

FINAL REPORT

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Spence-Chapin Research Study on Adoption

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Introduction

In this report, we summarize the findings related to a three-pronged research project addressing birth mothers' experiences with the Spence-Chapin Services to Families and Children agency (hereafter referred to as Spence-Chapin). The Spence-Chapin agency is in New York City and has been providing adoption services within the United States and internationally for over 100 years. This research project was a collaboration between NORC at the University of Chicago, the American Enterprise Institute, and Rutgers University. All aspects of the project were performed in partnership with representatives of Spence-Chapin. Using both administrative data from Spence-Chapin, as well as data collected from former birth mothers served by Spence-Chapin, the overarching goals of the research project were to understand more about the characteristics and experiences of birth mothers involved with Spence-Chapin services and how theses adoption experiences affected their well-being. The specific research questions and methodological approaches are discussed later in this report and below we present overarching findings that emerged from the analysis of administrative data, survey data, and interview data.

Key Findings from the Administrative Data Analysis¹

- Overall, about three in ten birth mothers identified as White (30%) followed by Hispanic (26%), and Black (23%). About 28% of birth fathers were reported by birth mothers to have identified as Black while slightly fewer identified as Hispanic (25%) or White (21%). The highest proportion of birth mothers resided in Queens County. Birth mothers were 26 years of age, on average, at the time of inquiry.
- Just under two in three birth mothers were born in the United States (64%). When considering birth mothers born outside the United States, the greatest proportion were born in China (6%), Central America (5%), and Mexico (4%). Most birth mothers reported English as their primary language (80%).
- About 10 percent of birth mothers had earned a bachelor's degree or higher. Most birth mothers (79%) were not enrolled in school and over half of birth mothers were employed (56%).
- Most birth mothers were single (87%) and had about 1.17 biological children, on average. Overall, most birth mothers reported having had no prior placement (90%).
- Birth mothers were about equally likely to report that the child's maternal grandmother or other family members were aware of the pregnancy (46% and 46% respectively) as they were to say that these groups were unaware (44% and 43% respectively).

¹ As discussed further below, these findings should not be interpreted as representing all clients served by Spence-Chapin during the study period.

- About 56% of birth mothers reported that the birth father was aware of the pregnancy at the time of intake while 27% reported that the birth father was involved.
- About 74% of birth mothers were referred to Spence-Chapin by a hospital or medical center. Among mothers who made an adoptive placement with Spence-Chapin, most chose a nonenforceable post-adoption contact agreement (64%).

Key Survey and Interview Findings

- Most data collection participants had very positive reflections about their use of Spence-Chapin services, which were noted in both the survey and interview data. This was particularly notable for those who used *interim care* services, which, in part, allowed birth mothers time and space to explore their options for their babies.
- Participants also conveyed strong positive sentiments about the critical role that Spence-Chapin staff, especially the social work staff, played in their lives as they received services from Spence-Chapin.
- For the most part, participants' experiences with open adoption and post-adoption contact were positive, though some participants revealed some mixed observations about how this process unfolded.
- Finally, birth mothers' provided insights about the how their lives were affected by their adoption experiences, revealing mostly high satisfaction across an array of current well-being indicators (e.g., physical safety; family relationships; friendships; key life milestones).
- The response rate for data collection from former clients involved with the Spence-Chapin agency was lower than anticipated and data collection itself was rather challenging. This is important to note as future program evaluation or other data collection efforts conducted by the Spence-Chapin agency should take these challenges into consideration and plan accordingly.

Background on Adoption in the US

Although no definitive governmental statistics exist on the number of domestic adoptions in the US, there are some sources from non-profit agencies that provide valuable *estimates* about these adoptive arrangements. As such, according to recent national data estimates, there are approximately 100,000 children adopted in the US every year (National Council for Adoption, 2022). In general, approximately half of the children adopted are considered *public adoptions* because they are adopted from the public child welfare system (i.e., foster care) in the US. Private adoptions constitute the rest of the domestic adoptions in the US. Though the number of private domestic adoptions has decreased in recent years (in 2019 there were over 25,000 private adoptions in the U.S compared to just under 20,000 adoptions in 2020), it remains a popular method for family formation and adoptive families report high satisfaction rates across all types of adoption (National Council for Adoption, 2022). Nevertheless, a recent report

by the Opt Insititute (2022), discusses the wide range of public perceptions regarding adoption and about women who place children for adoption. For example, public opinions may range from harsh critiques of women who choose to place children for adoption to viewing them as heroic for these choices. These public narratives *may* have some influence on women's decisions around placing children for adoption.

Moreover, to better understand more about the characteristics of individuals who relinquish their children for private adoptions, there is a broad body of research guiding our knowledge of this topic. Although this research literature offers many valuable insights about myriad aspects of engaging in the adoption process, these studies are *not national* in scope. The research literature also heavily skews toward focusing on birth mothers; relatively little recent research exists on birth fathers.

Nonetheless, from this body of research, we can describe more about this population. For example, we know that contrary to popular assumptions, teen mothers are *not* the most common demographic group to relinquish children for adoption. In fact, according to research, teen-aged mothers account for 25% of such arrangements, while women in their twenties, who already have children, are more frequently involved in relinguishing babies for adoption (Coleman & Garratt, 2016; Leve et al., 2013). In addition, some research suggests there are differences between women who opt to relinquish children for adoption compared with those who opt to parent. That is, the decision to relinquish for adoption is more frequently made by single mothers from higher socioeconomic means and who have attained more education than women who choose to parent (Chippendale-Bakker & Foster, 1996; McLaughlin et al., 1988; Resnick et al., 1990, cited in Wiley & Baden, 2005), and who also have higher vocational aspirations as well (Cocozzelli, 1989; Low et al., 1989, cited in Wiley & Baden, 2005). Stereotypes persist about birth fathers as well, including that they are frequently thought of as "an irresponsible, uncaring, and heartless sperm donor" (Whitesel, 2008, p. 5). Yet, the limited body of research on birth fathers reveals that they are frequently present and involved in the adoption process. In fact, over half of birth fathers are in committed relationships with birth mothers (Smith, 2007). Moreover, birth fathers' decisions around relinguishing children for adoption may involve input from their own biological families and are also informed by the nature of the relationships with the birth mothers. That is, having supportive family members and positive relationships with birth mothers facilitates constructive participation in the adoption process (Whitesel, 2008).

Moreover, the National Council for Adoption (2022) reports that there is an increasing trend toward maintaining contact between birth mothers and adoptive families. Research shows that birth fathers also frequently value post-adoption contact, even if only to a limited degree (Grotevant et al., 2019; Whitesel, 2008). At the same time, there is one demographic group—teenage mothers—in which the relationship with birth fathers is a bit more complicated. For this group, the birth fathers tend to be older than their teenaged partners and have relatively lower incomes and educational attainment than their childless peers. Moreover, their romantic relationships with their teenaged partners may be unstable and they may show relatively low interest in the adoption process and in post-adoption contact (Bunting & McAuley, 2004).

Finally, some research also underscores potential motivations for birth mothers who relinquish children for adoption, namely concerns about lack of financial resources and support as well as the belief that they are "inadequately prepared" for becoming a parent (Coleman & Garratt, 2016).

The Current Project

As noted earlier, the current research project was undertaken with the overarching goal of understanding more about birth mothers residing in New York who had previously been engaged with Spence-Chapin services between July 2006 and July 2020. The original research aims included:

- 1. What are the demographic characteristics of Spence-Chapin birth mothers served since 2006?
- 2. How do demographic characteristics observed in Spence-Chapin birth mothers compare to other demographically similar mothers in the US as a whole?
- 3. For birth mothers who chose open adoption, what are their experiences of Spence-Chapin's options counseling; the adoptive placement process; and their contact and relationship quality with the adopted child?
- 4. What are birth mothers' perceived impacts of adoption on their own well-being and self-sufficiency and the well -being of their adopted child?

However, because this project was delayed due to the COVID pandemic, some of the research aims of this project evolved over time. That is, less emphasis was placed on the second research question (understanding the broad demographic characteristics of adoptive mothers in the US). More specific aspects of former clients of Spence-Chapin and of their adoptive experiences were prioritized instead. This resulted in a revised research question 2: *How do the demographic characteristics of Spence-Chapin birth mothers (and birth fathers) who place their child for adoption compare to birth mothers (and birth fathers) who place their child for adoption, due to the complexity of working with administrative data and due to limitations in collecting data from former Spence-Chapin clients as discussed further below, some of the research focus needed to change in this project. The specific research foci and the methods used to address them are discussed in detail later in this report.*

The study looked specifically at birth mothers residing in New York who completed an adoption with Spence-Chapin (placement group) and birth mothers who engaged in Spence-Chapin services to the point of utilizing its interim care program (i.e., placed their child in Spence Chapin's temporary custody) but then chose to parent (non-placement group). This is not inclusive of all birth parent clients Spence-Chapin provided services to throughout the study years. Further, birth father experiences were not studied independently; the demographic data that is presented on birth fathers was reported by the birth mother. The final analysis included 702 administrative data cases, 53 survey responses, and 9 indepth interviews.

Methodology

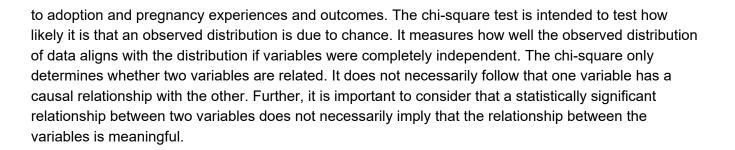
Administrative Data Analysis

The NORC team worked with Spence-Chapin program staff to access de-identified data files containing available information on a set of targeted variables for birth mothers served by Spence-Chapin during the study period. The NORC team prepared the data for analysis, including checking that all item responses are in expected range, degree to which relevant variables followed a normal distribution, and checking for and documenting missing data. Specifically, this data preparation process included:

- Data discovery, profiling, and cleansing. NORC examined the administrative data to assess its contents and identify patterns, relationships, and other attributes in the data, as well as inconsistencies, anomalies, missing values and related issues. NORC addressed such issues as appropriate to create a more complete and accurate data set.
- Data structuring and transformation. NORC modeled and organized the data to meet analytic requirements, including converting the datasets into formats and structures that would facilitate later analysis. For example, creating new fields or columns that aggregated or revised values from existing variables.
- **Data validation**. NORC programmed and ran routines to validate the data's consistency, completeness and accuracy. The data were stored and finalized for analysis.

The NORC team then generated a standard set of descriptive statistics including frequencies and percent distributions for categorical data and key measures (mean, maximum values, minimum values, and standard deviations) for numeric data. Using these statistics, the NORC team constructed a demographic profile of the characteristics of Spence-Chapin birth mothers, including comparison between birth mothers that made an adoptive placement with Spence-Chapin and those that did not. As noted above, the study looked specifically at birth mothers residing in New York who completed an adoption with Spence-Chapin (placement group) and birth mothers who engaged in Spence-Chapin services to the point of utilizing its interim care program (i.e., placed their child in Spence Chapin's temporary custody) but then chose to parent (non-placement group). This is not inclusive of all birth parent clients Spence-Chapin provided services to throughout the study period. Further, birth father experiences were not studied independently. The demographic data that is presented on birth fathers was reported by the birth mother. In some cases, the data on birth fathers may not have been involved in the planning or the birth mother may not have known this information.

The study team conducted Pearson's chi-squared tests to examine the association between birth mother and birth father characteristics and adoption and pregnancy experiences and outcomes. The study team also conducted Pearson's chi-squared tests to examine the association between placement and non-placement birth mothers and birth mother and birth father characteristics and variables related



Survey Data Collection and Analysis

Sample & Procedures

Spence-Chapin staff developed a sample of 294 birth mothers served by Spence-Chapin for participation in the survey. Beginning in April 2022, survey sample members received a secure link to an individual 30-minute Qualtrics survey about their experiences regarding the decision-making process related to relinquishing their child(ren) for adoption or who decided to parent them. Birth mothers' identities were masked and they were provided with unique identification numbers that allowed them to access the web-based survey. Survey participants were provided with informed consent before the survey commenced. After completing the survey, participants received a gift card provided by NORC with an initial value of \$25 following completion of the survey. At the end of the survey, participants were offered the opportunity to provide their contact information to participate in the interviews described below.

Although the survey was intended to conclude in spring 2022, the survey period was extended to August 26, 2022 to increase response rates and Spence-Chapin staff conducted multiple rounds of email and phone follow-up to encourage survey participation. During July 2022, the gift card amount was increased to \$50. Birth mothers that participated in the survey prior to this change were subsequently provided with an extra gift card so that their compensation was equal to \$50, regardless of when they completed the survey.

Sixty-three of the 294 survey respondents included in the original sample were found to have invalid contact information, meaning that their email address was found to be unusable, and Spence-Chapin had no phone number. The phone number on file for these respondents was disconnected or the phone number on file no longer belonged to the birth mother. An additional 13 birth mothers indicated they did not wish to participate in the survey. Fifty-two cases were subsequently removed from the group of responses due to concerns about data validity and quality following an independent review by the NORC team with the support of Spence-Chapin staff.

In all, the NORC team received 53 completed surveys which were included in the analysis. The survey data was downloaded and analyzed by members of the research team; STATA version 16² was used for all analyses. However, there were many variables for which data were missing from several participants. In the survey data analyses presented later in this report, the number of responses to each variable is included.

Survey Design

Using the original research questions and subsequent discussions with the Spence-Chapin team, the following questions and domains were included in the survey of birth mothers. Items were grouped together in the presentation of the results (see Appendix A for a complete version of the survey):

- 1. *Demographic and Participant Characteristics*: Age; Race/ethnicity; Age at first pregnancy; Current marital status; current income; and timing of adoption consideration.
- 2. *Working with Spence-Chapin*: How they were referred to Spence-Chapin and consideration of working with Spence-Chapin.
- 3. *Perceptions of Spence-Chapin Services*: Interactions with social workers and specific service types (options counseling; interim care; legal representation; choosing an adoptive family; post adoption services).
- 4. *Perceptions of Open Adoption*: What is the experience of open adoption, including communication and relationship with your child and adoptive family?
- 5. What motivates birth mothers to choose not to have an open adoption³?
- 6. *Reflections on Birth Mothers' Post-Adoption Lives*: What are the specific reflections of birth mothers about their adoption decision? What is the experience of post-adoption life for birth mothers?
- 7. General Comments, Reflections and Suggestions about Spence-Chapin Services.

In order to ensure that all project participants were operating from the same definitions of Spence-Chapin services as they completed this survey, the NORC team provided them with a brief glossary of these services (see Appendix C). Some of the primary services included *Options Counseling, Interim Care Services*, and *Post-Adoption Contact Agreements*. Spence-Chapin provided the team with the following language regarding these services:

- **Options Counseling:** Spence-Chapin offers information and resources about options available to women while they are pregnant or after they have given birth. Usually, people meet with a social worker to discuss their options which may include parenting the child for themselves, making an adoption placement plan, abortion, and other alternatives such as foster care and kinship care.
- **Interim care** is an aspect of Spence-Chapin's program that is unique from other adoption agencies. Interim care is a service in which the child is temporarily placed into an approved interim care

² StataCorp. 2019. Stata Statistical Software: Release 16. College Station, TX: StataCorp LLC.

³ Please note that this yielded very few responses in our survey and is not covered in the report.

providers home. This allows birth parents the time to continue considering their options, while their child is receiving care through Spence-Chapin's services.

• Spence-Chapin helps coordinate **openness** *I* **post-adoption contact agreements** between birth and adoptive parents. These agreements can either be legally binding and enforceable, or informal agreements.

Interview Data Collection and Analysis

Sample and Procedures

For this project, all survey respondents were given the opportunity to express interest in participating in a follow-up interview about their experiences with Spence-Chapin services by providing their contact information at the conclusion of the survey as noted above. Those that indicated they were willing to participate in an interview were contacted promptly via their provided e-mail address by the research team to schedule an interview. Participants were informed that they would receive a \$50 electronic gift card as an incentive for participation. The recruitment period began on May 25, 2022 and concluded on September 16, 2022. As of September 16, 2022, 30 survey respondents provided valid e-mail addresses and were contacted a minimum of four times to attempt to schedule an interview. At the end of the recruitment period, nine interviews were completed. In addition, during the recruitment period, 5 additional interviews were scheduled and not completed due to participant no-shows. In order to protect participant confidentiality, participants were randomly assigned an identification number from 1-9 after the interviews were completed.

A semi-structured interview guide was developed collaboratively by the research team with input from the Spence-Chapin staff (see Appendix B for the interview guide and Appendix C for an interview supplement on Spence-Chapin services). The guide was used as an outline for interviewers with both specific questions to ask, as well as potential prompts or areas of inquiry, depending on the responses. In this way, the guide has structure but also allows room for the interview to progress according to participant responses. Interviews were designed to gather information about birth mothers' experiences with Spence-Chapin services. Research team members with extensive experience with qualitative analysis conducted interviews. The general domains investigated in the interview included:

- Life circumstance during pregnancy
- Experiences with Spence-Chapin services
- · Ideas for improvement for Spence-Chapin services
- · Perspectives on open adoption experience
- · Current life circumstances and impact of adoption

Analysis of Interview Data

A rapid analysis approach was employed for analyzing the birth mother interviews (Hamilton, 2020; Taylor et al., 2018). Rapid analysis is an efficient and rigorous technique for analyzing qualitative data in implementation and program evaluation projects, as it can help illuminate clear and actionable results (Taylor et al., 2018).

The research team conducted analysis in the following manner. First, the research team developed an analytic framework based upon the interview domains, and then applied the framework to all interviews. The research team members each analyzed interviews that they did not conduct to improve the rigor of the analysis and minimize bias. Each interview analysis framework was then compiled into a matrix, organized by domains and participant data. Using the matrix and domains as a guide, the research team analyzed the findings for salient commonalities across participants and identified key points of learning about the domains based upon the participant interviews. The third analyst on the research team, who did not conduct the interviews, reviewed interview transcripts and coding summaries to ensure that findings were supported by the data.

Demographic Characteristics of Spence-Chapin Birth Mothers and Birth Fathers

This section provides an overview of the demographic characteristics of Spence-Chapin birth mothers and birth fathers and a comparison of birth mothers who placed their child for adoption compared to birth mothers that did not to address the study's first two primary research questions.

- 1. What are the demographic characteristics of Spence-Chapin birth mothers (and birth fathers) served over the study period?
- 2. How do the demographic characteristics of Spence-Chapin birth mothers (and birth fathers) who place their child for adoption compare to birth mothers (and birth fathers) who do not place their child for adoption?

Background Characteristics

Overall, about three in ten birth mothers identified as White (30.20%) followed by Hispanic (26.07%), and Black (22.79%) (Exhibit 1). Birth mothers that made an adoptive placement with Spence-Chapin were somewhat more likely to identify as White (31.94%) than birth mothers that did not (22.48%). About 28.21% of birth fathers were reported by birth mothers to have identified as Black while slightly fewer identified as Hispanic (24.64%) or White (20.80%) (



Exhibit 2). The highest proportion of birth mothers resided in Queens County (20.94%) followed by Suffolk (20.37%) and Kings (15.67%) with only minimal differences between birth mothers that made an adoptive placement with Spence-Chapin and those that did not (Exhibit 3). Birth mothers were 25.99 years of age, on average, and mothers in the placement group were slightly older, on average, (26.55 years) than birth mothers in the non-placement group (23.50 years) (Exhibit 4).

