matsumura, 2002). Future research needs to explore the cultural and/or contextual factors in sending countries that promote or allow contact between birth families and adoptive families, as well as the best ways to ensure that all placements involve fully informed consent by birth parents (see Pinderhughes et al., 2013 for a discussion of cultural issues related to contact with birth family in intercountry adoptions).

4.1. Study limitations

Our findings must be interpreted in the context of several methodological limitations. First, the MAF project, from which our sample was drawn, was a moderately large, national, but non-random survey. Respondents were predominately Caucasian, well-educated, and financially secure – clearly not representative of the broader population of adoptive families. Greater access to educational and economic resources may have facilitated parents' ability to make contact (e.g., by paying intermediaries online; by traveling to their children's birth country). Although this demographic pattern is largely consistent with most families who adopt from abroad (Vandivere et al., 2009), it is unknown whether our findings would generalize to families of color and those who are less well-educated or financially secure. In addition, the number of families in our sample headed by sexual minority women, although adequate for statistical comparisons with heterosexual-parent families, was small; and there were an insufficient number of gay men who adopted from abroad in the MAF dataset to include in the current study for reliable and valid group comparisons. Future research will need to replicate our study with a larger group of sexual minority adoptive families, including those headed by gay men. Second, we do not know the motivation of parents for seeking to adopt from abroad, and whether the motivation differs by family type. Previous research has shown that some parents who adopt from other countries do so because they believe that contact with birth family is less likely to occur than is the case with domestic adoption (Baden, Gibbons, Wilson, & McGinnis, 2013; Goldberg, 2012). If this motivation is more common among heterosexual adopters, it might explain, at least in part, their lower rate of contact with birth family than was found for families headed by sexual minority women. Future research needs to explore the reasons underlying international adoption and its link to patterns of post-adoption contact with birth family. Fourth, because of the small sample size, we were unable to analyze contact patterns by country of origin. It is possible that families adopting from certain countries may have an easier time making contact with birth family than those adopting from others. Fifth, our methodology did not allow us to examine participants' decision making in developing and sustaining contact with birth family, the ongoing dynamics of openness between the parties, how contact changes over time, and how the unique barriers to contact in international adoption (e.g., distance, language, cultural

mores and beliefs about openness) were experienced by the participants. These issues should be addressed in future research.

4.2. Implications and conclusions

Despite these limitations, the current study extends our knowledge about contact with birth family in intercountry adoption and is the first to highlight the relative support for such contact by sexual minority adoptive parents. At the same time, it raises a number of important policy and practice issues in adoption. Is it ethical to facilitate intercountry adoptions by sexual minority adults in the face of known legal, cultural, and religious restrictions on such placements in the child's country of origin? How do professionals balance the need or moral right of abandoned and orphaned[2] children for a permanent and loving family with the rules and regulations that govern adoption in other countries? How should intermediaries respond to requests for facilitating contact with birth family if they possess knowledge of the parents' sexual orientation and are aware of the illegality of same-gender sexual behavior in the sending country? What can or should be done to facilitate more supportive views about same-sex relationships and parenting/adoption by sexual minority adults among the authorities of sending countries? These are complex and challenging ethical and policy questions that have not yet been adequately addressed in the field.

Finally, our findings suggest that adoption professionals need to consider how they can support sexual minority families in their efforts to adopt from other countries, as well as in their efforts to seek and maintain contact with their children's birth family members (see also Brodzinsky & Goldberg, 2016b; Brooks, Whitsett, & Goldbach, 2016). Particular areas of importance include: (a) helping families understand the barriers to adoption for sexual minority families; (b) how to share information about their sexual orientation with country of origin officials during the adoption application process; (c) how to protect themselves and their children from homophobic attitudes and actions during trips abroad and/or when interacting with birth family or others in their children's native countries, (d) strategies for developing contact with birth families in other countries, (e) strategies for developing mutually supportive relationships with birth families, (f) helping families decide when it's appropriate, from a developmental perspective, for undertaking heritage travel trips with their children, which may or may not include making contact with previous caregivers (e.g., foster parents, orphanage staff), or birth family members, and (g) how to maintain a communicatively open adoption when efforts to make contact with birth family fail. As more and more families travel to the places where their children were born, these issues become increasingly important for sexual minority adoptive families and those professionals who counsel them.

