

○ ***Conclusions regarding the grieving process***

This heuristic inquiry about relinquishment of motherhood, with its reduction to essences via feelings, images and themes from a single case study, has embodied meanings which are consistent with the findings of larger clinical studies in regard to prolonged, arrested grief and loss still being experienced by birthmothers decades after their relinquishment.

Although this study was undertaken outside the medical model and did not set out to test these findings, it should be noted that Zena experienced all stages of the grief patterns displayed by relinquishing mothers, as reported in the literature. Her realization stage was characterised by shock, numbness, and a sense of humiliation that she was denied the basic rights of motherhood, even to hold her surviving son and be informed of the funeral arrangements regarding her still born son. In her own words this “manifested itself” over a period of five years into illness and disease, resulting in the surgical removal of her gall bladder, thus bringing her into the category of birthmothers who Van Keppel (1984) found to be in a state of chronic ill health.

With an absence of mourning, retention of unresolved grief, and few outlets to share confidences, she went on to develop immature defences of denial, fantasy and repression, and to withhold open expression of her true feelings. Zena termed this her “blocked period”; her life had become "a lie to protect others", a reference to the extended family who were unaware of her childhood pregnancy. Zena's case history supported the claim that if considerable time had elapsed since surrender, the birthmother would most likely be obsessed by a desire to search, especially since external pressures had been placed on her in regard to relinquishment.

Present also were signs of sadness and depression, unresolved grief and anger, devaluing of self, resentfulness and blame directed at the bureaucratic hospital and adoption agencies. Zena sometimes commented that after discussion and reflection about her paintings she "felt better about herself". Indications that delayed mourning was occurring in the early sessions included tearful outbursts, and difficulty with articulation including hesitancy and lapses of concentration leading to frequent unfinished sentences.

Zena entered the reorientation phase during the final stages of the project, when her loss was being acknowledged and supported for the first time, by someone who understood both the burden of her long held secret and the release that accompanies disclosure to family and friends. Her preparation for full self disclosure, after contact and reunion with her son, was delayed until repercussion effects being felt on all sides of the adoption triangle had eased and the extended family had reached a point of acceptance.