Just under two in three birth mothers were born in the United States (64.25%) and birth mothers that made an adoptive placement with Spence-Chapin were about as likely to have been born in the United States (65.45%) as those that did not (58.91%), although place of birth was unknown for a higher proportion of birth mothers in the non-placement group (11.63%) than the placement group (1.75%) (Note: Age at the time of surrender was not available for non-placement group mothers.

Exhibit 5). When considering birth mothers born outside the United States, the greatest proportion were born in China (5.84%), Central America (5.41%), and Mexico (4.27%). Most birth mothers reported English alone as their primary language (80.34%) and birth mothers that made an adoptive placement with Spence-Chapin were slightly less likely to report English alone as their primary language (78.36%) as those that did not (89.15%) (

Exhibit **6**). Most birth mothers identified as Catholic (39.03%) followed by Protestant (14.67%) with another 23.36% reporting they were not affiliated with any religion (Note: English Alone refers to cases where the birth mother noted that their primary language was only English relative to cases where the birth mother noted English plus another language or a language other than English. Therefore, birth mothers in the "English Alone" category may have in fact spoken another language, but they did not identify it as their primary language.

Exhibit 7); there were no major differences between placement and non-placement group birth mothers with respect to religious affiliation.

Exhibit 1. Birth Mother Race

	Group					
	Placement		Non-placement		All	
	Column %	Ν	Column %	Ν	Column %	Ν
White	31.94	183	22.48	29	30.20	212
Black	22.34	128	24.81	32	22.79	160
Hispanic	25.83	148	27.13	35	26.07	183
Asian	12.74	73	11.63	15	12.54	88
Multiracial	7.16	41	13.95	18	8.40	59
All	100.00	573	100.00	129	100.00	702

Exhibit 2. Birth Father Race

	Group					
	Placement		Non-placement		All	
	Column %	Ν	Column %	Ν	Column %	Ν
Unknown	8.03	46	14.73	19	9.26	65
White	22.51	129	13.18	17	20.80	146
Black	27.40	157	31.78	41	28.21	198
Hispanic	25.13	144	22.48	29	24.64	173
Asian	9.77	56	7.75	10	9.40	66
Multiracial	6.81	39	10.08	13	7.41	52
Other	0.35	2			0.28	2
All	100.00	573	100.00	129	100.00	702

Exhibit 3. Birth Mother County of Residence

	Group					
	Place	ment	Non-placement		All	
	Column %	Ν	Column %	Ν	Column %	Ν
Queens	20.77	119	21.71	28	20.94	147
Suffolk	20.42	117	20.16	26	20.37	143
Kings	16.40	94	12.40	16	15.67	110
Bronx	11.34	65	13.95	18	11.82	83
New York	9.08	52	13.95	18	9.97	70
Nassau	9.42	54	8.53	11	9.26	65
Richmond	3.32	19	4.65	6	3.56	25
Westchester	2.79	16	1.55	2	2.56	18
Rockland	1.22	7	1.55	2	1.28	9
Schenectady	1.22	7	0.00	0	1.00	7
Other	4.01	23	1.55	2	3.56	25
All	100.00	573	100.00	129	100.00	702

	Gr		
	Placement	Non-placement	All
Ν	573	129	702
Mean	26.55	23.50	25.99
Standard Deviation	7.04	6.08	6.97
Min	13	14	13
Max	47	39	47

Note: Age at the time of surrender was not available for non-placement group mothers.

Exhibit 5. Birth Mother Birthplace

	Group					
	Placement		Non-placement		All	
	Column %	Ν	Column %	Ν	Column %	N
Unknown	1.75	10	11.63	15	3.56	25
United States	65.45	375	58.91	76	64.25	451
China	6.98	40	0.78	1	5.84	41
Central America	5.76	33	3.88	5	5.41	38
Mexico	4.36	25	3.88	5	4.27	30
Other Asia	2.44	14	4.65	6	2.85	20
Other South America	2.09	12	5.43	7	2.71	19
Dominican Republic	1.57	9	3.1	4	1.85	13
Eastern Europe	1.92	11	1.55	2	1.85	13
Jamaica	1.92	11	1.55	2	1.85	13
Other Caribbean	1.75	10	2.33	3	1.85	13
Africa	1.4	8	0.78	1	1.28	9
Ecuador	0.87	5	1.55	2	1	7
Central and Northern Europe	0.87	5			0.71	5
Middle East	0.87	5			0.71	5
All	100	573	100	129	100	702

	Group					
	Place	ment	Non-placement		All	
	Column %	Ν	Column %	Ν	Column %	Ν
English Alone	78.36	449	89.15	115	80.34	564
English and Another Language	4.36	25	0.78	1	3.70	26
Spanish	10.47	60	8.53	11	10.11	71
Cantonese, Mandarin, or Chinese not specified	5.76	33	1.55	2	4.99	35
Other	1.05	6			0.85	6
All	100.00	573	100.00	129	100.00	702

Exhibit 6. Birth Mother Primary Language

Note: English Alone refers to cases where the birth mother noted that their primary language was only English relative to cases where the birth mother noted English plus another language or a language other than English. Therefore, birth mothers in the "English Alone" category may have in fact spoken another language, but they did not identify it as their primary language.

Exhibit 7. Birth Mother Religious Affiliation

	Placen	nent	Non-pla	cement	All	
	Column %	Ν	Column %	Ν	Column %	N
Unknown	0.87	5	3.88	5	1.42	10
Catholic	39.09	224	38.76	50	39.03	274
Protestant	14.31	82	16.28	21	14.67	103
Other Christian or Christian Not specified	9.77	56	12.40	16	10.26	72
Non-Christian Faiths	9.77	56	6.98	9	9.26	65
Other	2.27	13	0.78	1	1.99	14
None	23.91	137	20.93	27	23.36	164
All	100.00	573	100.00	129	100.00	702

Note: Birth mothers in the non-Christian Faiths group tended to identity as Muslin (24 birth mothers) or Jewish (18 birth mothers).

Education and Employment⁴

Just under one in three birth mothers had attended some elementary school through some high school (30.34%) while 24.79% had earned a high school diploma or equivalent degree (**Exhibit 8**). Birth mothers that made an adoptive placement with Spence-Chapin were somewhat more likely to have earned a bachelor's degree (11.17%) than birth mothers that did not (6.20%). Overall, most birth mothers (79.20%) were not enrolled in school and the proportion was slightly higher for birth mothers that made an adoptive placement (80.98%) than those that did not (71.32%) (**Exhibit 9**). Over half of birth mothers were employed (56.13%) while birth mothers that made an adoptive placement were slightly less likely to be employed (53.93%) than those that did not (65.89%) (Exhibit 10).

Birth mothers reported that about 16.38% of birth fathers had attended some elementary school through some high school while 22.36% had earned a high school diploma or equivalent degree (

⁴ Employment, education level, and school status were collected at the time of intake and may have changed over the course of a birth mother's engagement with Spence-Chapin.

Exhibit 11). Birth fathers in the placement group were somewhat more likely to have been reported as having earned a bachelor's degree (8.90%) than birth fathers in the non-placement group (6.98%). Information on birth father's education level was missing for about three in ten birth fathers (33.62%) with similar rates for placement (33.15%) and non-placement birth fathers (35.66%). Likewise, there were high rates of missing data regarding birth fathers' school enrollment (45.30% missing overall) and employment (39.89% missing overall) status making it difficult to interpret group differences for these two variables (**Exhibit 12** and **Exhibit 13**).

	Group					
	Placen	nent	Non-placement		All	
	Column %	Ν	Column %	Ν	Column %	Ν
Unknown	1.40	8	0.78	1	1.28	9
Elementary School through some high school	31.06	178	27.13	35	30.34	213
High School Graduate	23.56	135	30.23	39	24.79	174
Some College or Technical School	24.96	143	30.23	39	25.93	182
Associate Degree	4.71	27	2.33	3	4.27	30
Bachelor's Degree	11.17	64	6.20	8	10.26	72
Graduate Degree	3.14	18	3.10	4	3.13	22
All	100.00	573	100.00	129	100.00	702

Exhibit 8. Birth Mother Education Level

Exhibit 9. Birth Mother School Status

	Plac	Placement		Non-placement		All	
	Column %	Ν	Column %	N	Column %	N	
Unknown	0.70	4	3.88	5	1.28	9	
Part Time in School	5.24	30	3.10	4	4.84	34	
Full Time in School	11.87	68	20.16	26	13.39	94	
Not in School	80.98	464	71.32	92	79.20	556	



	Place	ement	Non-placement		All	
	Column %	Ν	Column %	N	Column %	N
In School and FT/PT Not Specified	1.22	7	1.55	2	1.28	9
All	100.00	573	100.00	129	100.00	702

Exhibit 10. Birth Mother Employment Status

	Placement		Non-pla	Non-placement		All	
	Column %	Ν	Column %	N	Column %	Ν	
Unknown	0.17	1	3.88	5	0.85	6	
Employed	45.90	263	30.23	39	43.02	302	
Unemployed	53.93	309	65.89	85	56.13	394	
All	100.00	573	100.00	129	100.00	702	

Exhibit 11. Birth Father Education Level								
		Grou						
	Placer	nent	Non-pla	cement	All			
	Column %	Ν	Column %	Ν	Column %	N		
Unknown	33.16	190	35.66	46	33.62	236		
Elementary School through some high school	17.10	98	13.18	17	16.38	115		
High School Graduate	22.86	131	20.16	26	22.36	157		
Some College or Technical School	13.61	78	19.38	25	14.67	103		
Associate Degree	1.57	9	2.33	3	1.71	12		
Bachelor's Degree	8.90	51	6.98	9	8.55	60		
Graduate Degree	2.79	16	2.33	3	2.71	19		
All	100.00	573	100.00	129	100.00	702		

Exhibit 11. Birth Father Education Level

Exhibit 12. Birth Father Employment Status

	Place	Placement		Non-placement		All	
	Column %	N	Column %	N	Column %	N	
Unknown	38.05	218	48.06	62	39.89	280	
Employed	45.72	262	32.56	42	43.30	304	
Unemployed	15.18	87	18.60	24	15.81	111	
Deceased	1.05	6	0.78	1	1.00	7	
All	100.00	573	100.00	129	100.00	702	

	Place	Placement		Non-placement		All	
	Column %	Ν	Column %	N	Column %	Ν	
Unknown	43.46	249	53.49	69	45.30	318	
Not in School	48.87	280	28.68	37	45.16	317	
In School, FT/PT Not Specified	6.63	38	17.05	22	8.55	60	
Deceased	1.05	6	0.78	1	1.00	7	
All	100.00	573	100.00	129	100.00	702	

Exhibit 13. Birth Father School Status

Substance Use and Mental Health

About 12.25% of birth mothers reported having had a history of depression (Exhibit 14) while 6.27% reported having a history of another mental health disorder (Exhibit 15). It is possible that placement group birth mothers may have experienced a higher rate of depression (13.61%) or another mental health disorder (6.81%) when compared with non-placement group birth mothers (6.20% for depression and 3.88% for other mental health disorders). This trend, however, may be driven by the relatively higher number of cases for which this is unknown among non-placement placement group mothers (35.66% for depression and 34.88% for other mental health disorders).

About 45.73% of birth mothers had a drug screen performed at the birthing hospital with no relevant differences between placement and non-placement birth mothers, although this information was unknown for just under one in four birth mothers (23.50%) (Note: Examples of other mental health disorders beyond depression include bipolar disorder, PTSD, anxiety, Schizophrenia, suicidal ideation, anorexia, bulimia, and similar conditions.

Exhibit 16).

Most birth mothers reported that they had not personally experienced fetal drug (87.18%; Exhibit 17) or alcohol exposure (88.46%; Exhibit 18). The large difference in the proportion of unknown cases between placement group and non-placement group birth mothers makes it difficult to interpret any differences between these two groups.

Most birth mothers reported no use of alcohol (64.53%, Exhibit 19), tobacco (75.07%; Exhibit 19. Birth Mother Alcohol Use During Pregnancy

21

	Placeme	ent	Non-place	ement	All	
	Column %	Ν	Column %	Ν	Column %	N
Unknown	4.36	25	31.78	41	9.40	66
Yes	26.00	149	26.36	34	26.07	183
No	69.63	399	41.86	54	64.53	453
All	100.00	573	100.00	129	100.00	702

Exhibit 20), marijuana (77.35%; Exhibit 21), cocaine (84.09%; Exhibit 22), heroin (88.32%; Exhibit 23), or use of other illicit drugs (88.46%; Exhibit 24) during their pregnancy. The large difference in the proportion of unknown cases between placement group and non-placement group birth mothers for these variables, however, makes it difficult to interpret any differences between these two groups.

Exhibit 14. Birth Mother History of Depression

	Placement		Non-placement		All	
	Column %	Ν	Column %	Ν	Column %	N
Unknown	5.23	30	35.66	46	10.82	76
Yes	13.61	78	6.20	8	12.25	86
No	81.15	465	58.14	75	76.92	540
All	100.00	573	100.00	129	100.00	702

Exhibit 15. Birth Mother History of Other Mental Health Disorder

	Group					
	Placem	nent	Non-placement		All	
	Column %	N	Column %	Ν	Column %	N
Unknown	5.05	29	34.88	45	10.40	73
Yes	6.81	39	3.88	5	6.27	44



	Placement		Non-placement		All	
	Column %	Ν	Column %	Ν	Column %	Ν
No	88.31	506	61.24	79	83.33	585
All	100.00	573	100.00	129	100.00	702

Note: Examples of other mental health disorders beyond depression include bipolar disorder, PTSD, anxiety, Schizophrenia, suicidal ideation, anorexia, bulimia, and similar conditions.

23

	Placement		Non-placement		All	
	Column %	Ν	Column %	Ν	Column %	Ν
Unknown	22.69	130	27.13	35	23.50	165
Yes	46.77	268	41.09	53	45.73	321
No	30.54	175	31.78	41	30.77	216
All	100.00	573	100.00	129	100.00	702

Exhibit 17. Birth Mother Experienced Fetal Drug Exposure

	Placeme	ent	Non-placement		All	
	Column %	N	Column %	Ν	Column %	Ν
Unknown	5.75	33	37.98	49	11.68	82
Yes	1.40	8			1.14	8
No	92.84	532	62.02	80	87.18	612
All	100.00	573	100.00	129	100.00	702

Exhibit 18. Birth Mother Experienced Exposure to Fetal Alcohol Syndrome

	Placer	nent	Non-placement		All	
	Column %	Ν	Column %	Ν	Column %	Ν
Unknown	5.41	31	37.21	48	11.25	79
Yes	0.35	2			0.28	2
No	94.24	540	62.79	81	88.46	621
All	100.00	573	100.00	129	100.00	702

Exhibit 19. Birth Mother Alcohol Use During Pregnancy



	Placeme	ent	Non-place	ement	All	
	Column %	Ν	Column %	Ν	Column %	Ν
Unknown	4.36	25	31.78	41	9.40	66
Yes	26.00	149	26.36	34	26.07	183
No	69.63	399	41.86	54	64.53	453
All	100.00	573	100.00	129	100.00	702

Exhibit 20. Birth Mother Drug Use During Pregnancy - Tobacco

	Placem	ent	Non-placement		All	
	Column %	Ν	Column %	N	Column %	N
Unknown	4.88	28	32.56	42	9.97	70
Yes	16.40	94	8.53	11	14.96	105
No	78.71	451	58.91	76	75.07	527
All	100.00	573	100.00	129	100.00	702

Exhibit 21. Birth Mother Drug Use During Pregnancy - Marijuana

	Placem	ent	Non-placement		All	
	Column %	Ν	Column %	Ν	Column %	Ν
Unknown	4.88	28	32.56	42	9.97	70
Yes	13.26	76	10.08	13	12.68	89
No	81.85	469	57.36	74	77.35	543
All	100.00	573	100.00	129	100.00	702

Exhibit 22. Birth Mother Drug Use During Pregnancy - Cocaine



	Placen	nent	Non-placement		All	
	Column %	N	Column %	Ν	Column %	Ν
Unknown	4.88	28	32.56	42	9.97	70
Yes	5.58	32	3.10	4	5.13	36
No	89.53	513	64.34	83	84.90	596
All	100.00	573	100.00	129	100.00	702

Exhibit 23. Birth Mother Drug Use During Pregnancy - Heroin

	Group					
	Placem	ent	Non-placement		All	
	Column %	Ν	Column %	Ν	Column %	N
Unknown	4.88	28	32.56	42	9.97	70
Yes	1.92	11	0.78	1	1.71	12
No	93.19	534	66.67	86	88.32	620
All	100.00	573	100.00	129	100.00	702

Exhibit 24. Birth Mother Drug Use During Pregnancy - Other Illegal Drug

	Placem	nent	Non-placement		All	
	Column %	Ν	Column %	Ν	Column %	N
Unknown	4.88	28	32.56	42	9.97	70
Yes	1.40	8	2.33	3	1.57	11
No	93.72	537	65.12	84	88.46	621
All	100.00	573	100.00	129	100.00	702

Marital Status and Relationships

Overall, most birth mothers were single (86.61%) with no major differences between birth mothers that made an adoptive placement with Spence-Chapin (86.04%) and birth mothers that did not (89.15%), although mothers in the placement group were more likely to be married (10.65%) than those in the non-placement group (3.88%) (Exhibit 25). Overall, most birth fathers were reported to be single (53.13%) with no major differences between birth fathers in the placement (53.05%) and non-placement groups (53.49%), although, like birth mothers, placement fathers were more likely to be married (10.30%) than non-placement birth fathers (4.65%) (Exhibit 26). Information on birth fathers' marital status, however, was unknown for just over one in three birth fathers (34.33%).

	Placem	nent	Non-pla	cement	All	
	Column %	Ν	Column %	Ν	Column %	N
Unknown			2.33	3	0.43	3
Single	86.04	493	89.15	115	86.61	608
Married	10.65	61	3.88	5	9.40	66
Divorced or separated	2.97	17	4.65	6	3.28	23
Widowed	0.35	2			0.28	2
All	100.00	573	100.00	129	100.00	702

Exhibit 25. Birth Mother Marital Status

Note: Birth mother's that reported being married were not necessarily married to the child's birth father. Additionally, a birth mother may be married to a birth father but no longer in a committed relationship with the birth father.

Exhibit 26. Birth Father Marital Status

	Place	ement	Non-pla	cement	All	
	Column %	Ν	Column %	Ν	Column %	N
Unknown	33.33	191	38.76	50	34.33	241
Single	53.05	304	53.49	69	53.13	373
Married	10.30	59	4.65	6	9.26	65
Divorced or separated	2.27	13	2.33	3	2.28	16
Deceased	1.05	6	0.78	1	1.00	7



		Group				
	Placement		Non-placement		All	
	Column %	N	Column %	Ν	Column %	N
All	100	573	100	129	100	702



Family Living Arrangements

On average, birth mothers had about 1.17 biological children with an average of 1.22 for placement group mothers and .96 for non-placement group birth mothers (Exhibit 27). The number of biological children ranged from 0 to 14. On average, birth mothers had about .81 children living with them with an average of .82 for placement group mothers and .76 for non-placement group birth mothers (

29

Exhibit 28). The number of children living with the birth mother ranged from 0 to 12.