References

Baden, A. L., Gibbons, J. L., Wilson, S. L., & McGinnis, H. (2013). International adoption: Counseling and the adoption triad. *Adoption Quarterly, 16*, 218–237.
Black, K. A., Moyer, A. M., & Goldberg, A. E. (2016). From face-to-face to Facebook: The role of technology and social media in adoptive family relationships with birth family members. *Adoption Quarterly* (advance online copy) 10.1080/10926755.2016.1217575
Brodzinsky, D. M. (2003). *Adoption by lesbians and gays: A national survey of adoption agency policies, practices, and attitudes.* New York: Donaldson Adoption Institute.
Brodzinsky, D. M. (2005). Reconceptualizing openness in adoption: Implications for theory, research and practice. In D. Brodzinsky, & J. Palacios (Eds.), *Psychological issues in adoption: Research and practice* (pp. 145–166). Westport, CT: Praeger.
Brodzinsky, D. M. (2011a). *Expanding resources for children III: Research-based best practices in adoption by gays and lesbians.* New York: Donaldson Adoption Institute.
Brodzinsky, D. M. (2011b). *Children's understanding of adoption: Developmental and clinical implications. 42.* (pp. 200–207). Professional Psychology: Research and Practice, 200–207.
Brodzinsky, D. M. (2012). Adoption by lesbians and gay men: A nationwide survey of adoption agency policies and practices. In D. Brodzinsky, & A. Pertman (Eds.), *Adoption by lesbians and gay men: A new dimension in family diversity* (pp. 61–84). New York: Oxford University Press.
Brodzinsky, D. M. (2015). *The modern adoptive families study: An introduction.* New York: Donaldson Adoption Institute.
Brodzinsky, D. M. (2016). International adoption. In A. E. Goldberg (Ed.), *The SAGE encyclopedia of LGBTQ studies. Vol 1.* (pp. 12–14). Thousand Oaks, CA: Sage Publications.
Brodzinsky, D. B., & Goldberg, A. E. (2016a). Contact with birth family in adoptive families headed by lesbian, gay male, and heterosexual parents. *Children and Youth Services Review, 62*, 9–17.
Brodzinsky, D. B., & Goldberg, A. E. (2016b). *Practice guidelines supporting open adoption in families headed by lesbian and gay male parents: Lessons learned from the modern adoptive families study.* New York: Donaldson Adoption Institute.
Brooks, D., Whitsett, D., & Goldbach, J. T. (2016). Interculturally competent practice with gay and lesbian families. In R. Fong, & R. McRoy (Eds.), *Transracial and intercountry adoptions: Cultural guidance for professionals* (pp. 90–115). New York: Columbia University Press.
Carroll, A. (2016). *State sponsored homophobia: A world survey of sexual orientation law: Criminalization, protection and recognition.* Geneva: ILGA.
Dambach, M. (2011). The international legal context governing intercountry adoptions by gay men and lesbians. *Adoption and Fostering, 35*, 65–77.
Davis, M.A. (2013). Demographics of gay and lesbian adoption and family policies. In A.K. Baumle (Eds.), b (pp. 383–401). Dordrecht: The Netherlands: Springer Publishing.
Doucet, A. (2006). *Do men mother?: Fathering, care, and domestic responsibility.* Toronto: University of Toronto Press.
Farr, R. H., & Goldberg, A. E. (2015). Contact between birth and adoptive families during the first year post-placement: Perspectives of lesbian, gay, and heterosexual parents. *Adoption Quarterly, 18*, 1–24.
Goldberg, A. E. (2012). *Gay dads: Transitions to adoptive fatherhood.* New York: New York University Press.
Goldberg, A. E., Downing, J. B., & Sauck, C. C. (2007). Choices, challenges, and tensions: Perspectives of lesbian prospective adoptive parents. *Adoption Quarterly, 10*, 33–64.
Goldberg, A. E., Gartrell, N. K., & Gates, G. (2014). *Research report on LGB-parent families.* Los Angeles: The Williams Institute.