On average, birth mothers had about .02 children living elsewhere with an average of .03 for placement group birth mothers and 0 for non-placement group birth mothers (Exhibit 29). The number of children living elsewhere ranged from 0 to 3. On average, birth mothers had about .20 children living with another relative with an average of .21 for placement group mothers and .15 for non-placement group birth mothers (Exhibit 30). The number of children living with a relative ranged from 0 to 6. On average, birth mothers reported having about .03 children living in foster care⁵ with an average of .04 for placement mothers and 0 for non-placement birth mothers (Exhibit 31). The number of children living in foster care⁵ with an average of .04 for placement mothers and 0 for non-placement birth mothers reported having about .31 other children with the birth father with an average of .32 for placement mothers and .26 for non-placement birth mothers (Exhibit 32). The number of children birth mothers reported having about .31 other children with the birth father with an average of .32 for placement mothers and .26 for non-placement birth mothers (Exhibit 32). The number of children birth mothers reported having with the birth father ranged from 0 to 7.

	Gro		
	Placement	Non-placement	All
Ν	570	125	695
Mean	1.22	0.96	1.17
Standard Deviation	1.69	1.33	1.63
Min	0.00	0.00	0.00
Max	14	6	14.00

⁵ 96.44% of birth mothers reported having no children living in foster care while 1.98% reported having one or more children living in foster care (this information was unknown for 1.58% of birth mothers).

Exhibit 28. Number of Children Living with Birth Mother

	G		
	Placement	Non-placement	All
Ν	565	126	691
Mean	0.82	0.76	0.81
Standard Deviation	1.4	1.11	1.35
Min	0	0	0
Max	12	5	12
Unknown	8	3	11

Exhibit 29. Birth Mother Number of Children Living Elsewhere

	G		
	Placement	Non-placement	All
Ν	565	124	689
Mean	0.03	0	0.02
Standard Deviation	0.22	0	0.2
Min	0	0	0
Max	3	0	3
Unknown	8	5	13

Exhibit 30. Birth Mother Number of Children Living with Relative

	G		
	Placement	Non-placement	All
Ν	564	124	688
Mean	0.21	0.15	0.2
Standard Deviation	0.64	0.54	0.63
Min	0	0	0
Max	6	4	6
Unknown	9	5	14

Exhibit 31. Birth Mother Number of Children Living in Foster Care

	G		
	Placement	Non-placement	All
N	567	124	691
Mean	0.04	0	0.03
Standard Deviation	0.27	0	0.25
Min	0	0	0
Мах	4	0	4
Unknown	6	5	11

	C		
	Placement	Non-placement	All
Ν	555	117	672
Mean	0.32	0.26	0.31
Standard Deviation	0.88	0.8	0.87
Min	0	0	0
Мах	7	6	7
Unknown	18	12	30

Exhibit 32. Birth Father Number of Other Children with Birth Mother

Prior Foster Care and Adoption Experiences

Overall, most birth mothers reported no prior adoptive placement (90.17%) with no major differences between birth mothers in the placement (89.53%) and non-placement groups (93.02%) (Exhibit 33). Birth mothers in the placement group may have been slightly more likely to have one (7.33%) or more (2.44%) prior placements but this is difficult to interpret due to the relatively higher proportion of unknown cases in the non-placement group (3.88%). Overall, 5.84% of birth mothers had engaged with Spence-Chapin as a placement organization in the past (Exhibit 34).

Among all birth mothers, 95.44% had not made a prior foster placement (Note: Prior placement organizations include foster care placements.

Exhibit 35). Birth mothers in the placement group may have been slightly more likely to have one (2.09%) or more (1.22%) prior placements but this is difficult to interpret due to the relatively higher proportion of unknown cases in the non-placement group (7.75%).

	Placement		Non-placement		All	
	Column %	Ν	Column %	Ν	Column %	N
Unknown	0.70	4	3.88	5	1.14	8
No Prior Placements	89.53	513	93.02	120	90.17	633
One	7.33	42	2.32	3	6.41	45
Two or more	2.44	14	.78	1	2.14	15
All	100.00	573	100.00	129	100.00	702

Exhibit 33. Birth Mother Number of Prior Placements

Exhibit 34. Birth Mother Prior Placement Organizations

	Group					
	Placement		Non-placement		AII	
	Column %	Ν	Column %	Ν	Column %	N
Unknown	1.40	8	5.43	7	2.14	15
No Prior Placement Organization	89.53	513	93.02	120	90.17	633
Spence-Chapin	6.81	39	1.55	2	5.84	41
Other Organization	2.27	13	0.00		1.85	13
All	100.00	573	100.00	129	100.00	702

Note: Prior placement organizations include foster care placements.

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	Group					
	Placement		Non-pla	icement	All	
	Column %	Ν	Column %	Ν	Column %	N
Unknown	0.52	3	7.75	10	1.85	13
No Prior Foster Placement	96.16	551	92.25	119	95.44	670
One	2.09	12			1.71	12
Two or more	1.22	7			1.00	7
All	100.00	573	100.00	129	100.00	702

Exhibit 35. Birth Mother Number of Prior Foster Placements

Awareness and Involvement of the Birth Father and Family

Overall, birth mothers were about equally likely to report that the child's maternal grandmother was aware (45.58%) of the pregnancy at the time of intake as they were to say that the child's maternal grandmother was unaware (44.02%) (Exhibit 36). Birth mothers in the placement group may have been slightly less likely to report that the child's maternal grandmother was aware (42.58%) when compared to birth mothers in the non-placement group (58.91%), although this may be driven by the relatively higher proportion of maternal grandmothers that were reported to be deceased among the placement group (8.55%) when compared with the non-placement group (1.55%).

Overall, birth mothers were about equally likely to report that other friends and family were aware (46.01%) of the pregnancy at the time of intake as they were to say that they were unaware (43.02%) (Exhibit 37). The large difference in the proportion of unknown cases between placement group and non-placement group birth mothers makes it difficult to interpret any differences between these two groups.

Overall, about 55.98% of birth mothers reported that the birth father was aware of the pregnancy at the time of intake (Exhibit 38) while 26.64% reported that the birth father was involved (Exhibit 39). Birth mothers in the placement group were about as likely to report that the birth father was aware (56.37%) when compared to birth mothers in the non-placement group (54.26%). Birth fathers in the placement group may have been slightly more likely to be involved (27.40%) than fathers in the non-placement group (23.26%) although this may be driven by the relatively higher number of unknown cases in the non-placement group.

	Group					
	Place	ment	Non-placement		All	
	Column %	Ν	Column %	Ν	Column %	Ν
Unknown	3.14	18	3.10	4	3.13	22
Yes	42.58	244	58.91	76	45.58	320
No	45.72	262	36.43	47	44.02	309
Deceased	8.55	49	1.55	2	7.26	51
All	100.00	573	100.00	129	100.00	702

Note: Although the child's maternal grandmother may have been unaware of the pregnancy at the time of intake they may have been aware later in the pregnancy or at the time of birth.

Exhibit 37. Birth Mother Other Family Members Aware of Pregnancy

	Group					
	Placement		Non-placement		All	
	Column %	Ν	Column %	Ν	Column %	Ν
Unknown	4.19	24	41.09	53	10.97	77
Yes	47.99	275	37.21	48	46.01	323
No	47.82	274	21.71	28	43.02	302
All	100.00	573	100.00	129	100.00	702

Note: Prior to 2018, this item asked solely if other family members were aware of the pregnancy and was changed to ask about other friends or family. The item is inclusive of people beyond the child's maternal grandmother.

	Group					
	Place	ment	Non-placement		All	
	Column %	Ν	Column %	Ν	Column %	Ν
Unknown	5.06	29	6.20	8	5.27	37
Yes	56.37	323	54.26	70	55.98	393
No	37.52	215	38.76	50	37.75	265
Deceased	1.05	6	0.78	1	1.00	7
All	100.00	573	100.00	129	100.00	702

Exhibit 38. Birth Father Aware of Pregnancy at Time of Intake

Exhibit 39. Birth Father Currently Involved at Time of Intake

	Group					
	Placement		Non-placement		All	
	Column %	Ν	Column %	Ν	Column %	N
Unknown	3.32	19	12.40	16	4.99	35
Yes	27.40	157	23.26	30	26.64	187
No	68.24	391	63.57	82	67.38	473
Deceased	1.05	6	0.78	1	1.00	7
All	100.00	573	100.00	129	100.00	702

Referral, Pregnancy, Counseling, and Care Experiences

Overall, about 74.36% of birth mothers were referred by a hospital or medical center followed by social services or Planned Parenthood (5.56%) with 8.12% reporting another referral source (

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Exhibit **40**). Birth mothers were about equally as likely to have received (48.86%) prenatal care as to have not received it (48.15%) (Note: The top six named referral sources during the study period included Elmhurst Hospital Center (31 referrals), Stony Brook University Medical Center (26), Jamaica Hospital (23), Mount Sinai Health System (16), Nassau University Medical Center (15), and Woodhull Medical Center (15). Examples of social service referral sources include Catholic Guardian Services, Nassau County Department of Social Services, and Center for Family Life in Sunset Park.

Exhibit 41). Birth mothers in the placement group were about as likely to report that they had not received prenatal care (48.17%) when compared to birth mothers in the non-placement group (48.06%), although this information was unknown for a slightly higher proportion of non-placement cases. Most birth mothers had a vaginal delivery (64.81%) (Note: Birth mother prenatal care represents the birth mother's self-reported prenatal care history at time of intake. It is possible that a birth mother who was pregnant and reported no prenatal care at time of intake received prenatal care after intake and throughout the remainder of her pregnancy.

Exhibit 42). Birth mothers in the placement group may be more likely to have had a Cesarean delivery (21.64%) when compared to birth mothers in the non-placement group (10.85%), although this information was unknown for a higher proportion of non-placement cases.

On average, birth mothers engaged in 4.80 counseling sessions with an average of 5.01 for placement mothers and 3.87 for non-placement birth mothers (Exhibit 43). Overall, 87.89% of birth mothers utilized interim care⁶ (Exhibit 44) for an average of 33.02 days (

⁶ As noted above, all birth mothers in the non-placement group utilized interim care.



Exhibit **45**). The average number of days utilizing interim care was greater for placement group birth mothers (36.29) when compared with non-placement group birth mothers (18.51).

Exhibit 40. Referral Source

	Group					
	Placer	nent	Non-pla	cement	All	
	Column %	Ν	Column %	Ν	Column %	Ν
Hospital or Medical Center	74.17	425	75.19	97	74.36	522
Planned Parenthood	5.93	34	3.88	5	5.56	39
Social Services	6.11	35	3.88	5	5.70	40
Person (self, friend, family)	5.41	31	10.08	13	6.27	44
Other	8.38	48	6.98	9	8.12	57
All	100.00	573	100.00	129	100.00	702

Note: The top six named referral sources during the study period included Elmhurst Hospital Center (31 referrals), Stony Brook University Medical Center (26), Jamaica Hospital (23), Mount Sinai Health System (16), Nassau University Medical Center (15), and Woodhull Medical Center (15). Examples of social service referral sources include Catholic Guardian Services, Nassau County Department of Social Services, and Center for Family Life in Sunset Park.

Exhibit 41. Birth Mother Prenatal Care

	Placement		Non-placement		All	
	Column %	Ν	Column %	Ν	Column %	Ν
Unknown	2.44	14	5.43	7	2.99	21
Yes	49.39	283	46.51	60	48.86	343
No	48.17	276	48.06	62	48.15	338
All	100.00	573	100.00	129	100.00	702

Note: Birth mother prenatal care represents the birth mother's self-reported prenatal care history at time of intake. It is possible that a birth mother who was pregnant and reported no prenatal care at time of intake received prenatal care after intake and throughout the remainder of her pregnancy.

Exhibit 42. Birth Mother Delivery Type

	Group					
	Placement		Non-placement		All	
	Column %	Ν	Column %	Ν	Column %	N
Unknown	14.14	81	21.71	28	15.53	109
Vaginal	64.22	368	67.44	87	64.81	455
Cesarean	21.64	124	10.85	14	19.66	138
All	100.00	573	100.00	129	100.00	702

Exhibit 43. Number of Counseling Sessions

	Gro		
	Placement	Non-placement	All
Ν	573	129	702
Mean	5.01	3.87	4.80
Standard Deviation	3.05	2.90	3.05
Min	1	1	1
Max	20	22	22

Exhibit 44. Birth Mother Used Interim Care

	Placement Non-placement				A	I
	Column %	Ν	Column %	Ν	Column %	N
Yes	85.17	488	100.00	129	87.89	617
No	14.83	85			12.11	85
All	100.00	573	100.00	129	100.00	702

	Gre		
	Placement	Non-placement	All
Ν	573	129	702
Mean	36.29	18.51	33.02
Standard Deviation	31.93	15.77	31.93
Min	0.00	1.00	0.00
Max	233.00	96.00	233.00

Exhibit 45. Birth Mother Number of Days of Interim Care

Post Adoption Contact Agreements and Expectations⁷

Among mothers who made an adoptive placement with Spence-Chapin, most chose a non-enforceable post-adoption contact agreement⁸ (64.22%) (**Exhibit 46**). The highest proportion of birth mothers in the placement group expected face to face or virtual contact more than once a year followed by having no contact specified (27.75%) (Note: Only birth mothers that made an adoptive placement with Spence-Chapin would have a post-adoption contact agreement and therefore this is not applicable for the non-placement group and the entire group is represented in the "unknown" category.

Exhibit 47). Within the placement group, most birth mothers (64.92%) expected contact more than once a year via email from the adoptive parent(s) (Note: Only birth mothers that made an adoptive placement with Spence-Chapin would have a post-adoption contact agreement and therefore this is not applicable for the non-placement group and the entire group is represented in the "unknown" category.

Exhibit 48).

	Placer	nent	Non-pla	cement	All	
	Column %	Ν	Column %	Ν	Column %	N
Unknown	12.74	73	100	129	28.35	199
Enforceable contact agreement (PACA)	11.69	67			9.54	67
Non-enforceable contact agreement	64.22	368			52.42	368

Exhibit 46. Enforceable or Unenforceable Post-Adoption Contact Agreement

⁷ New York law changed in 2005 to recognize enforceable post-adoption contact agreements and birth mothers are given the choice to execute a surrender conditioned on ongoing contact pursuant to New York law.

⁸ The post adoption contact agreements outlined anticipated forms of contact such as face-to-face, email, and related forms of contact.



		Gro				
	Placement		Non-placement		All	
	Column % N C		Column %	Ν	Column %	Ν
Chose no contact	11.34	65			9.26	65
All	100.00	573	100	129	100.00	702

Note: Only birth mothers that made an adoptive placement with Spence-Chapin would have a post-adoption contact agreement and therefore this is not applicable for the non-placement group and the entire group is represented in the "unknown" category.

Exhibit 47. Expected Number of Annual Visits

	Placem	nent	Non-pla	Non-placement		All	
	Column %	Ν	Column %	Ν	Column %	N	
Unknown	8.73	50	100.00	129	25.50	179	
Face to face or virtual more than once a year	35.08	201			28.63	201	
Face to face or virtual once or less a year	13.96	80			11.40	80	
No contact at present, may request future contact	6.28	36			5.13	36	
No contact specified	27.75	159			22.65	159	
Other arrangement	8.20	47			6.70	47	
All	100.00	573	100.00	129	100.00	702	

Note: Only birth mothers that made an adoptive placement with Spence-Chapin would have a post-adoption contact agreement and therefore this is not applicable for the non-placement group and the entire group is represented in the "unknown" category.

Exhibit 48. Expected Number of Annual Emails from Adoptive Parent

		Gr					
	Placen	nent	Non-plac	Non-placement		All	
	Column %	Ν	Column %	N	Column %	Ν	
Unknown	10.65	61	100.00	129	27.07	190	
Contact more than once a year	64.92	372			52.99	372	
Contact once or less a year	6.11	35			4.99	35	



	Placement		Non-placement		All	
	Column %	Ν	Column %	N	Column %	N
No contact at present, may request future contact	1.05	6			0.85	6
No contact	12.57	72			10.26	72
Other arrangement	10.65	61	100.00	129	27.07	190
All	100.00	573	100.00	129	100.00	702

Note: Only birth mothers that made an adoptive placement with Spence-Chapin would have a post-adoption contact agreement and therefore this is not applicable for the non-placement group and the entire group is represented in the "unknown" category.

The study team conducted Pearson's chi-squared tests⁹ to examine the association between birth mother and birth father characteristics and adoption and pregnancy experiences and outcomes based on the known data. The tests revealed statistically significant associations with a p-value at or below .01 for the following variables based on valid percentages, suggesting that there is a relationship between the variables noted below.

- Birth mother's age at time of inquiry and whether the child's maternal grandmother was aware of the pregnancy (p<.01), whether other family members were aware of the pregnancy (p<.01), and the type of delivery (p<.01).
- Race and ethnicity and use of interim care (p<.01) and number of counseling sessions (p<.01)
- Whether the child's maternal grandmother was aware of the pregnancy and the number of counseling sessions (p<.01)
- Number of biological children and number of days in interim care (p<.01)
- Birth mother's relationship status and number of days in interim care (p<.01) and use of interim care (p<.01)
- Birth mother education level and use of interim care (p<.01)
- Birth father involvement and use of interim care (p<.01)

The study team conducted Pearson's chi-squared tests to examine the association between placement and non-placement birth mothers and birth mother and father characteristics and variables related to adoption and pregnancy experiences and outcomes based on the known data. The tests revealed

⁹ The chi-square test is intended to test how likely it is that an observed distribution is due to chance. It measures how well the observed distribution of data fits with the distribution that is expected if the variables were completely independent. The chi-square only determines whether two variables are related. It does not necessarily follow that one variable has a causal relationship with the other. Further, it is important to consider that a statistically significant relationship between two variables does not necessarily imply that the relationship between the variables is meaningful.

statistically significant associations with a p-value at or below .01 between group membership and the following variables. This suggests that there may be a relationship between whether a birth mother made an adoptive placement or not and the referenced variable.

- Whether the child's maternal grandmother was aware of the pregnancy (p<.01)
- The type of delivery (p<.01)
- The number of counseling sessions (p<.01)
- Whether the child's maternal grandmother was aware of the pregnancy (p<.01)
- Number of children living in foster care (p<.01)
- Number of children living elsewhere (p<.01)

Adoption Experiences of Spence-Chapin Mothers and the Impact of Adoption

The next two sections of the report address Tasks 4 (*Survey of Spence-Chapin Birth Mothers*) and 5 (*Interviews with Spence-Chapin Birth Mothers*), in which the overarching goals were to better understand birth mothers' experiences of adoption and their perceptions of the impact of adoption on their subsequent well-being.

The specific research questions addressed in these tasks include:

- Question 3: For birth mothers who chose open adoption, what are their experiences regarding: Spence-Chapin options counseling; Spence-Chapin placements processes; contact and relationship quality with the adopted child(ren);
- **Question 4:** What are birth mothers' perceived impacts of adoption (whether they chose adoption or not) pertaining to: their overall-being and self-sufficiency and the well-being of the adopted child(ren)?

In addition, in discussion with Spence-Chapin, additional areas of interest from the surveys and interviews emerged. These include: understating more details about birth mothers' decision-making processes; disclosures to friends and family about the adoption; and usage of Spence-Chapin's interim care and other services.

Demographic Description of Survey Participants

- Approximately half of the survey respondents reported having one pregnancy and adoption experience with Spence-Chapin;
- The participants' average age at their *first* pregnancy was 22 (ranged from 15-37 years);

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- Placements of survey respondents occurred between 2004 and 2021;
- The average number of years since placement at the time of surveys was seven years;
- The largest proportion of survey respondents was making less than \$30,000/year at the time of the survey, but the second largest group was making between \$90,000-\$120,000/year at the time of the survey;
- About 34% of participants self-identified as Hispanic (any race), 30% self-identified as White, 18% self-identified as Black, and 18% self-identified as another racial identity;
- Regarding their marital status, 48% of survey participants indicated they were currently single and not in a relationship; 33% reported being married, to someone other than the birth father, while 13% were married to the birth father. The remaining women indicated they were divorced, separated, or failed to specify their marital status.

Outreach to Spence-Chapin and Adoption Decisions

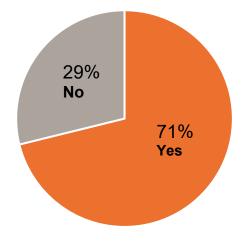
When asked about the circumstances of their initial contact and engagement with Spence-Chapin (Exhibit 49 and Exhibit 50), for the participants in this survey, the most common referral source to Spence-Chapin was from a hospital or health clinic (59%). Over two-thirds of the survey participants reached out to Spence-Chapin on their own (In Exhibit 50 below, results convey when participants considered Spence-Chapin specifically).



Exhibit 49. How Birth Mother Learned About Spence-Chapin (n=51)¹⁰

	n	%
Referral from hospital or health clinic	30	59
Learned about Spence-Chapin on my own	12	24
Referral from social services or children's services	5	10
Referral from family member	2	4
Other	2	4

Exhibit 50. Reached Out to Spence-Chapin on My Own Behalf (n=52)



Respondents were asked when they first considered adoption as an option for their pregnancies. Considering adoption occurred during pregnancy for 58% of the survey participants, while 27% indicated they made this decision at or after the time of the birth, and an additional 4% considered adoption at one or more months after giving birth.

Exhibit 51. Timing of decision to place for adoption (n=52)

	N	%
Before Pregnancy	6	12
During Pregnancy ¹¹	30	58
At the time of birth (within 1 month of birth)	14	27
One or more months after birth	2	4

¹⁰ The response rate varies for many of the questions as some questions were left blank by participants.

¹¹ Important to note that this response option did not specify the time point during pregnancy

Moreover, when asked when they considered Spence-Chapin specifically, about half of survey respondents considered using Spence-Chapin for adoption services at or shortly after the time of their child's birth (50%).

Exhibit 52. Timing of Decision to Consider Spence-Chapin (n=52)

	N	%
Before Pregnancy	3	6
During Pregnancy	21	40
At the time of birth (within 1 month of birth)	26	50
One or more months after birth	2	4

Survey respondents were also asked to describe the decisions they made about all their pregnancies over time. At the time of first pregnancy, more than half of respondents (57%) placed their children for adoption. Only about 40% of respondents described having more than one pregnancy, and lower percentages of respondents placed children for adoption in subsequent pregnancies compared to first pregnancies.

Exhibit 53. Pregnancy Decisions

Pregnancy (number of respondents)*	Chose to Parent n (%)	Miscarriage n (%)	Placed for Adoption n (%)	Terminated pregnancy n (%)	Utilized kinship care n (%)
First (n=44)	14 (32%)	1 (2%)	25 (57%)	3 (7%)	1 (2%)
Second (n=21)	9 (43%)	1 (5%)	9 (43%)	2 (10%)	-
Third (n=11)	7 (64%)	1 (9%)	3 (27%)	-	-
Fourth (n=7)	4 (57%)	-	2 (29%)	1 (14%)	-
Fifth (n=4)	3 (75%)	-	1 (25%)	-	-
Sixth (n=3)	1 (33%)	-	1 (33%)	1 (33%)	-

*8 responses missing

Utilization and Perception of Spence-Chapin Services

Participants were asked to complete several rating scales about their experiences working with Spence-Chapin. Participants were provided with an overview of the services provided by Spence-Chapin so that all participants were operating from the same definitions of services. These are described in Appendix C. However, as discussed later in this report, in the Limitations section, not every participant may have remembered the name(s) of services they received about services and therefore may not have responded to survey questions specifically about these services. As a result, participant response rates to several questions (as shown in Exhibits 54-61) fluctuate in the summary of results. Moreover, it is also possible that participants may have declined to respond questions about



services received. As shown in Exhibit 54, when asked about their *experiences working with Spence-Chapin*, average scale scores appraising social workers at Spence-Chapin fell between "agreement" and "strong agreement" indicating a positive overall experience with Spence-Chapin social work services.



Exhibit 54. How Much Do You Agree or Disagree with The Following Statements About Your Experience with Your Spence-Chapin Assigned Social Worker(s)?

Question	Strongly Disagree n (%)	Somewhat Disagree n (%)	Neither agree nor disagree n (%)	Somewhat agree n (%)	Strongly agree n (%)
The Spence-Chapin assigned social worker provided helpful information (n=52)	-	-	1 (2%)	9 (17%)	42 (81%)
The Spence-Chapin assigned social worker helped you better understand your options, including making an adoption plan (n=52)	-	-	1 (2%)	10 (19%)	41 (79%)
You felt like the Spence- Chapin assigned social worker persuaded you toward a certain decision like adoption (n=51)	24 (47%)	2 (4%)	9 (18%)	5 (10%)	11 (22%)
The Spence-Chapin assigned social worker informed you about your legal rights in the adoption process (n=51)	-	-	1 (2%)	12 (24%)	38 (75%)
The Spence-Chapin assigned social worker provided you with informational brochures or paperwork (n=51)	-	2 (4%)	2 (4%)	14 (27%)	33 (65%)
The Spence-Chapin assigned social worker were warm and kind (n=51)	1 (2%)	-	1(2%)	8 (16%)	41 (80%)
The Spence-Chapin assigned social worker answered all of your questions (n=52)	-	-	1 (2%)	8 (15%)	43 (83%)

With respect to how *helpful the participants perceived the Spence-Chapin services*, average scale scores appraising Spence-Chapin counseling services fell between "agreement" and "strong agreement", indicating a positive overall experience with Spence-Chapin counseling services.

Exhibit 55. How Helpful Or Unhelpful Would You Describe The Services You Participated In During Your Pregnancy at Spence-Chapin?

	Extremely Unhelpful	Unhelpful	Neither helpful nor unhelpful	Helpful	Extremely Helpful
Services	n (%)	n (%)	n (%)	n (%)	n (%)
Options Counseling (n=38)	-	-	4 (11%)	6 (16%)	28 (74%)
Received metro cards and/or food gift cards (n=24)	2 (8%)	1 (4%)	4 (17%)	8 (33%)	9 (37%)
Referrals to external programs (n=25)	1 (4%)	1 (4%)	5 (20%)	11 (44%)	7 (28%)
Making a plan for my child (n=42)	1 (2%)	1 (2%)	3 (7%)	12 (29%)	25 (60%)
Hospital/Birth planning (n=31)	1 (3%)	-	7 (23%)	12 (39%)	11 (35%)
Adoptive parent match meetings (n=43)	-	-	4 (9%)	12 (28%)	27 (63%)
Interim Care (n=39)	1 (3%)	-	5 (13%)	10 (26%)	23 (59%)
Legal Services (n=35)	1 (3%)	-	7 (20%)	7 (20%)	20 (57%)
Post Placement Services (n=41)	1 (2%)	2 (5%)	7 (17%)	10 (24%)	21 (51%)

Options Counseling

With respect to the utilization specifically of *Options Counseling*, almost three-quarters of survey participants indicated they had used this Spence-Chapin service. Of this group, their average scale scores were mostly in the positive range (i.e., "extremely helpful"). In addition, 24 respondents responded to queries about specific attributes of the *Options Counseling* services (see Exhibit 56). On balance, most of these participants rated these service attributes in the positive range (i.e., between "somewhat agree" to "strongly agree"). As noted earlier, several participants skipped questions about services previously received from Spence-Chapin.

Exhibit 56. How much do you agree or disagree with the following statements about your experiences with Spence-Chapin Options Counseling services?

Question	Strongly Disagree n (%)	Somewhat Disagree n (%)	Neither agree nor disagree n (%)	Somewhat agree n (%)	Strongly agree n (%)
The counselor was an important person in my decision-making process (n=24)	1 (4%)	1 (4%)	2 (8%)	5 (21%)	15 (63%)
The counselor discussed my options and goals (n=24)	-	-	1 (4%)	5 (21%)	18 (75%)
The counselor helped me explore ways I could parent including the benefits and challenges (n=24)	-	-	5 (21%)	4 (17%)	15 (63%)
The counselor helped me explore making an adoption plan including benefits the challenges (n=24)	-	-	2 (8%)	6 (25%)	16 (67%)
The counselor helped me explore alternative options such as foster care, termination, and kinship including the benefits and challenges (n=24)	-	1 (4%)	9 (38%)	6 (25%)	8 (33%)
The counselor helped me understand all options regarding my child (n=24)	-	-	2 (8%)	5 (21%)	17 (71%)
The counselor encouraged me to make a decision that was best for me and my child (n=24)	-	-	1 (4%)	6 (25%)	17 (71%)
The counselor motivated me to continue services with Spence-Chapin (n=24)	1 (4%)	-	4 (17%)	6 (25%)	13 (54%)
The counselor made me feel safe using Spence-Chapin services (n=24)	-	-	1 (4%)	3 (13%)	20 (83%)
The counselor made me feel confident about my decision (n=24)	-	-	5 (21%)	1 (4%)	18 (75%)

Interim Care

As shown in Exhibit 57, close to three-quarters of participants indicated they had used *Interim Care services* at Spence-Chapin. Of this group, most found this service to be helpful to extremely helpful.

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For the 29 participants who responded to queries about specific attributes of the *Interim Care* process, their scores were very positive. Participants responded very positively about the respite care, visitation arrangements, the family who cared for the child, counseling sessions, and participants' own family relations during this interim period. As noted earlier, several participants skipped questions about services previously received from Spence-Chapin

Exhibit 57. How helpful or unhelpful would you describe the following services and opportunities during the Interim Care process?

Question	Extremely Unhelpful n (%)	Unhelpful n (%)	Neither helpful nor unhelpful n (%)	Helpful n (%)	Extremely Helpful n (%)
Respite care for my baby or newborn (n=29)	-	-	1 (3%)	5 (17%)	23 (79%)
Visits with your child (arrangements made to spend time with your baby, participate in doctors' appointments, etc.) (n=29)	1 (3%)	-	5 (17%)	5 (17%)	18 (62%)
The family that cared for your child (n=29)	-	-	2 (7%)	4 (14%)	23 (79%)
Opportunity to participate in options counseling sessions (n=29)	-	1 (3%)	6 (21%)	5 (17%)	17 (59%)
Your relationships with your own family members, friends, partners, or external sources during the interim care time (n=29)	-	2 (7%)	1 (3%)	6 (21%)	20 (69%)

Moreover, satisfaction with this service provision was quite high for those who responded to this question (see Exhibit 58).

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Exhibit 58. Interim Care Satisfaction

Question	Very negative n (%)	Somewhat Negative n (%)	Neutral n (%)	Fairly Positive n (%)	Very positive n (%)
How would you rate your overall experience with the interim care program? (n=29)	-	1 (3%)	2 (7%)	5 (17%)	21 (72%)

Legal Services (arranged by Spence-Chapin)

As shown in Exhibit 59, approximately two-thirds of participants used *Legal Services* provided by independent counsel arranged by Spence-Chapin. In terms of the helpfulness of this service, for those participants who used this service, over half believed the service to be extremely helpful. Of the participants who responded about their experience with this service, most believed their experience had been very positive. As noted earlier, several participants skipped questions about services previously received from Spence-Chapin

Exhibit 59. Legal Representation Rating

Question	Very negative n (%)	Somewhat Negative n (%)	Neutral n (%)	Fairly Positive n (%)	Very positive n (%)
How would you rate your experience with legal representation arranged by Spence-Chapin? (n=16)	-	-	3 (19%)	4 (25%)	9 (56%)

Adoption Matching Services

A final Spence-Chapin service that participants were surveyed about is the *Adoption Family Matching* service. Over 80% of participants responded to this question, most of whom found the overall service to be extremely helpful. In addition, of these participants, most rated their satisfaction with specific attributes of this process (i.e., overall experience; reviewing profile books; meetings with potential families) as extremely positive (Exhibit 60). As noted earlier, several participants skipped questions about services previously received from Spence-Chapin

Question	Extremely negative n (%)	Negative n (%)	Neutral n (%)	Positive n (%)	Extremely positive n (%)
Rate your overall experience with the process of choosing an adoptive family (n=44)	-	-	6 (14%)	11 (25%)	27 (61%)
Rate your experience reviewing the books/profiles and descriptions of the potential adoptive families (n=44)	-	2 (5%)	6 (14%)	14 (32%)	22 (50%)
Rate your experience meeting with potential adoptive parents (n=42)	-	1 (2%)	3 (7%)	14 (33%)	24 (57%)

Exhibit 60. Satisfaction with Adoptive Family Matching Process

Moreover, with respect to the helpfulness of meeting with potential adoptive families (Exhibit 61), most participants rated this as extremely helpful, while most participants also indicated high satisfaction with the overall process.

Exhibit 61. Helpfulness and Satisfaction of Meeting Adoptive Families

Question	Extremely Unhelpful n (%)	Unhelpful n (%)	Neither helpful nor unhelpful n (%)	Helpful n (%)	Extremely Helpful n (%)
To what extent did meeting potential adoptive families help you make your final decision about adoption? (n=43)	-	-	5 (12%)	12 (28%)	26 (60%)
How satisfied were you with the SC matching process? (n=44)	-	1 (2%)	5 (11%)	13 (30%)	25 (57%)

Follow-up Analysis Regarding Spence-Chapin Services

As shown in Exhibit 62, we examined group differences pertaining to the race and ethnicity¹² of the participants and the average rating of their *satisfaction with social work services* at Spence-Chapin. Black survey participants on average rated satisfaction with social workers and utility of services highest, followed by Hispanic participants, white participants, and all other participants.

	Mean	SD	Ν
Black	4.73	0.36	9
Hispanic	4.46	0.36	17
Other	4.05	0.42	9
White	4.42	0.23	16
Total	4.42	0.39	51
F(3,50)=6.36; p<.01			

Exhibit 62. One-way ANOVA Testing Difference in Social Worker Scale Scores by Birth Mother Race/Ethnicity

In addition, we examined differences by participants with respect to how they rated the *utility of Spence-Chapin services*. As shown in Exhibit 63, in this sample, Black participants on average rated utility of services highest, followed by white participants, Hispanic participants, and all other participants.

Exhibit 63. One-way ANOVA Testing Difference in Utility Of Services Scale Scores By Birth Mother Race/Ethnicity

	Mean	SD	Ν
Black	4.60	0.45	9
Hispanic	4.48	0.50	16
Other	3.60	0.98	8
White	4.49	0.53	15
Total	4.36	0.68	48
F(3,50)=5.19; p<.01	1		

¹² Note that bivariate analyses assessing differences in scale scores by income level were also examined and were not statistically significant.

Adoption Planning & Contact with Adoptive Family

In the survey, participants were asked a number of questions about their experiences with pursuing an *Open Adoption arrangement*. In this sample, 37 participants (69%) indicated they had pursued an open adoption, using forms such as the Post Adoption Contact Agreement (PACA) or an Openness Agreement. When asked if specific individuals in their lives were aware of this arrangement: 48% indicated the birth father was aware, 54% indicated their family members were aware, and 40% indicated their friends were aware. For the seven participants who responded to a survey question about why they did not pursue an open adoption arrangement, they endorsed the following responses: family and/or friends unaware of pregnancy; believed an open adoption would be too painful; was not open to continuing relationship at time of placement. In addition, one participant indicated she would be interested in pursuing a relationship with the adopted child at a later date.

In terms of the participants' ongoing relationship with the *Open Adoption arrangement*, Exhibit 64 conveys these results. Please note that even if respondents did not pursue an open adoption and create post-adoption contact agreements at the time of placement, they still sometimes ended up having relationships with the adoptive family and their child after the adoption. Therefore, all participants in this survey were asked about the quality of relationships and post-adoption contact. As noted earlier in the Demographic overview, the average number of years since placement occurred for participants was 7-years. Therefore, the ages of the children represented in this table vary and may account for differences in relationships with them and their adoptive families. While the results are mostly positive for birth mothers' relationships with the adopted children, the relationships with the adoptive families are bit more mixed.

Question	Mostly negative n (%)	Somewhat Negative n (%)	Neither negative or positive n (%)	Somewhat Positive n (%)	Mostly positive n (%)	Unsure n (%)
My relationship with my child is (n = 52)	1 (2%)	2 (4%)	9 (17%)	1 (2%)	30 (58%)	9 (17%)
My relationship with the adoptive family is (n = 51)	-	2 (4%)	7 (14%)	33 (65%)	-	9 (18%)

Exhibit 64. Relationship with Adoptive Family and Child

Birth mothers' assessments of their contact with their adopted child and adoptive family are summarized in Exhibit 65. Here the results are again somewhat mixed, with higher satisfaction scores for visits and communication with the adopted children compared to satisfaction scores with the level of visits and communication with the adoptive families.

Exhibit 65. Post-adoption Contact

	Extremely Unsatisfied	Unsatisfied	Neither satisfied nor unsatisfied	Satisfied	Extremely Satisfied
Question	n (%)	n (%)	n (%)	n (%)	n (%)
The number of visits I have with the child (n=49)	1 (2%)	6 (12%)	10 (20%)	14 (29%)	18 (37%)
The amount of communication I have with my child including texts, phone calls, emails, sharing of photos and videos, and other online communication (n=49)	4 (8%)	1 (2%)	14 (29%)	14 (29%)	16 (33%)
The number of visits I have with the adoptive family (n=49)	3 (6%)	4 (8%)	11 (22%)	18 (37%)	13 (27%)
The amount of communication I have with the adoptive family including texts phone calls, emails, sharing of photos and videos, and other online communication (n=49)	4 (8%)	3 (6%)	10 (20%)	17 (35%)	15 (31%)

Follow-up Analysis Regarding Contact with Adoptive Families

In Exhibit 66 the results from our examination on racial and ethnic differences¹³ in terms of participants' *satisfaction with contact with adoptive families*. The results show that Hispanic participants rated their satisfaction with contact highest, followed by white participants, Black participants, and participants from all other racial categories.

Exhibit 66. One-way ANOVA testing difference in satisfaction with contact scale scores by birth mother race/ethnicity

	Mean	SD	Ν
Black	3.41	1.64	8
Hispanic	4.25	0.86	16
Other	2.97	1.01	9
White	3.90	0.79	15
Total	3.76	1.10	48
F(3,50)=3.37; p<.05	'		

Finally, we note that survey participants were also asked to rate their **satisfaction with postplacement services**. However, only 10 participants responded to this question, with all but two of these ten participants indicating high satisfaction with these services. While we don't provide a table of results to share about this survey question, we do believe it is important to note that this question was skipped by many of the survey participants

Post-Adoption Well-being

With respect to how participants viewed their current lives, subsequent to their adoption experiences (see Exhibit 67), overall, participants' *current satisfaction with their well-being* is rather high. Participants endorsed *extreme satisfaction* with their physical safety, physical health, romantic relationships, spirituality, family relationships, and friendships. The indicated *satisfaction with their emotional well-being*, finances, career, living environment, and recreation activities.

¹³ Note that bivariate analyses assessing differences in scale scores by income level were also examined and were not statistically significant.

Exhibit 67. How would you rate your overall life satisfaction in each of the following areas since the adoption?