Goldberg, A. E., Kinkler, L. A., Richardson, H. B., & Downing, J. B. (2011). Perceptions and experiences of open adoption among lesbian, gay, and heterosexual couples: A qualitative study. *Journal of Marriage and Family, 73*, 502–518.
Grotevant, H. D. (2009). Emotional distance regulation over the life course in adoptive kinship networks. In G. Wrobel, & E. Neil (Eds.), *International advances in adoption research for practice* (pp. 295–316). Chichester: Wiley.
Grotevant, H. D., & McRoy, R. G. (1998). *Openness in adoption: Exploring family connections.* Thousand Oaks, CA: Sage Publications.
Howard, J. (2012). *Untangling the web: The internet's transformational impact on adoption.* New York: Donaldson Adoption Institute.
Human Rights Campaign (2009). *Promising practices in adoption and foster care: A comprehensive guide to policies and practices that welcome, affirm, and support lesbian, gay, bisexual, and transgender foster and adoptive parents.* Washington, D.C.: Human Rights Campaign All Children – All Families Initiative.
Legate, N., Ryan, R. M., & Weinstein, N. (2012). Is coming out always a "good thing"? Exploring the relations of autonomy support, outness, and wellness for lesbian, gay, and bisexual individuals. *Social Psychological and Personality Science, 3*, 145–152.
Mallon, G. (2012). Lesbian and gay prospective foster and adoptive families: The home study assessment process. In D. Brodzinsky, & A. Pertman (Eds.), *Adoption by lesbians and gay men: A new dimension in family diversity* (pp. 20–35). New York: Oxford University Press.
Mertus, J. (2011). *Barriers, hurdles, and discrimination: The current status of LGBT intercountry adoption and why changes must be made to effectuate the best interests of the child. 39.* (pp. 271–311). Capital University Law Review, 271–311.
Oswald, R. F. (2002). Resilience within the family network of lesbians and gay men: Intentionality and redefinition. *Journal of Marriage and the Family, 64*, 374–383.
Pinderhughes, E., Matthews, J., Deoudes, G., & Pertman, A. (2013). *A changing world: Shaping best practices through understanding of the new realities of intercountry adoption.* New York: Donaldson Adoption Institute.
Roby, J. L., & Matsumura, S. (2002). If I give you my child, aren't we family? A study of birthmothers participating in Marshall Islands-U.S. adoptions. *Adoption Quarterly, 5*, 7–31.
Roby, J. L., Wyatt, J., & Pettys, G. (2005). Openness in international adoptions: A study of U.S. parents who adopted children from the Marshall Islands. *Adoption Quarterly, 8*, 47–71.
Scherman, R., & Hawke, N. (2010, July). Openness and intercountry adoption. *Paper presented at the third international conference on adoption research.* The Netherlands: Leiden.
Siegel, D. H., & Smith, S. L. (2012). *Openness in adoption: From secrecy and stigma to knowledge and connection.* New York: Donaldson Adoption Institute.
Tieman, W., van der Ende, J., & Verhulst, F. C. (2008). Young adult international adoptees' search for birth parents. *Journal of Family Psychology, 22*, 678–687.
Vandivere, S., Malm, K., & Radel, L. (2009). *Adoption USA: A chartbook based on the 2007 national survey of adoptive parents.* Washington, D.C.: U.S. Department of Health and Human Services.
Weston, K. (1991). *Families we choose: Lesbians, gays, kinship.* New York: Columbia University Press.
Wilson, S. L., & Summerhill-Coleman, L. (2013). Exploring birth countries: The mental health implications of heritage travel for children/adolescents adopted internationally. *Adoption Quarterly, 16*, 262–278.

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[2] It is recognized that many children who are placed for adoption from abroad are not actually orphans, despite the fact that the Hague Treaty which governs intercountry adoptions requires them to be so.