Domain	Extremely Unsatisfied	Unsatisfied	Neither satisfied nor unsatisfied	Satisfied	Extremely Satisfied
Domain	n (%)	n (%)	n (%)	n (%)	n (%)
Emotional well-being (n=50)	2 (4%)	3 (6%)	6 (12%)	20 (40%)	19 (38%)
Finances (n=49)	3 (6%)	5 (10%)	11 (22%)	18 (37%)	12 (24%)
Physical Safety (n=50)	1 (2%)	-	8 (16%)	16 (32%)	25 (50%)
Physical Health and well- being (n=50)	1 (2%)	2 (4%)	9 (18%)	17 (34%)	21 (42%)
Housing (n=50)	-	7 (14%)	21 (42%)	22 (44%)	-
Romantic Relationships (n=48)	-	3 (6%)	11 (23%)	15 (31%)	19 (40%)
Spirituality (n=50)	1 (2%)	3 (6%)	12 (24%)	15 (30%)	19 (38%)
Family (n=49)	1 (2%)	2 (4%)	7 (45%)	14 (29%)	25 (51%)
Friendships (n=50)	1 (2%)	1 (2%)	7 (14%)	19 (38%)	22 (44%)
Career (n=50)	-	1 (2%)	9 (18%)	22 (45%)	18 (36%)
Environment – housing, neighborhood, community (n=50)	-	-	5 (10%)	24 (48%)	21 (42%)
Recreation – leisure life, activities for fun (n=50)	-	2 (4%)	5 (10%)	23 (46%)	20 (40%)

Moreover, participants were asked to indicate which *life milestones* they had achieved since receiving services from Spence-Chapin. In Exhibit 68, we present their responses. Please note that participants were asked to "select all that apply." The most frequently endorsed responses were: securing employment/switching careers; starting new relationships; choosing to parent a child; pursuing further education.

Exhibit 68. What Life Milestones Have Occurred for You Since Placing Your Child For Adoption with Spence-Chapin Services? (Select All That Apply) (n=50)

Started a new relationship

Ν

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	N
Secured employment or switched to a new career	20
Chose to parent a child	11
Pursued a degree in higher education or technical field	11
Decided to have more children	9
Completed high school or GED	8
Got married	6
Completed a degree in higher education or technical filed	6
Placed a child for adoption	1
Terminated a pregnancy	0
Other	10

In terms of how participants reported on "other" *life milestones*, these participants provided the following verbatim open-ended responses:

- My life was never bad but it has improved
- Moved
- Moved to a new state
- Mental therapy
- Started my own business
- Rehabilitated from my substance abuse issues and addressed state of my mental health at the time of my pregnancy.
- Went back home and built a better relationship with my family.
- More depressed than before & never wanting another child again.
- I'm in college now

In addition, in the survey we asked participants to indicate what they wish they had done differently, if anything. Exhibit 69 conveys these results. Participants could "select all that apply" responses. Most participants indicated they were "fine with how they handled the situation." With respect to those who indicated "other", their open-ended responses included:

- I wish I was more aware of support groups with other birth moms and knew more birth moms. I sometimes felt every isolated because I didn't know anyone who had gone through what I had gone through.
- I enjoyed attending the birth mom celebrations held every year.

- The possibility of another family member raising the child, if I recall correctly, was not discussed, and I wish it had been.
- I Would have kept my child.

Exhibit 69. Looking back on your experiences, is there anything you think you would have done anything differently? (Select all that apply) (n=51)

	Ν
Nothing, I am fine with how I handled the situation	35
I would have reached out to Spence-Chapin earlier	8
I would have used more of Spence-Chapin services	7
I would have selected a different adoptive family	2
I would have made a different decision about the placement of my child	2
I would have made a different decision about the level of contact with my child	2
I would have involved my own family more in the adoption process	1
I would have involved the birth father more in the adoption process	1
I would have used a different adoption agency	0
Other, please explain	3

Wrap-Up Comments on the Survey

In the final section of the survey, participants were asked to offer any summary comments and suggestions for improving services offered by Spence-Chapin. Their open-ended verbatim responses included:

Suggestions for Improvement:

- 1. Make post placement services clearer. Offer more of them.
- 2. Don't pressure them like time is running out.

Their Final Summary comments included:

• After placing my birth [child] through Spence-Chaplin, I actively participated in a number of events and outreach programs. A year or so after our placement, there were changes at the organization including my counselor, who I formed a relationship with, leaving. I was not informed of this and found out only after I reached out. The way this transpired was pretty devastating and undermined my positive feelings about the agency/my ability to rely on Spence-Chapin as a support system.

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- It's been 11 years since I last used your services but from what I remember, aside from the sadness of placing my child in adoption, the process was smooth. The staff was nice and helpful and most of all, understanding. I'm happy with the relationship I now have with my child as she knows I'm her biological mother and calls me mom. Her adoptive parents are the best people I could have ever chosen for her. Thank you, Spence-Chapin.
- My experience with the adoption would not have been as emotionally stable if not for {name is blank to protect identity of the respondent}, my counselor at the time.
- Spence-Chapin was pretty sensitive towards {around gender inclusivity}... I hope you continue to work on creating a safe environment for {them}.
- They gave options and reaffirmed that these are all choices we make nobody is forcing us, even though we felt, at the time, that we had no control. They helped me understand my autonomy.
- Let the mother see her kid when she wants to even if it's in interim care. The BABY STILL BELONGS TO HER!

Interview Findings

When examining the interview data and analyzing the participant responses, it was clear that a few of the domains were most important to participants' experiences with Spence-Chapin (see Appendix D for additional quotes derived from interviews). The consistent findings *across participants* include:

- · Life circumstances at time of pregnancy informed adoption decisions
- Interim care services and selection of adoptive parents were key to program success
- Relationships with social workers were key to satisfaction with adoption experience and services
- **Post-adoption contract agreements** served as a starting point to inform subsequent contact for birth parents and adoptive families but did not necessarily determine the quality of relationships moving forward between birth parents and adoptive families.
- Areas of improvement for Spence-Chapin included increased advocacy during hospital stays, as well as modified aftercare services and continuity of relationships between birth mothers and Spence-Chapin.

Pregnancy experiences and adoption decisions. Most participants interviewed described their life circumstances during their pregnancy/delivery of their baby as challenging due to financial hardships, relationship strains, substance use, and housing instability, among other reasons. Few participants reported they had sufficient social/familial support they would have needed to parent. One participant explained her financial difficulties at the time of pregnancy:

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"I'm still broke, I'm already at the point where if an additional expense comes up beyond my usual, I have to decide between like okay what utility can I put off paying? And I was like what am I going to do if that's like [baby's] doctor's bill?"

-Participant 8

Most birth mothers (in these interviews) had decided that they did not want to parent upon learning they were pregnant. A couple of birth mothers were unaware of their pregnancy until they gave birth, at which time they decided to consider adoption. While a couple of birth mothers explained that they were presented with options when they learned they were pregnant, a few also noted that they were "past the cut off for abortion" and therefore felt their options not to parent were limited to adoption.

"I just found out I was pregnant, I was in college and I was definitely in denial about it. And by the time I made it to the clinic I was way past in New York State law of 24 weeks. So, then I was like, "Well, I really don't want parent, definitely not something I want to do." So, Spence-Chapin was my only option. I went in there and I was like, "This is what I'm doing, this is what I need help with," and together we made it happen."

-Participant 3

A couple of birth mothers had Child Protective Services involvement at the time of birth due to the circumstances of their delivery and prenatal care (or perceived lack thereof). This occurred when hospital personnel contacted CPS. The prospect of CPS involvement was present for the baby as well as other children the birth mothers were already parenting. Birth mothers we spoke to who were in these situations felt their only option for their babies was adoption as they did not want them going into foster care/CPS custody. *Importance of interim care services and adoptive family selection.* Most birth mothers in the sample utilized interim care and had positive experiences with it. A couple of birth mothers noted (in the following verbatim quotes) that the time their baby was in interim care allowed them to solidify their decision not to parent or gave them the space to feel more confident with that decision.

"Even though I was pursuing adoption, I was pretty clear the whole time that I wasn't going to like make my decision for sure until the baby had left my body because I was like, I don't know how I'm going to feel. So, I have what I think is the right path in mind but I'm open to being wrong about that."

-Participant 8

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All of the birth mothers who utilized interim care shared positive memories of the experience, describing how they were able to visit with their babies, attend doctor's appointments, and even were given mementos from their interim caregivers such as photo books. A couple of birth mothers specifically mentioned how well-cared for their babies seemed to be during interim care and how fondly they recall the interim caregivers their babies were placed with during that time.

"I remember her husband and she had a daughter who was in college, but she was home for college and I met all of them and they were taking good care of her and she made me a photo album of the baby, talking about it makes me tear up."

-Participant 9

All but one birth mother interviewed felt positively about the process of selecting adoptive parents. Many birth mothers explained that they sought out Spence-Chapin services, or were drawn to them, because of their open-minded, judgement-free and inclusive sentiment. This was particularly important for some birth mothers in the sample when choosing an adoptive family. A number of birth mothers wanted their babies to be adopted by couples in the LGBTQ+ community and were happy that Spence-Chapin was inclusive in serving adoptive families.

Birth mothers described being presented with a binder or folder of potential adoptive parents and being allowed to review the adoptive parents' information without pressure or judgement. Birth mothers explained that they were then permitted to select a few possible adoptive families they were interested in, and from there, they were able to meet potential adoptive parents and find out more information. While one birth mother did note that she felt pressured to choose an adoptive family because of time constraints, others expressed they appreciated the entire process and felt positively about it.

"At one point when we met [adoptive parents], they mentioned that since we've been basically once you start the process that they have to be ready for a baby at any moment and so they had been doing that for a long time, it would have been six months at that point that they had all this baby stuff ready to go and I remember when I was learning that and it just provided me a lot of comfort and I really liked that they had been waiting for so long to have I really enjoyed hearing that. I think the process was overall really positive especially once we began to talk about the sort of parameters of what the open adoption would be like and the ways in which I could continue to be a part of [adopted child's] life which had not even really occurred to me as a possibility, but was overall, I'm really happy that, that decision was made and then I could still be a part of his life."

-Participant 1

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Meaningfulness of birth mother relationships with social workers. One of the most important aspects of birth mothers' experiences with Spence-Chapin services was their relationships to their assigned social workers. Almost all the participants discussed how their social worker had been integral to their experience. For some, it was as simple as that the social worker made them feel comfortable throughout the adoption process, and their appraisal of their social workers reflected these perspectives. As one participant said:

"I thought [the social worker] provided great service and I felt like she always had my interest at heart always and made sure I was okay and the baby was going to be safe and I always felt that way."

-Participant 9

Another reason that social workers were so impactful for birth mothers that came up during the interviews was that birth mothers felt assured that their social workers were truly advocating on their behalf. One reason for this was because they knew that their social workers were not also working with or representing adoptive families. One birth mother said that it made her feel better knowing that her social workers was only thinking about what was best for her:

"[My social worker] also told me that she doesn't work with pre-adoptive families at all. Like, she's - that she only works with folks in my situation. I don't think she even referred - I don't think she even used the term birth parents because like that would imply that adoption was a foregone conclusion. So I don't remember what term she used, but like knowing that she didn't have any adoptive families in her ear, being like, hey, like can we get - can we get a kid?"

-Participant 8

Many of the birth mothers had such a positive relationship with their social workers that they maintained a relationship with their social workers after their adoptions had finalized. These relationships were viewed positively and made them feel supported after concluding services with Spence-Chapin. One participant described her follow-up experiences with her social worker:

"Even after he was adopted, I still got contacted by the adoption counselor to see how everything was, See if everything was as I dreamed it would be see if there's anything else that you could do for me. She still reached out for at least, a month or two to make sure everything was okay."

-Participant 2

Another participant said that her relationship with her social worker had been so important to her, that when her social worker left Spence-Chapin, she had a really hard time coming to terms with the fact that the relationship was no longer going to continue. This participant described being frustrated that she was not notified about her social worker leaving the agency, because her social worker had been such an impactful part of her life during the pregnancy and in the years after:

"I don't know the circumstance, but...I should have been contacted, and whatever the system is should have been set up so that it's not just like, "The person who was next to you in the hospital room and cried with you, and then helped you navigate the next two years, she's gone now." So that was a hard blow."

-Participant 4

Even when participants had less than positive experiences with Spence-Chapin overall, they still described their social workers as being supportive presences during their adoption experiences. One birth mother, who had a particularly difficult experience with her adoption said that her social worker was the only person who made her feel comfortable during the experience:

"The only person that probably made me feel more comfortable during the situation was the social worker at Spence-Chapin."

-Participant 5

It was evident that the relationships between social workers and birth mothers was key to the success of Spence-Chapin services, and that it was important to birth mothers that their social workers had been as supportive as they were during their adoption experiences.

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Realities of Post-Adoption Contact. Many of the birth mothers interviewed for this project discussed how pursuing an open adoption had been important to them as they considered their adoption decisions, and the fact that Spence-Chapin supported open adoptions was key to birth mothers' utilizing their services. One birth mother said that she wanted to pursue an open adoption because she felt that it was important for her child to have access to her as they grew up.

"I think I wanted to be available to him. Whatever situation he may or may not have in his life... He's a tween now, so I'm ready for it to come up, and that's fine. Whatever needs to be unpacked in an open adoption, I knew what could be scary and painful, and never answered in a closed adoption. It just doesn't seem like the same. It doesn't seem like two versions of the same thing, to me, at all. I wanted my baby to always, even if he chose not to, be able to know that I was there and available to him."

-Participant 4

Once deciding to pursue an open adoption, the birth mothers explained how they went about creating plans for post-adoption contact. Most of the birth mothers interviewed utilized what was called a "post-adoption contact agreement" which could be a formal or informal agreement between the birth mother and adoptive family outlining expectations for the frequency and nature of contact following the adoption. These were often created with the help of the social worker, and some birth mothers described that signing these agreements helped them feel more secure about the adoption.

"I remember not really knowing [adoptive parents] all that well that time and was really worried that they would break the agreement. So I had a lot of questions that, "Well what happens if they stop talking to me, what happens if they don't kind of honor the agreement." And our social workers at the time just being well that's just like a conversation that we can continue to have, Spence-Chapin would really support you in that process should they decided to go no contact or move across the country or something like that. So I remember feeling really supported by that process and very much confident that they would honor the agreement that we need even though this is not necessarily a legally binding thing."

-Participant 1

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"We opted for an informal agreement anyway, but that clarification seemed incredibly important to me, because they were also honest about the limitations of pursuing any binding agreement, and they were very up front with me in being like, "I mean, at the end of the day, it can't really be enforced anyway. There has to be trust in that." "

-Participant 4

After the adoptions were finalized, the birth mothers explained that post-adoption contact often looked different from what they had initially agreed to with the adoptive families. Just because an adoptive family agreed to the level of contact the birth mother requested, this did not necessarily mean that expectations for the nature of the relationship were shared. One birth mother described how the nature of her relationship to the adoptive family was not how she envisioned even though the initial agreement was signed.

"They were on board with more like four visits a year which was more appealing to me because I wanted a lot of visits, I wanted a lot of openness...Some of the challenges have been like when they treat me like a babysitter or like sometimes they just want to like thrust [my child] at me so that they can like get a break which I get. I do. I just also thought we were building the relationship where they would also want to spend time with me. And we do spend time together sometimes, but mostly like their default is like, "oh [she] wants to see [her child]" and I would like to have more of a relationship with them."

-Participant 8

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For some however, the relationships with the adoptive families were better than anticipated and contact with the adoptive families was more frequent and deeper than they anticipated. As one birth mother described her contact with the adoptive family was more frequent and abundant than she initially agreed to in the post-adoption contact agreement, which she appreciated.

"I'll text them, "Hey, how are you doing?" And I'll get 30 pictures and about two paragraphs of updates about them and they're always asking, "How are you and [your other children]?" They're always asking to meet up...we've been talking and they've been updating me on the [children] and it's beautiful. Like I said, I couldn't ask for a better family."

-Participant 6

Another birth mother also described how her contact with the adoptive family had been even better than she expected. She shared her perspective that the contact agreements were simply a starting point for the relationship.

"The contact agreement says, "At least two visits a year with intermittent updates through email and phone call." And of course, we've had way more than that, so I think it's just a minimum... It's not something that ever, we've always wanted to see each other more, but I think it made me feel safe in the beginning. Our relationship is great."

-Participant 4

Areas of improvement for Spence-Chapin. For the most part, birth mothers described being satisfied with their experiences with Spence-Chapin services and placing their children for adoption. When discussing ideas for improving Spence-Chapin services, some birth mothers had no suggestions for improvements, while others felt that anything they wished had gone differently was specific to their circumstance and not necessarily due to a gap in services provided by Spence-Chapin. That said, several of the birth mothers described two key areas of improvement: 1) improved advocacy for birth mothers during their hospital experiences, and 2) better aftercare services from Spence-Chapin for birth mothers.

The first area of improvement that was discussed by birth mothers was improve advocacy for birth mothers placing for adoption during their hospital birthing experience. This was acknowledged by birth mothers as not necessarily being due to a deficit in Spence-Chapin's services, but rather was an opportunity for Spence-Chapin to do an even better job of caring for birth mothers. Several birth mothers shared that they had experienced negative treatment by hospital staff while in the hospital for their births, and that they wished that someone from Spence-Chapin had been available to help them intervene or at least manage these negative interactions.

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"I had a really, really difficult time in the hospital. I was pressured by my doctor as well as the [other staff] to keep [my child] and my hospital experiences was really, really rough. I felt kind of mistreated at the hospital. There was one nurse midwife who was the only person who asked like, "Oh what adoption agency are using?" And I said, "Oh we're using Spence-Chapin." And she was super positive. She was like, "That's a really good one." But other than that, overall, every person who I interacted with in the hospital seemed really ill equipped to deal with someone who was giving birth and planning on giving up for adoption, so and that's not really spent on Spence-Chapin, but that would be one thing that I would definitely change about the process."

-Participant #1

With regard to aftercare services, one birth mother described how she had approached Spence-Chapin about using adoption services due to a traumatic experience with her pregnancy and felt that Spence-Chapin could have done a better job at securing services for her after the birth to help her process everything she had been through.

"I probably would have asked them could they help me refer me to other services that I can really get on my feet more, and probably would have asked them for some counseling outside of the services like, I need to talk to a therapist, I need to because of the things that I was dealing with then, and what I know now. I definitely did [need] therapy."

-Participant 5

Another birth mother also expressed that she wished there had been more counseling services provided after the adoption, particularly grief counseling.

"I knew that my social worker was like still there for me and that I could reach out, but there wasn't any support in the form of like here's our like grief counseling process. That might be something that they have since adopted, I'm not actually totally sure. I didn't have that. "

-Participant 8

Even for birth mothers who utilized aftercare services, there was sometimes a feeling that birth mothers were treated differently by Spence-Chapin than children and adoptive families. One birth mother said that she wished there were opportunities for everyone who had been a part of the adoption experience

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to continue to be cared for in a holistic and connected way, because feeling left out or separated from the adoption experience after birth and placement was difficult.

"Design a situation after adoption or throughout the adoption experience that facilitates family making in a way that isn't unintentionally separatist or treating the birth mother as not one of the same kind, not by nature, one of the group...I think that, there needs to be places where birth mom's can ask questions too...But in looking at all of the resources, and I know [Spence-Chapin] have them for [adoptive parents], and for [adopted child], and [my child] gets so much from other adoptive families, but he doesn't know any other birth moms either, and he doesn't know what that picture looks like. When I'm at his house and if the neighborhood kids are by, he'll bring them in to meet me, show and tell, which I love. But also, it's just a thing that needs to be a whole picture more often. He needs to know other [birth mothers] besides myself. "

-Participant 4

Another aspect of aftercare that a couple of participants expressed was in need of improvements was the ways in which Spence-Chapin relies on birth mothers to promote their services. Several participants stated that they had been asked to participate in panels, videos, information sessions, etc. but did not always have a clear understanding of how their stories were going to be used, and to what end. Participants said that they were usually amenable to participating in these events because they were appreciative of Spence-Chapin's support, but that sometimes the repeated requests for participation felt exploitative.

Discussion & Summary

In this section, we contextualize some of the major highlights of the data collection with the birth mothers. Our intent is to integrate some of the major findings across the two modes of data collection. As readers review this section, we wish to emphasize two broad points:

1: **Participants' Perceptions**: We remind readers that the survey and interview data collection results –as opposed to the analysis of administrative data (though this too is self-reported, albeit at the time receiving services from Spence-Chapin)— are directly from survey and interview data collected for this study from birth mothers who were involved with Spence-Chapin and reflect their comprehension and perceptions of their experiences. In some cases, the participants may have received services up to 15 years before the onset of this data collection period. As such, their recollections may be somewhat skewed, and possibly faulty, in that they may not have exact recall the specific details or names of services delivered to them by Spence-Chapin. For example, although Options Counseling is a required service delivered by Spence-Chapin, the response rate to questions in this survey about this service

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was only 75%. Nonetheless, what is important is that these data collection efforts reveal participants' overall *impressions* and the lasting *effects* of their understanding of Spence-Chapin services and are therefore important to capture and represent in this report.

To that end, the intent of our summary is to convey participants' perceptions about the services they received from Spence-Chapin. This report should not be viewed as a "quality control" documentation of services received.

2. Alignment of Survey Data with Administrative Data. Relatedly, we believe it is further important to recognize the similarities and distinctions between the survey participants and the administrative data sample for comparison in this project (with the caveat that most administrative data is self-reported from the client at the time of intake and does not represent the entire population of individuals that received services from Spence-Chapin as noted above). Birth mothers in the larger administrative data sample and smaller group of survey participants were broadly similar with respect to race and ethnicity, referral source, and utilization of interim care. Birth mothers in the survey and administrative data sample were about equally as likely to identify as White (30% for both survey participants and birth mothers in the administrative data sample). A slightly higher proportion of survey participants identified as Black (18%) than birth mothers in the administrative data sample (23%). Survey participants identified as Hispanic (30%) at a higher rate than birth mothers in the administrative data sample (26%).

Survey participants reported that they were typically referred to Spence-Chapin from a hospital or clinic (59%). This was also the most common referral source among birth mothers in the administrative data sample (74%). About 88% of birth mothers in the administrative data sample reported utilizing interim care while about 75% of survey participants noted utilizing interim care.

We note that because there were only nine interview participants, we purposely did not align their demographic or service characteristic data with the administrative or survey data due to the small non-representative number and in order to protect and safeguard their anonymity.

Integrative Highlights of Survey and Interview Data Collected from Birth Mothers. While the quantitative survey results provide a broad picture of how this group of birth mothers perceive their experiences with Spence-Chapin, the interview data further contextualizes the survey results and provides more nuance to them. Specifically, in terms of **participants' life circumstances** at the time of the pregnancy, it is noteworthy that many of the birth mothers made decisions about placing their babies for adoption and outreach to Spence-Chapin at the time of (or close to) giving birth. While this reflects recent research about birth mothers' decision-making processes (Madden et al., 2018), from the interview data we get a better understanding of some of the overall challenges these individuals faced while pregnant (e.g., economic difficulties; lack of social support; threat of CPS involvement, etc.).

In terms of project results regarding birth mothers' use of **Interim Care** and the **selection of adoptive parents**, there were interesting findings from both sources of data collected. The use of Interim Care— a hallmark feature of Spence-Chapin services -- was positively reflected on in both the survey and in

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the interviews. While the survey results convey mostly positive assessments about specific attributes of Interim Care (e.g., respite care; the families who cared for their babies, etc.) from the interview data, participants conveyed how critical it was to have time to explore their options for their babies. Moreover, they also expanded on the positive, nurturing environment of the interim care settings and of the host families. The congruence between the survey and interview data regarding the selection of adoptive families further reflects positive perceptions of this process. Indeed, the interview data illustrates how strong Spence-Chapin's reputation is with respect to their approach in working with adoptive families and the birth mothers. The fact that Spence-Chapin is inclusive in their recruitment of adoptive families was particularly noteworthy for several interview participants.

Relatedly, the **critical role that Spence-Chapin staff, particularly the social workers**, play in birth mothers' lives was evident across both modes of data collection. From the survey data, the scores were unequivocally high in their assessment of these relationships, while the interview data reveals many expanded themes and nuances of the positive impact of Spence-Chapin's social workers on their lives.

An important area of exploration in this project revolved around understanding participants' perceptions of their **open adoption experiences**. In the survey data, some of the scores for post-adoption contact were rather mixed. Although mostly positive overall, the interview data revealed some very specific reflections on how this process unfolded. Some participants, for example, reflected that the process was a better experience than anticipated, partially due to the structure and guidance provided by the post-adoption contract agreement for ongoing contact with adoptive families. For those who had less than positive experiences, this may have been due to individual relationships with adoptive families and not because of the agreement itself.

Regarding participants' **current life circumstances and well-being**, birth mothers revealed some poignant reflections on how they were affected by their adoption experiences. In the survey results, participants document the many milestones they have achieved since their time working with Spence-Chapin and overall revealed mostly high satisfaction across an array of well-being indicators (e.g., physical safety; family relationships; friendships, etc.). Similarly, open-ended comments from the surveys along with interview data convey a strong appreciation for their adoptive experiences with Spence-Chapin.

Relatedly, both the surveys and the interviews requested **ideas and suggestions for improving Spence-Chapin services and for working with future birth mothers**. Across birth mother data collection modes, participants offered very specific suggestions for areas to improve. These ranged from wishing they had been more aware of supportive and therapeutic after care services (i.e., support groups) due to feeling somewhat alone within their experience, to the need for more advocacy services during various aspects of the birthing process. While advocacy during hospital stays was acknowledged as falling outside of the scope of Spence-Chapin's responsibilities, it was raised by several participants as an important advocacy opportunity for them. Participants in interviews expressed that Spence-Chapin's inclusive and open environment was important in their decision-making for choosing the agency, so this is a natural extension of the agency's existing image of delivering inclusive services. Participants also discussed mixed feelings about participating in post-adoption events sponsored by Spence-Chapin. More clarity in the purpose and scope of these engagements could improve this experience.

Limitations of the Project. As with any research project, there are important limitations to highlight in how this project unfolded and in how the project results should be interpreted. First, as noted earlier, there were **difficulties with outreach to and engagement in recruiting former birth mothers** served by Spence-Chapin. While it was difficult to enroll participants into the survey portion of the project, it was even more problematic to enroll participants into the interviews. Although project team members tried multiple avenues for enrolling participants for interviews, ultimately there were insurmountable challenges in completing the interviews. Future efforts to collect data from former clients may wish to try different methods for outreach such as advertising in newsletters and on social media channels.

Second, as discussed, the project purposely recruited former Spence-Chapin clients who had received services across a wide time span, in order to cast as wide a net as possible in soliciting feedback about Spence-Chapin. As such, this may have caused **some lapses in the recall of specific Spence-Chapin services**, or in how they interpreted their experiences several years removed from actually receiving them. Nonetheless, it is important to remember that this report focuses on overall perceptions and comprehension of services, on behalf of those who had firsthand knowledge of then.

Third, regarding the administrative data, the non-placement cases analyzed were New York birth mothers who used interim care during the study period. Thus, this study does not include New York non-placement birth mothers served by Spence-Chapin during the study period and did not utilize interim care. It also did not include New Jersey birth mothers. Likewise, the data cleansing process required effort to clean and harmonize the data. In many cases, this required manual inspection and careful programming.

Finally, the data collection for this project focuses **on a subset of participants who had experience with Spence-Chapin services**: birth mothers who relinquished their babies for adoption or who chose to parent. We did not seek input from mothers who may have miscarried or who chose to undergo abortions. It is therefore not possible to generalize from these findings to any other populations beyond those in this project. The results in this project should instead be interpreted as exploratory and descriptive and useful for future data collections efforts on behalf of Spence-Chapin.

Conclusion

This report summarizes a collaborative project between the National Opinion Research Center, Rutgers University, the American Enterprise Institute, and Spence-Chapin Services to Families and Children. The overall goal of this project was to understand more about birth mothers' experiences with Spence-Chapin services. The project was composed of three data sources: administrative data from July 2006 to July 2020, online surveys with birth mothers from this same time period, and interviews with a subset of mothers who completed the online surveys.

Although the response rates for the survey and interview arms of the project were lower than anticipated, participants nonetheless offered thoughtful and detailed insights about their experiences with Spence-Chapin. Overall, participants believed the services, resources, and support they received from Spence-Chapin were effective and helpful for them as they underwent the process of relinquishing their babies for adoption. Of particular note was the mostly positive impression that participants felt about the Interim Care service and the adoption matching process. Participants also offered several suggestions for improving services to birth mothers, primarily related to follow-up and after-care services.

The analysis of administrative data yielded numerous important findings about the birth mothers: demographic characteristics, psychosocial history, family awareness of and involvement with the adoption, pregnancy related factors, use of Interim Care, and post-adoption agreement and contact.

References

Bunting, Lisa; McAuley, Colette. Child and Family Social Work Vol. 9, Iss. 3, (August 2004): 295-303.

Chippindale-Bakker, V., & Foster, L. (1996). Adoption in the 1990s: Sociodemographic determinants of biological parents choosing adoption. *Child Welfare*, *75,* 337-355.

Cocozzelli, C. (1989). Predicting the decision of biological mothers to retain or relinquish their babies for adoption: Implications for open placement. *Child Welfare*, 68, 33-44

Coleman, P. K., & Garratt, D. (2016). From birth mothers to first mothers: Toward a compassionate understanding of the life-long act of adoption placement. *Issues L. & Med.*, *31*, 139.

Grotevant, H. D., Wrobel, G. M., Fiorenzo, L., Lo, A. Y. H., & McRoy, R. G. (2019). Trajectories of birth family contact in domestic adoptions. *Journal of Family Psychology*, *33*(1), 54–63. <u>https://doi.org/10.1037/fam0000449</u>

Leve, L. D., Neiderhiser, J. M., Shaw, D. S., Ganiban, J., Natsuaki, M. N., & Reiss, D. (2013). The Early Growth and Development Study: A prospective adoption study from birth through middle childhood. *Twin Research and Human Genetics*, *16*(1), 412-423.

Madden, E. E., Ryan, S., Aguiniga, D. M., Killian, M., & Romanchik, B. (2018). The Relationship Between Time and Birth Mother Satisfaction With Relinquishment. *Families in Society*, *99*(2), 170– 183. https://doi.org/10.1177/1044389418768489

National Council for Adoption (2022). Adoption by the Numbers. <u>https://adoptioncouncil.org/research/adoption-by-the-numbers/</u>

Opt Institute (2022). "There's always adoption" How Americans perceive adoption in the U.S today. <u>https://www.optinstitute.org/</u>

Resnick, M. D. (1984). Studying adolescent mothers' decision making about adoption and parenting. *Social Work*, *29,* 5-10

Smith J. M. (2004). The demography of African American families and children at the end of the twentieth century. In *Child welfare revisited*, Edited by J. Everett; S. Chipungu; B. Leashore, 15-56; New Brunswick, NJ: Rutgers University Press.

<u>Whitesel</u>, <u>Amy Louise</u> (2008). Post adoption adjustment of birth fathers: the effects of relationships with birth mothers and family. Howard University ProQuest Dissertations Publishing</u>, 2008. 3330769.

Wiley, M. O. L., & Baden, A. L. (2005). Birth parents in adoption: Research, practice, and counseling psychology. *The Counseling Psychologist*, *33*(1), 13-50.

Appendix A. Survey Questions

SC BM Adoption Survey - Questions

Introduction. Thank you for your willingness to participate in this survey. We would like to understand your experiences with Spence-Chapin These survey responses will help the study team from NORC at the University of Chicago, the research organization supporting Spence-Chapin, to make recommendations to Spence-Chapin on what has worked well and how to improve their services. We hope to gain some insight to birth mothers' experiences as they navigate the adoption process. You should feel free to take as long as you need to answer the questions or skip any questions you do not want to answer, but we estimate that your participation will take approximately 15 to 30 minutes. As an appreciation for your time, we will send you a \$25 gift card upon completion of the survey. Please answer the following questions to the best of your abilities'.

Section 1: Demographic Questions

Variable Name: NUCHILD

- 1. How many children have you placed with Spence-Chapin services?
 - a. Response: number [If more than one, please talk about the first placement you had with Spence-Chapin]

Variable Name: SCYEAR

- 2. In what year was your first involvement with Spence-Chapin?
 - a. Response: year

Variable Name: AGE

- 3. How old are you currently?
 - a. Response: years

Variable Name: RELATION

- 4. How would you describe your current relationship status?
 - a. Response Options:
 - i. Single, not in a relationship
 - ii. Unmarried, in a romantic relationship with someone other than the birth father
 - iii. Unmarried, in a romantic relationship with birth father
 - iv. Married to the birth father
 - v. Married to someone other than the birth father
 - vi. Separated
 - vii. Divorced
 - viii. Widowed
 - ix. Other, please explain

Variable Name: INCOME

- 5. What is your current household annual income?
 - a. Response Options:



- ii. Between \$30,001 \$50,000
- iii. Between \$50,001 \$70,000
- iv. Between \$70,001 \$90,000
- v. Between \$90,001 \$120,000
- vi. More than \$120,000

Variable Name: RACEETHNIC

- 6. How would you describe your Race/Ethnicity?
 - a. Response Options:
 - i. White
 - ii. Black or African American
 - iii. American Indian or Alaska Native
 - iv. Asian
 - v. Native Hawaiian or Other Pacific Islander
 - vi. Multiracial

Variable Name: HISPAN

- 7. Are you of Hispanic origin?
 - a. Response Options:
 - i. Yes, I am Hispanic or Latino
 - ii. No, I am not Hispanic or Latino

Variable Name: HOUSEHOLD

- 8. Please list all family members currently living with you either full time or part-time (including children with shared custody). Please do not include specific names of family members in your household, just their sex, age, and their relationship to you.
 - a. Response Options:

Variable name	Person	Sex (M/F)	Current Age	Relationship to person listed (son/daughter, partner, mother, father-in-law, sister, etc)
HOUSEHOLD1	1			
HOUSEHOLD2	2			
HOUSEHOLD3	3			
HOUSEHOLD4	4			
HOUSEHOLD5	Etc.			

Variable Name: PREG

- 9. Please describe all of your pregnancies over your lifetime
 - a. Response Options:

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Pregnancy	Your age at pregnancy	Pregnancy Outcome (select from drop down menu: 1. Chose to parent, 2. Utilized Kinship Care, 3. Placed for adoption, 4. Child entered foster care, 5. Termination of parental rights, 6. Miscarriage, 7. Terminated the pregnancy, 8. Other)
First pregnancy		
Second pregnancy		
Third pregnancy		
Fourth pregnancy		
Etc.		

Section 2: Inquiry & Intake

Variable Name: ADOPT

- 10. When did you first consider adoption as an option?
 - a. Response Options
 - i. Before pregnancy
 - ii. During pregnancy
 - iii. At the time of birth (within one month of birth)
 - iv. One or more months after birth

Variable Name: LEARNSC

- 11. How did you first learn about Spence-Chapin?
 - a. Response Options: [select all that apply]
 - i. Referral from hospital or health clinic
 - ii. Referral from friend
 - iii. Referral from family member
 - iv. Referral from social services or child protective services
 - v. Referral from attorney
 - vi. Learned about Spence-Chapin on my own
 - vii. Other, please explain

Variable Name: CONSIDERSC

12. When did you consider Spence-Chapin as a service option?

- a. Response Options
 - i. Before pregnancy
 - ii. During pregnancy
 - iii. At the time of birth (within one month of birth)
 - iv. One or more months after birth

Variable Name: REACHSC

XNORC



- 13. Did you reach out to Spence-Chapin on your own behalf?
 - a. Response option: Yes/No [if no SKIP to 13ii; if yes SKIP to 13i and then to 14] Variable Name: INQUIRYSC
 - i. If yes, how would you describe your initial inquiry process with Spence-Chapin?
 - 1. Response options:
 - a. Negative
 - b. Somewhat negative
 - c. Neutral
 - d. Fairly positive
 - e. Very Positive

Variable Name: CONTACTSC

- ii. If no, who contacted Spence-Chapin on your behalf?
 - 1. Response Options:
 - a. Another agency
 - b. Hospital or clinic staff
 - c. Friend
 - d. Birth father
 - e. Parent
 - f. Current partner
 - g. Other, please explain

Variable Name: CONVOSC

- iii. How would you describe your experience during your first conversation with Spence-Chapin?
 - 1. Response Options:
 - a. Negative
 - b. Somewhat negative
 - c. Neutral
 - d. Fairly positive
 - e. Very Positive

Variable Name: SOCWORK

- 14. How much do you agree or disagree with the following statements about your experience with your Spence-Chapin assigned social worker(s)?
 - a. Response Options

Variable Name	Statement	Strongly disagree	Disagree	Neither disagree or agree	Agree	Strongly agree
SOCWORK1	They provided helpful information					
SOCWORK2	They helped you better understand					



Variable Name	Statement	Strongly disagree	Disagree	Neither disagree or agree	Agree	Strongly agree
	your options, including making an adoption plan					
SOCWORK3	You felt like they persuaded you toward a certain decision like adoption					
SOCWORK4	They informed you about your legal rights in the adoption process					
SOCWORK5	They provided you with informational brochures or paperwork					
SOCWORK6	They were warm and kind					
SOCWORK7	They answered all of your questions					

Variable Name: SCSERVICE

- 15. How helpful or unhelpful would you describes the services you participated in during your pregnancy at Spence-Chapin?
 - a. Response Options:

Services	Extremely unhelpful	unhelpful	Neither helpful or unhelpful	Helpful	Extremely helpful	Not applicable/ Did not participate
Options counseling						
Received metro cards and/or food gift cards						
Referrals to external programs						
Making a plan for my child						

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Services	Extremely unhelpful	unhelpful	Neither helpful or unhelpful	Helpful	Extremely helpful	Not applicable/ Did not participate
Hospital/Birth Planning						
Adoptive parent match meetings						
Interim Care						
Legal Services						
Post Placement Services						

Section 3: Options Counseling (Options Counseling is provided prior to adoption placement) Variable Name: SCCOUNSEL

- 16. How much do you agree or disagree with the following statements about your experience with Spence-Chapin options counseling services? (Options Counseling is provided prior to adoption placement or you decision to parent)
 - a. Response Options:

Statement	Strongly disagree	Disagree	Neither disagree or agree	Agree	Strongly agree
The counselor was an important person in my decision-making process					
The counselor discussed my options and goals					
The counselor helped me explore ways I could parent including the benefits and challenges					
The counselor helped me explore making an adoption plan including benefits the challenges					
The counselor helped me explore alternative options such as foster care, termination, and kinship					



Statement	Strongly disagree	Disagree	Neither disagree or agree	Agree	Strongly agree
including the benefits and challenges					
The counselor helped me understand all options regarding my child					
The counselor encouraged me to make a decision that was best for me and my child					
The counselor motivated me to continue services with Spence-Chapin					
The counselor made me feel safe using Spence-Chapin services					
The counselor made me feel confident about my decision					

Section 4: Adoptive Parent Match Meeting

Variable Name: ADOPTFAM

- 17. Did you choose your child's adoptive family?
 - a. Response Options: (Yes/No/Unsure) [if No SKIP to Q29]

Variable Name: FAMCHO

- 18. Rate your overall experience with the process of choosing an adoptive family.
 - b. Response Options:
 - i. Extremely negative
 - ii. Negative
 - iii. Neutral
 - iv. Positive
 - v. Extremely positive

Variable Name: BOPRO

- 19. Rate your experience reviewing the books/profiles and descriptions of the potential adoptive families.
 - c. Response Options:
 - i. Extremely negative
 - ii. Negative
 - iii. Neutral
 - iv. Positive



v. Extremely positive

Variable Name: MEETFAM

20. Rate your experience meeting with potential adoptive parents.

- d. Response Options:
 - i. Extremely negative
 - ii. Negative
 - iii. Neutral
 - iv. Positive
 - v. Extremely positive
 - vi. Not applicable/I did not meet the adoptive parents

Variable Name: DECIDEFAM

- 21. To what extent did meeting potential adoptive families help you make your final decision about adoption?
 - e. Response Option
 - i. Extremely unhelpful
 - ii. unhelpful
 - iii. Neither helpful or unhelpful
 - iv. Helpful
 - v. Extremely helpful

Variable Name: MATCHFAM

22. How satisfied were you with the SC matching process?

- f. Response Options
 - i. Extremely unsatisfied
 - ii. Unsatisfied
 - iii. Neither satisfied or unsatisfied
 - iv. Satisfied
 - v. Extremely satisfied

Section 5: Interim Care

Variable Name: INTERIM

23. Why did you use interim care?

- g. Response options: (select all that apply)
 - i. Needed additional time to consider all options including parenting, adoption, kinship care, etc.
 - ii. Utilized time child was in Interim care to prepare for adoption placement (through counseling or family support etc.)
 - iii. Utilized time child was in interim care to prepare for parenting (through counseling, family support, or etc.)
 - iv. Utilized time to meet with prospective adoptive parent(s)
 - v. Utilized time to choose an adoptive family
 - vi. Other, please specify

Variable Name: INTERIMTIME



- 24. How long did you use interim care?
 - h. Response Options
 - i. Less than one week
 - ii. Between one and two weeks
 - iii. Between two and three weeks
 - iv. Four weeks or more

Variable Name: INTERIMEXP

- 25. How would you rate your overall experience with the interim care program?
 - i. Response Options:
 - i. Negative
 - ii. Somewhat negative
 - iii. Neutral
 - iv. Fairly positive
 - v. Very Positive

Variable Name: INTERIMSERV

- 26. How helpful or unhelpful would you describe the following services and opportunities during the interim care process?
 - j. Response



Services	Extremely unhelpful	unhelpful	Neither helpful or unhelpful	Helpful	Extremely helpful
Respite care for my baby or newborn					
Visits with your child (arrangements made to spend time with your baby, participate in doctors' appointments, etc.)					
The family that cared for your child					
Opportunity to participate in options counseling sessions					
Your relationships with your own family members, friends, partners, or external sources during the interim care time					
Having the time to process and plan (time and space to decide if I will parent or make an adoption placement plan)					

Section 6: Legal Services

Variable Name: ATTORN

- 27. Were you represented by an independent attorney arranged by Spence-Chapin?
 - k. Response options: (Y/N/unsure) [if no SKIP to question 28]

Variable Name: LEGALREP

- 28. How would you rate your experience with legal representation arranged by Spence-Chapin?
 - I. Response Options:
 - i. Negative
 - ii. Somewhat negative
 - iii. Neutral
 - iv. Fairly positive
 - v. Very Positive

Variable Name: LEGREPPLAN

- 29. Was having legal representation important in helping you to decide on adoption plan for your child?
 - m. Response Option:
 - i. Extremely unhelpful



- ii. unhelpful
- iii. Neither helpful or unhelpful
- iv. Helpful
- v. Extremely helpful

Section 7: Placement Experience & Adoption Plan

Variable Name: PACA

- 30. Did you decide to pursue an open adoption using forms like the Post Adoption Contact Agreement (PACA) or an Openness Agreement?
 - n. Response Option: (Y/N/unsure) [If no SKIP to 31; If yes or unsure SKIP to 32]

Variable Name: NOTOPEN

- 31. Please indicate why you did not pursue open adoption. (Select all that apply)
 - o. Response Options:
 - i. Family and/or friends unaware of pregnancy.
 - ii. Was not open to continuing relationship at time of placement.
 - iii. Not planning to remain in close proximity to child and adoptive family
 - iv. Believed an open adoption would be too painful
 - v. Did not want to pursue an open adoption at the time of placement but may consider it at a later point

Variable Name: BFPLAN

- 32. At the time of your placement, was the birth father aware of the adoption plan?
 - p. Response Option: (Y/N/Unsure) [if no, Skip to Q33; if unsure SKIP to Q33]
 - i. Was the birth father involved in the adoption decision?
 - 1. Response Option: (Y/N)
 - ii. How would you describe the birth father's feelings about the adoption plan?
 - 1. Response Options:
 - a. Extremely negative
 - b. Negative
 - c. Neutral
 - d. Positive
 - e. Extremely positive

Variable Name: FAMPLAN

- 33. At the time of your placement, were any of your family members aware that you made an adoption plan?
 - q. Response Option: (Y/N/Unsure)

Variable Name: FRIENDPLAN

- 34. At the time of your placement, were any of your friends aware that you made an adoption plan?
 - r. Response Option: (Y/N/Unsure)

Variable Name: COMMFAM

- 35. How would you describe your communication with the adoptive family and your child in the past year? please select all that apply
 - s. Response Options:
 - i. I have frequent communication with the child and adoptive family (i.e., texts, videos, photos, emails, and/or phone calls 5 or more times per year,)
 - ii. I have some communication with the child and adoptive family (i.e., texts, videos, photos, emails, and/or phone calls 1-4 times per year,)
 - iii. I have communicated with the child and adoptive family occasionally (ex: once or twice since the adoption).
 - iv. I have never communicated with the child or adoptive family
 - v. Other

Variable Name: RELATIONFAM

- 36. Please rate the following statements about your relationship with the adoptive family and child.
 - t. Response Options:

Statement	Mostly Negative	Somewhat Negative	Neither Negative or Positive	Somewhat Positive	Mostly Positive	Unsure
My relationship with my child is						
My relationship with the adoptive family is						

Variable Name: COMMCHANGE

- 37. Has your communication with the child and adoptive family changed over time?
 - u. Response Options: No, Yes (if yes, select the one that describes the change best) [if no SKIP to Q36]
 - v. Response Options if selected Yes:
 - i. I communicate **significantly more** with my child and their adoptive family than during the first year following the initial placement. (i.e., texts, videos, photos, emails, phone calls, or visits)
 - ii. I communicate **more** with my child and their adoptive family than during the first year following the initial placement. (i.e., texts, videos, photos, emails, phone calls, or visits)
 - iii. I communicate **less** with my child and their adoptive family than during the first year following the initial placement. (i.e., texts, videos, photos, emails, phone calls, or visits)
 - iv. I communicate **significantly less** with my child and their adoptive family than during the first year following the initial placement. (i.e., texts, videos, photos, emails, phone calls, or visits)
 - v. I no longer communicate with my child and their adoptive family

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Variable Name: RELATIONCHANGE

- 38. Has your relationship with the child and adoptive family changed over time?
 - w. Response Options: No, Yes [if no SKIP to Q39]
 - x. Response Options if selected Yes:(select all that apply)
 - i. My relationship with my child has gotten better since the first year following the initial placement
 - ii. My relationship with my child has gotten worse since the first year following the initial placement
 - iii. My relationship with the adoptive family has gotten better since the first year following the initial placement
 - iv. My relationship with the adoptive family has gotten worse since the first year following the initial placement

Variable Name: SATCONTACT

- 39. How satisfied are you with the level of contact you have with the child and adoptive family in a typical year for the following statements?
 - y. Response options:

Statement	Extremely unsatisfied	unsatisfied	Neither satisfied or unsatisfied	Satisfied	Extremely satisfied
The number of visits I have with the child					
The amount of communication I have with my child including texts, phone calls, emails, sharing of photos and videos, and other online communication					
The number of visits I have with the adoptive family					
The amount of communication I have with the adoptive family including texts, phone calls, emails, sharing of photos and videos, and other online communication					

Section 9: Post-Placement Services

Variable Name: USESC

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- 40. Did you use Spence-Chapin services after the adoption?
 - z. Response Options: (Y/N) [If no SKIP to 43]

Variable Name: SERVUSEPA

- 41. Please select the services you utilized after the adoption. (Select all that apply)
 - aa. Response Options
 - i. Post-Placement / Adoption Counseling support
 - ii. Legal support
 - iii. Spence-Chapin services for another child
 - iv. Support in communicating with child and adoptive family

Variable Name: SATPPS

- 42. How satisfied were you with the post-placement services?
 - bb. Response Options
 - i. Extremely unsatisfied
 - ii. Unsatisfied
 - iii. Neither satisfied or unsatisfied
 - iv. Satisfied
 - v. Extremely Satisfied

Section 10: Post-Adoption Life

Variable Name: POSTADOPTLIFE

43. What life milestones have occurred for you since placing your child for adoption with

Spence-Chapin services? (select all that apply)

cc. Response Options

- i. Decided to have more children
- ii. Placed a child for adoption
- iii. Chose to parent a child
- iv. Terminated a pregnancy
- v. Got married
- vi. Started a new relationship
- vii. Completed high school or GED
- viii. Pursued a degree in higher education or technical field
- ix. Completed a degree in higher education or technical filed
- x. Secured employment or switched to a new career
- xi. Other, please explain

Variable Name: DONEDIF

- 44. Looking back on your experiences, is there anything you think you would have done anything differently?
 - dd. Responses: (select all that apply)
 - i. Nothing, I am fine with how I handled the situation
 - ii. I would have reached out to Spence-Chapin earlier
 - iii. I would have used more of Spence-Chapin services
 - iv. I would have selected a different adoptive family
 - v. I would have used a different adoption agency

- vi. I would have made a different decision about the placement of my child
- vii. I would have made a different decision about the level of contact with my child
- viii. I would have involved my own family more in the adoption process
- ix. I would have involved the birth father more in the adoption process
- x. Other, please explain

Variable Name: LIFESAT

45. How would you rate your overall life satisfaction in each of the following areas since the adoption?

ee. Response Option

Domain	Extremely Unsatisfied	Unsatisfied	Neither Satisfied or unsatisfied	Satisfied	Extremely Satisfied
Emotional well- being					
Finances					
Physical Safety					
Physical Health and well-being					
Housing					
Romantic Relationships					
Spirituality					
Family					
Friendships					
Career					
Environment – housing, neighborhood, community					
Recreation – leisure life, activities for fun					

Variable Name: IMPROVESC

46. Are there any areas of improvement or suggestions you have for the Spence-Chapin staff and services?

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ff. Response Options: Yes/No; please provide your suggestions [if no SKIP to Q47] [open ended response]

Variable Name: SHARESC

- 47. Is there anything else you want to share about your experience with SC? Whether it was positive or negative, we would appreciate your thoughts and experiences.
 - gg. Response Options: Yes/No; please provide your suggestions [if no SKIP to END] [open ended response]

End: Thank you for taking the survey, we appreciate your time.

For Gift Card: *There will be a separate link to enter your email or phone number that will say* - Please enter your email address or phone number for where you want the gift card link to be sent.

Appendix B. Interview Guide

Birth Parent Interview Guide

Spence-Chapin Adoption Study Final 12/17/2021

First, I'd like to know a little about your life around the time you got connected to Spence-Chapin:

- 1. How did you first hear about Spence-Chapin's services?
- 2. What made you decide to contact Spence-Chapin?
 - a. What research (if any) did you do on other adoption agencies or social service providers before contacting Spence-Chapin?
 - b. If you didn't contact Spence-Chapin directly, who did?

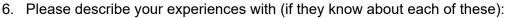
And so now we would like to learn more about your pregnancy and the time period when you became involved with Spence Chapin.

- 3. When did you first find out you were pregnant?
- 4. Please describe what was going on in your life at that time?
 - a. How were your relationships with romantic partners?
 - b. How were your relationships with family?
 - c. How were your relationships with friends?
 - d. What was your living situation like?
 - e. Were you in school?
 - IF YES, what level of education were you pursuing?
 - f. Were you working?
 - IF YES, Can you tell us about your job at that time? (full time, part time etc)
 - g. Were there any particular challenges you were experiencing at that time? Please tell me more about that challenge?
 - h. What were some things you feel like were going well at that time? Please tell me more about that?

Thank you sharing all of that with me. Now, I'd like to hear more about your experience working with Spence-Chapin. Spence-Chapin describes certain services in their process of working with birth mothers.

These services are described in the attachment I have here (or that I sent earlier). Please take a moment to review them and then I'd like to ask you about your perceptions and experiences with each of those services.

5. Would you walk me through your experience with Spence-Chapin from start to finish?



- a. Options Counseling
- b. Service Referrals
- c. Hospital planning
- d. Selecting adoptive parents
- e. Interim Care Services and Baby Visits
- f. Post-Adoption Contact Agreements
- 7. How did these services, if any, impact your adoption decision?
 - a. Which ones had the most impact?
- 8. What parts of the process did you find particularly helpful?
 - a. What about that part was helpful?
- 9. What parts of the process were most difficult?
 - a. What about that part was difficult?
- 10. If you could change anything about the way Spence-Chapin conducts their counseling, adoption and other services, what would it be?

[Insert protocol to discuss sensitivity of the following questions]

11. Did you elect to have an open adoption and enter into a PACA(Post Adoption Contact Agreement) or Openness Agreement?

IF YES, skip to question 12 IF NO, skip to question 16

- 12. Please describe your original agreement about the level of contact you would have with the adoptive family (Prompts: PACA or Post Adoption Contact; Openness Agreement)
 - a. Did the original agreement work out the way you thought it would? (probe about whether or not it changed at any point from original agreement)
 - b. How has the contact evolved over time?
 - c. How has the relationship evolved over time?
 - d. (If applicable) Please describe why it has changed?
- 13. For your child whom you placed for adoption, how much contact do you have with the adoptive family?
 - a. What are the primary ways you communicate with them?
 - b. How do you feel about the contact you have with them?
 - c. What would you change about the contact?
- 14. Please describe your relationship with their adoptive family.
- 15. Please describe your current relationship with your child whom you placed for adoption.
- 16. What informed your decision to have a closed adoption?
 - a. Is there anything you would have done differently about the contact you have with the child you placed for adoption or the child's adoptive family?

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Now we would like to ask a few questions about how things are going now, and learn more about the extent to which Spence-Chapin made a difference in your life.

- 17. How are things going for you now?
 - a. Please discuss your current relationships with romantic partner, if applicable.
 - b. Please discuss your current relationship with family.
 - c. Please discuss your current day to day life.
 - i. (prompts about school; work; home life, as appropriate)
 - d. Are there any particular challenges you are experiencing now?
 - i. Please tell me more about that.
 - e. What's going well for you now?
 - i. Please tell me more about that.
- 18. Please describe how your decision to work with Spence-Chapin affected your life, either positively or negatively?
- 19. In looking back on your decision to place your child for adoption, in what ways do you think your life is different because you chose to place your child for adoption?
- 20. How has your adoption decision affected your decisions about having other children?
- 21. Looking back, how do you feel about your decision to work with Spence-Chapin?a. Have your thoughts about your decision changed over time?

That's all the questions I have; is there anything else related to your experiences with Spence-Chapin you think I should know before we wrap up?

Thank you so much for taking the time to talk with me today!

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Appendix C. Interview Supplement

Description of Spence-Chapin Services

Options Counseling

Spence-Chapin offers information and resources about options available to women while they are pregnant or after they have given birth. Usually, people meet with a social worker to discuss their options which may include parenting the child for themselves, making an adoption placement plan, abortion, and other alternatives such as foster care and kinship care.

• Here, we are curious about your experience with how Spence-Chapin provided information to you about your options.

Service Referrals

Spence-Chapin sometimes offers individuals referrals to different support resources, regardless of whether people choose to continue working with Spence-Chapin. These referrals may be for housing or financial assistance, mental health support, medical care and insurance, parenting resources, and legal services among other things.

• Here, we are interested in learning about the types of services Spence-Chapin may have connected you with during or after your pregnancy.

Hospital planning

Spence-Chapin offers individuals assistance with planning their birth and after-birth experiences, which may include discussing their birth plan, how parents want to bond with their child after birth, and what supports are needed while in the hospital for the birth.

• Here, we want to know about your experiences with these supports, if applicable.

Selecting adoptive parents

When making an adoption placement plan, some individuals elect to choose their child's adoptive family from profiles and photos of prospective adoptive parents who have already been home studied and approved to adopt. Some individuals also choose to meet prospective adoptive parents in person. This is often called "match meeting" with the adoptive parents. This can occur after viewing profiles and birth parents meet with adoptions parents face to face. Spence-Chapin staff are often there to support the process.

• Here, we would like to know what your experience was like with this process, and how you chose whether or not to engage with this part of the process.

Interim Care Services and Baby Visits

Interim care is an aspect of Spence-Chapin's program that is unique from other adoption agencies. Interim care is a service in which the child is temporarily placed into an approved interim care providers home. This allows birth parents the time to continue considering their options, while their child is receiving care through Spence-Chapin's services.

• Here, we are curious how you engaged with this aspect of the program.

Openness / Post-Adoption Contact Agreements

Spence-Chapin helps coordinate openness / post-adoption contact agreements between birth and adoptive parents. These agreements can either be legally binding and enforceable, or informal agreements.

• Here, if you selected to create an agreement, we would like to know what your experience was like with choosing the types (face to face visits, emails, letters, phone) and amount (frequency) of contact with the adoptive family and child.

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Theme	Supportive Quote
Pregnancy experiences and adoption decision	"I'm still broke, I'm already at the point where if an additional expense comes up beyond my usual, I have to decide between like okay what utility can I put off paying? And I was like what am I going to do if that's like [baby's] doctor's bill? And here was this couple that was interested in really having me in the picture, so like my kid would still know how much I loved him and who had the resources to take care of my son in a way that I did not have the resources to do. So ultimately thinking about what was best for the kic and also myself, adoption just really seemed like the option that made more sense." -Participant 8
	"I just found out I was pregnant, I was in college and I was definitely in denial about it. And by the time I made it to the clinic I was way past in New York State law of 24 weeks. So then I was like, "Well, I really don't want parent, definitely not something I want to do." So Spence-Chapin was my only option. I went in there and I was like, "This is what I'm doing, this is what I need help with," and together we made it happen." -Participant 3
	"It was just a lot going on in my head because I was scared, and I didn't know what to do, and I just felt so alone at that time because it was like, I'm going through this and I really don't have the support that I need," -Participant 7
	"They were trying to find anyway and everything to help me out. Same with my family or close friends, family friends, they were all trying to help out and try to figure out how we can keep my son. They were all trying to figure out something, but I figured the adoption was the only option and the safest option for him. " -Participant 2
	"There was a lot of turmoil with [birth father], at the time, and it became a whole issue where he started making threats about not signing papers and I had to figure out that," Participant 4
	"Honestly nothing was going well for me at that time" -Participant 6
	"I didn't feel that she [hospital social worker] listened to me and assess my situation, and possibly got me the helpWhat I probably needed at the time was someone to convince me that, "You're gonna be fine, you can take this baby home, let's get you some counseling,"" -Participant 5

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Theme	Supportive Quote
Importance of	Using Interim Care:
interim care and adoptive family selection	"Even though I was pursuing adoption, I was pretty clear the whole time that I wasn't going to like make my decision for sure until the baby had left my body because I was like, I don't know how I'm going to feel. So I have what I think is the right path in mind but I'm open to being wrong about that." -Participant 8
	"I had opted for [interim] care having my kids taken care of by a volunteer for up to the first 30 days while I recovered and like made my choice. So during [interim] care, I could see him at the adoption agency once a week. So I was coming to the agency every week for that and the first visit I was a complete wreckI like show up to the agency for that first visit and my social worker is like how are you doing? And I just burst into tears. And then the volunteer who had been taken care of [baby] came in with [baby] and I definitely like felt better after spending time holding him and cooing over him and I was like less of a wreck when I left than I was when I arrived. And then it was the following visit the following week that I realized like that I was still leaning toward adoption and that this felt like the right call" -Participant 8
	"I didn't want interim care at the time. I just wanted him to go home and I just wanted it to be over. But we did utilize interim care and I think it was a really good choice and I saw them every week and she always gave me more time. I would be sitting in her office, the strange baby just looking at it. It was perfect". -Participant 3
	"I think [Spence-Chapin social worker] just felt like I just needed the time just to process. It gave me interim care and to see him, gave me the full experience. I was able to close the door and feel I did it from start to finish, because if I just left the hospital and never saw him and he just went with his family, there wouldn't have been any closure. I see it to the finish line. I think [Spence-Chapin social worker] knew I needed that. So that was really important. I myself didn't see at the time, but I think [Spence-Chapin social worker] saw it." -Participant 3
	"[Adoptive parents] hadn't even, I think they were just starting the legal process for adoption, so it was going to be at least two weeks, so they told me that what they do in those circumstances that they placed the baby into interim care and that they would send a social worker and also his interim caregiver to the hospital after I gave birth and then I gave birth, we hung out for a little bit, me and [baby]. And then they basically were like, "Hey, the interim caregiver's here so whenever you're ready, you can kind of say goodbye" -Participant 1
	"I remember [interim caregivers] had a daughter who was in college but she was home for college and I met all of them and they were taking good care of [baby] and she made me a photo album of the baby, talking about it makes me tear up I think it was once or twice a week we would go and we would see her for about an hour or two hours" -Participant 9

Theme	Supportive Quote
	"Well, actually what Spence Chapin told me is that while [baby] was in interim care, I did still have the option that if I did get clean and fix my life and I was financially okay, I could pull him out and actually keep him. I wasn't like dead set I had to do adoption once [baby] was in interim, which was nice to hear. But I knew at 27 I didn't have money on my own, I'm still with my parents. It wasn't the proper time to bring a child in my life." -Participant 2
	"Then after when [baby] was released [from NICU], [baby] went into interim care which I was able to choose a family, I had a few interim families that I could choose from. I chose this one that was amazing. I was able to every week, go to [baby's] doctor's appointments. They would bring [baby] to the officeand I was able to have a visit with [baby] for about an hour and a half, just hold [baby] and play with [baby]. It was still a few weeks old so I couldn't really do much, but at least I was able to see [baby]" -Participant 2
	Choosing adoptive parents:
	"I really like a gay family, whether it's lesbians, whether it's two gay men, for me specifically, I felt that way, because I still feel like people want heterosexual and just a typical family and I just wanted something not so typical and, nowadays it's typical." -Participant 9
	"At one point when we met [adoptive parents], they mentioned that basically once you start the process that they have to be ready for a baby at any moment and so they had been doing that for a long time, it would have been six months at that point that they had all this baby stuff ready to go and I remember when I was learning that and it just provided me a lot of comfort and I really liked that they had been waiting for so long to have, I really enjoyed hearing that. I think the process was overall really positive especially once we began to talk about the sort of parameters of what the open adoption would be like and the ways in which I could continue to be a part of [adopted child's] life which had not even really occurred to me as a possibility, but was overall, I'm really happy that, that decision was made and then I could still be a part of [child's] life."
	"They weren't rushing me or anything to choose an adoptive family, so I felt very relievedI wasn't rushed. I got to sit down and look at different families and I could potentially choose for my [child] to be living with. I chose this one family and we went through, sit down, and went to the meet and greet. My [child] wasn't there, because they don't bring [baby] until I actually choose them, which was very nice. It wasn't like, "Okay I want your [baby] give them to me." -Participant 2
	"It's been an incredible experience for me to be able to I just feel obviously they're really incredible people and I feel very lucky to be a part of their lives and overall very happy with my decision to pursue an adoption." -Participant 1
	"I remember going into the process really wanting to work with a very open adoption agency. It was really important to me that I worked with an organization that didn't have super duper strong religious ties and that allowed for same sex adoption so or single parent



Theme	Supportive Quote
	adoption." -Participant 1
	"From what I could remember, they asked me for it, does age matter? Does sexuality matter? Gender? I told them that doesn't really matter as long as they have a true passion of why they want to have this child." -Participant 7
	"I had narrowed down to three families and [Spence-Chapin social worker] was going to come with their family photo album and then we're going to select that dayshe finally brought me the books. I had a list of things that I wanted for a family, and I finally picked a family." -Participant 3
	"I thought it was great. It's a weird process, because you're picking out people that are essentially going to raise. It was good. I thought the information was really good at the time, at that moment when it was." -Participant 3
	"It was helpful to learn so much about the pre-adoptive families that I - that I decided to learn more about. Like I got to - I got to hear a lot about them, including like how they described like the parenting styles of their parents, like learning things about like their upbringing and really was a game changer" -Participant 8
	"And I also really thought that the process of choosing this family, [adoptive parents names] was effective for me. I liked the way that they had set it up." -Participant 4
	"They give you the book that they had them make themselves. Which was pretty cool, because you can see so much about the two different families. It's not like they said, "Give us a bunch of photos and put them in identical albums." -Participant 4
	"[adoptive mother] came with me to a doctor's appointment so she could see the ultrasound and hear the heartbeat, and me, and her, and Dr. [name]l, all cried together." -Participant 4
	"I think the process was, [Spence-Chapin social worker] made me very comfortable, there was a ton of books that [Spence-Chapin social worker] had me look through, so in families, I was able to meet with them," -Participant 5
	"It seemed like there were no more selections for me, like I was being rushed man, and I don't know if it's because they're telling these people these things that they give in the hopes that this is baby, that that's a possible placement or that I had more time. Like it didn't really seem like I had more time, it just always seemed very rushed."



Theme	Supportive Quote
	-Participant 5 "If I had the chance to go back, I probably would not have chosen the family that my daughter's with now." -Participant 5
	"[Spence-Chapin social worker] brought me the envelope with families and I picked a family of a mother and father first. That was my first thing, because I felt like, "Let me pick somebody who cannot have what I have." -Participant 6
	"Reading their biography or the description, they let me know that they wanted the children to have a relationship with the mom. They wanted to send pictures and updates. They wanted to do everything that I wanted them to do, but I didn't wanna verbally say it, because an adoption, you only think about, "Okay, somebody takes your baby and now the baby is theirs and you have nothing to do with it anymore." -Participant 6
Meaningfulness of birth mother relationships with social	"I thought [Spence-Chapin social worker] provided great service and I felt like she always had my interest at heart always and made sure I was okay and the baby was going to be safe and I always felt that way." -Participant 9
workers	"I did look up [Spence-Chapin] and it seemed like a very family-friendly organization and seemed pretty open-minded and not judging. That's pretty much what I really wanted in an adoption agency, is not to be judged for what my life was going through at that pointI didn't want to be judged and I never felt any judgment. I never felt looked down upon or felt lower than I already felt, so very like a humbling experience knowing that I was being looked at as a person that needed help as opposed to a really bad person, I guess you can say?" -Participant 2
	"I think [Spence-Chapin social worker]'s support and her knowledge of everything and being available." -Participant 9
	"Something I forgot to mention is that [Spence-Chapin social worker] also told me that she doesn't work with pre-adoptive families at all. Like she's - that she only works with folks in my situation. I don't think she even referred - I don't think she even used the term birth parents because like that would imply that adoption was a foregone conclusion. So I don't remember what term she used, but like knowing that she didn't have any adoptive families in her ear, being like, hey, like can we get - can we get a kid?" -Participant 8
	"Even after [baby] was adopted, I still got contacted by the adoption counselor to see how everything was, See if everything was as I dreamed it would be see if there's anything else that you could do for me. She still reached out for at least, a month or two to make sure everything was okay." -Participant 2
	"Certainly I remember having a lot of conversations with our social worker about if I was making the right decision, because I was feeling pressured to keep the baby by my family and I was feeling that there were things that were unusual about my circumstances that

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Theme	Supportive Quote
	meant maybe I shouldn't pursue adoption, because I said, I had already graduated from college. I was 22, I was a little bit older and I just remember our social worker sharing, she was like, "Honestly we get so many different people who come into this office that are at really every stage of life and you shouldn't really allow that you to be the deciding factor in your decision" -Participant 1
	"Like I said I had overall really positive experience with our social worker who I felt did a really spectacular job, I had a really positive experience with the selection process." -Participant 1
	"It was good. It made me feel like, you know, they were, you know, not judging me and they just wanted the best for me. So, yeah it was good. It was okay." -Participant 7
	"She was just very more so wondering what I wanted. She didn't really want to put her input in things" -Participant 7
	"I completely understood everything. The things that I didn't understand [Spence-Chapin social worker] helped me understand it more. They broke it down to me step by step. So the more that they explained the more I was understanding and I was like okay, yeah, we can go with this plan. I was very happy with the decision that I made because they helped me understand it more." -Participant 7
	"[Spence-Chapin social worker] make you feel like you're not by yourself. They make you feel like there's always options. You know, they don't judge, you know, they make you understand that they're here for you, and they're not going to judge you based off the decision that you made. You know, I just like the fact that they were really comforting and understanding." -Participant 7
	"I met a social worker who was great and she was there during phone calls, emails and we worked really well. I had a question, she broke down what I had to do and I did it so that was really nice. But also I was able to advocate for myself and did my own research. I didn't solely rely on her to make things happen. She was more like doing the process along with me or guiding me and then I had to do the rest of the work." -Participant 3
	"I remember, obviously, going there and having, whatever the interaction was, with [names], who ended up being my counselor, and just feeling at ease after having spoken with them. I remember arriving in such a panic because, I'm going to end up raising a baby, and leaving feeling like, "Now, okay. It's okay." It was a place that had a greater resource than just my own having to navigate, and they seemed sincere to me." -Participant 4



Theme	Supportive Quote
	"[Spence-Chapin social workers] were the perfect amount of there and supportive in helping us facilitate our relationship, but also invisible." -Participant 4
	"The only person that probably made me feel more comfortable during the situation was the social worker at Spence-Chapin…I remember her just being a kind person." -Participant 5
	"As soon as [Spence-Chapin social worker] got on the phone with me, she just set it out, what adoption was about, everything that I wanted to ask, but didn't have the guts of asking, she answered within that second, she always let me know. This adoption is not permanent and she let me know there's open adoption, she just let me know every way possible that I can still have a relationship with my child, she just let me know it was available from counseling and she just made me feel so comfortable. It was just like, I felt like she was actually taking my baby. That's how comfortable I felt. She came and she met with me that morning. She spoke to me or did she? As a matter of fact, I think she came that night [of the birth] and she spoke to me, she let me know all my options."
Realities of Post-Adoption Contact	"They were on board with more like four visits a year which was more appealing to me because I wanted a lot of visits, I wanted a lot of openness." -Participant 8
	"Some of the challenges have been like when they treat me like a babysitter or like make it - like sometimes they just want to like thrust [child] at me so that they can like get a break which I get. I do. I just also thought we were building the relationship where they would also want to spend time with me. And we do spend time together sometimes but mostly like their default is like, oh I wants to see [child] and I would like to have more of a relationship with them [adoptive parents]." -Participant 8
	"Then I got a facetime call, then they called me on my birthday, they sent me a birthday card, they sent me a Christmas card, they call me a mother's day. Okay, this is definitely the family I'm very happy I chose like this is perfect. Sometimes I wake up and think is this really a dream? Like it's so too perfect to be true, but it is." -Participant 2
	"It's still the same every three months. They send one email with pictures and then the next time I hear from them is the next three months." -Participant 7
	"I feel like our communication is very good as far as like if I'm like, you know, I can't make it to like a zoom call or like I can't make it to an in person, they're very understandable. [adoptive family] don't make me feel bad about any decision that I make as far as like if I can't show up to something." -Participant 7

Theme	Supportive Quote
	"[Adoptive parents] just gave me their cellphone number. To me, after all these years, that's a big deal. I still email just to not overstep boundaries, [adoptive parent] had given me his cellphone number when they were heading out here, they've head out here, and he's never given me his number. I think it was just more a trusting and I just still emailed them like, "Hey, just wanted to plan something out," and I just don't want to overstep that. When we're meeting up again, "Hey, we're on our way," then I will text them. I just think that's super important for me and I just don't want to do that. Anyway, so the agreement, I think it was four emails a year or three emails a year and one visit a year, something like that." -Participant 9
	"Oh, God. We go for drinks all the time after work, [adoptive parent] and I." -Participant 3
	"I remember not really knowing [adoptive parents] all that well that time of course now and was really worried that they would break the agreement. So I had a lot of questions that, "Well what happens if they stop talking to me, what happens if they don't kind of honor the agreement." And our social workers at the time just being well that's just like a conversation that we can continue to have, Spence-Chapin would really support you in that process should they decided to go no contact or move across the country or something like that. So I remember feeling really supported by that process and very much confident that they would honor the agreement that we need even though this is not necessarily a legally binding thing."
	"For one thing, as far as the adoption contract goes, they were super clear with me about what the realistic limit. I didn't know there were was a difference. I didn't know that you have to go through a court process, whatever, a legally binding thing versus a informal, whatever. I had not been provided that information by my representative which was responsible at this. We opted for an informal agreement anyway, but that clarification seemed incredibly important to me, because they were also honest about the limitations of pursuing any binding agreement, and they were very up front with me in being like, "I mean, at the end of the day, it can't really be enforced anyway. There has to be trust in that." -Participant 4
	"As I said, I have had to have quite a few friends who were adopted, not in open adoptions, they're all of my generation. But I think I wanted to be available to [child]. Whatever situation [child] may or may not have [Child]'s a tween now, so I'm ready for it to come up, and that's fine. Whatever needs to be unpacked in an open adoption, I knew what could be scary and painful, and never answered in a closed adoption. It just doesn't seem like the same. It doesn't seem like two versions of the same thing, to me, at all. I wanted my baby to always, even if [child] chose not to, be able to know that I was there and available, and if [child] needed to hear the things that they probably will, that I've known a lot of other people who have so much unresolved. That was really the main thing. It wasn't so much about me being able to see [child]" -Participant 4
	"Like if I invite you to my house, I expect that when you have parties for her that you invite me and my kids over" -Participant 5

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Theme	Supportive Quote
	"[Adoptive parents] wanted to send pictures and updates. They wanted to do everything that I wanted them to do, but I didn't wanna verbally say it, because an adoption, you only think about, "Okay, somebody takes your baby and now the baby is theirs and you have nothing to do with it anymore." -Participant 6
	"I'll text [adoptive parents], "Hey, how are you doing? And I'll get 30 pictures and about two paragraphs of updates about them and they're always asking, "How are you and [other children]?" They're always asking to meet up" -Participant 6
	"We [adoptive parent and birth mother] just spoke actually this morning, because I had changed my number and let them know that I changed my number and we've been talking and they've been updating me on [child] and it's beautiful. Like I said, I couldn't ask for a better family" -Participant 6
Areas of improvement for Spence- Chapin	"I had a really, really difficult time in the hospital. I was pressured by my doctor to keep [adopted child] and my hospital experiences was really, really rough. I felt kind of mistreated at the hospital. There was one nurse midwife who was the only person who asked like, "Oh what adoption agency are using?" And I said, "Oh we're using Spence-Chapin." And she was super positive. She was like, "That's a really good one." But other than that, overall every person who I interacted with in the hospital seemed really ill equipped to deal with someone who was giving birth and planning on giving up for adoption, so and that's not really spent on Spence-Chapin, but that would be one thing that I would definitely change about the process." -Participant 1
	"I felt really isolated, I felt like there were a lot of people, it was very difficult to I didn't know anyone who had ever gone through what I had gone through. I didn't know anyone who is in an open adoption and so I think that I just wish that I had more opportunities to meet people in a similar circumstance than I would later go on to participate in the Spence-Chapin and Mother's Day events. And so I would meet people who had gone through open adoptions and stuff like that, so that was very helpful, but I think that I had the time wish that I had just been able to talk to maybe anyone who had gone through something similar."
	"I mean certainly I've given it some thought that maybe some type of Doula or adoption Duala experience in something like that. Who can help provide some guidance I think something like that were a presence in the hospital, because my RN who was she was supposed to go off shift, but I was in labor for so long. She specifically stayed to tell me not to plan up for adoption and I felt really vulnerable and really unprotected. What is really someone should probably lose their medical licenses for that." -Participant 1
	"But there are all sorts of aspects to adoption including the physical aspect of giving birth that I think people need support for" -Participant 1
	"Even though I know that [hospital] were informed that it was a adoption placement, that doesn't mean anything to anyone. I feel like more could have been done to, one, prepare me for what I might potentially be dealing with, in that way. And two, maybe this is impossible, but in whatever way it's communicated in the hospital just to create more of a safety around that. Because I was like twice a



Theme	Supportive Quote
	day explaining to nurses, and there were a couple of really insensitive moment. I know that they're not responsible for the people that work in the hospital and camp, insist on sensitivity training. But I just imagine that there can be something there that acts as a buffer, even if it just is about equipping me better." -Participant 4
	"It's really hard to believe as a birth mom, that you are not just vessel of the baby" -Participant 4
	"Just the sense of community that I know they want to and do facilitate, there are all these groups, or events, or different opportunities to get engaged, that are community oriented. But the only thing that birth parents are actually invited to participate in, is a birth parents therapy group. Which, one, is just birth moms, just separated from the overall community, is the way that it reads. You'll reread it after our meeting and you'll be like, "That's fucked up." Because it's also not about building." -Participant 4
	"When I was thinking about it, wanting to talk about the, on the ground, what it is to design a situation after adoption or throughout the adoption experience that facilitates family making in a way that isn't unintentionally separatist or treating the birth mother as not one of the same kind, not by nature, one of the group. Does that make sense?Just emotionally in a different space. I think that, there needs to be places where birth mom's can ask questions too, or conversations, because that's alsoBut in looking at all of the resources, and I know they have been for [adoptive parents], and for [adopted child], and he gets so much from other adoptive families, but he doesn't know any other birth moms either, and he doesn't know what that picture looks like. When I'm at his house and if the neighborhood kids are by, he'll bring them in to meet me, show and tell, which I love. But also, it's just a thing that needs to be a whole picture more often. He needs to know others besides myself, other examples and Does that make sense?" -Participant 4
	"I don't know what it might look like, but a situation where conversations can happen between different birth moms, and different adoptive families, and maybe different adult adoptees, I think could be beneficial all around, because it's just for all the obvious reasons" -Participant 4