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Adoption Advocate

The Need for Infant Adoption Training in Healthcare: Enhancing Clinical Practice and Birth Parent Care

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Introduction

Each year in the United States, millions of pregnancies are unintended. According to the National Center for Health Statistics, more than 40% of pregnancies in 2019 were classified as unintended, described as "mistimed," "too soon," or "unwanted."[1] Because healthcare providers are often the first to confirm or communicate a pregnancy, they play a critical role in these situations. As frontline professionals, they frequently guide initial conversations with patients experiencing unplanned pregnancies and provide care and information for those considering their pregnancy options.

When an individual is faced with decisions about pregnancy outcomes and parenting, research indicates[2,3,4] and professional standards recommend[5] that patients receive counseling on all available options, including adoption, in order to allow them to make an informed, autonomous decision.

Because healthcare providers are often the first to confirm or communicate a pregnancy, they play a critical role in these situations.

[1] National Center for Health Statistics. (2023). *Updated methodology to estimate overall and unintended pregnancy rates in the United States.* Centers for Disease Control and Prevention. https://www.cdc.gov/nchs/data/series/sr_02/sr02-201.pdf

[2] Bell, L. A., Tyler, C. P., Russell, M. R., Szoko, N., Harrison, E. I., Kazmerski, T. M., Syed, T., & Kirkpatrick, L. (2023). Preferences and experiences regarding pregnancy options counseling in adolescence and young adulthood: A qualitative study. *Journal of Adolescent Health, 73*(1), 164–171. https://doi.org/10.1016/j.jadohealth.2023.02.017

[3] Nobel, K., Ahrens, K., Handler, A., & Holt, K. (2022). Patient-reported experience with discussion of all options during pregnancy options counseling in the US South. *Contraception, 106*, 68–74. https://doi.org/10.1016/j.contraception.2021.08.010

[4] O'Reilly, M. (2009). Careful counsel: Management of unintended pregnancy. *Journal of the American Academy of Nurse Practitioners, 21*(11), 596–602. https://doi.org/10.1111/j.1745-7599.2009.00450.x

[5] Adoption-Sensitive Clinical Care. (n.d.). *Options counseling standards.* https://hbasct.org/options-counseling-standards/

This article makes the case for current, evidence-based training in adoption awareness and sensitivity for healthcare professionals. We will also review a free training program that is designed to address clinical education gaps and discuss the wide-reaching benefits of this option.

Importance of Infant Adoption Awareness Training

Benefits for Expectant and Birth Parents

Choosing adoption for one's child is not a single decision or a moment in time; it is a lifelong journey that can shape both the parent's and the child's identities. How an expectant or birth parent understands and perceives the option of adoption, how they view themselves and others who consider adoption, whether they feel they received accurate, neutral information free from coercion, and how they are supported through their decision-making process as well as their experiences of grief and loss can all have lasting effects. These factors may influence their expectations about the experience of being a birth parent and whether or not they will carry shame and stigma with them throughout their lifetime.

In the summer of 2024, the Adoption-Sensitive Clinical Care (ASCC) project surveyed 112 birth mothers regarding their experiences with adoption and healthcare provider support. The majority of respondents reported having little to no knowledge about adoption prior to placing their child for adoption, and 76% said they *did not* have a conversation with hospital staff about adoption prior to making their decision.[6] The majority of participants (80%) reported that hospital staff did not provide them with information about adoption, and nearly all respondents (95%) agreed that hospital staff could benefit from training to better support patients considering adoption.[7]

A 2022 survey of 1,160 birth mothers reinforced the need for adoption-specific training for healthcare providers. When asked to identify sources of stigma and support surrounding their decision to make an adoptive placement, nearly one-third of birth mothers reported experiencing stigma from healthcare workers related to their decision to place their child for adoption, while less than 20% indicated that healthcare providers were a source of support around their adoption decision.[8]

The same survey examined birth parents' satisfaction with their adoption placement decision and the factors that shaped it. Two elements emerged as being statistically significant predictors of adoption satisfaction: receipt of accurate information and making a non-coerced decision.[9]

The importance of infant adoption awareness training cannot be understated for those patients who are considering, choosing, or who have chosen adoption. However, the

[6] Willis, T., Hanlon, R., Vanderwill, J., Miller Richards, A., Henneman, K., Chambers, J., & Curry, K. (2025). *Adoption-sensitive clinical care: A pre-implementation needs assessment across hospital staff, birth parents, and adoptive parents* [Manuscript submitted for publication]. Adoption-Sensitive Clinical Care.

[7] Ibid.

[8] Hanlon, R., Koh, E., Alexander, R., Bruder, L., Boschen, A., & Williams, P. L. (2023). *Profiles in adoption: Birth parent experiences*. National Council For Adoption.

[9] Ibid.

...nearly one-third of birth mothers reported experiencing stigma from healthcare workers related to their decision to place their child for adoption.

benefits of such a training opportunity are not limited to expectant and birth parents.

Benefits for Hospital-Based Staff

Healthcare practitioners are often some of the first people to communicate with or care for expectant and birth parents considering adoption. For example, clinicians in obstetrics and prenatal care may be the first to discuss pregnancy options with a pregnant patient. Labor and delivery nurses often support patients during emotionally complex births where adoption decisions are unfolding. Emergency department professionals may be delivering news of unexpected pregnancies to patients and fielding questions about what to do next.

Despite clear professional standards indicating a need for comprehensive pregnancy options counseling, many healthcare professionals report receiving little to no formal training on adoption as a pregnancy option. In the 2024 ASCC survey, hospital-based professionals were asked about their experiences with and training on adoption in the healthcare setting. Only 18% of the respondents reported that they had received any training on sharing information about the adoption process with pregnant patients.[10]

As a result of this education gap, providers may consult less reliable resources when counseling and caring for patients, which may lead some to neglect the option entirely, risk unintentional coercion, or present the adoption option through a non-neutral lens, whether pro- or anti-adoption.

Having evidence-based, trauma-informed adoption awareness training can better equip providers to uphold their commitment to help without causing unintentional harm and to promote informed consent and independent decision-making.

Benefits for Hospital Systems

Hospital systems, too, can benefit from implementing adoption awareness training among their providers. In addition to the relational benefits inherent in improved patient outcomes (increased patient trust, loyalty, and satisfaction; reputation for compassionate and quality care), adoption training can lead to procedural, financial, and legal benefits as well.

Adoption training that provides guidance on developing and refining hospital and clinic adoption policies and procedures can help healthcare organizations increase operational efficiency in the care of adoption-involved patients, reduce medical and privacy errors stemming from outdated or insufficient policies, and better protect the rights of everyone involved. More broadly, it strengthens an organization's commitment to non-directive counseling and the equitable provision of information and services.

[10] Willis, *supra* note 6

Knowledge Gaps and Training Needs

The training needs related to adoption are broad due to the lack of adoption information in most medical education programs. The goal of adoption education should not be to advocate for more or fewer adoptions but instead to support the objective of providing respectful and informed care.[11] The following sections highlight identified knowledge gaps and training needs around adoption in healthcare.

Adoption Basics

> *"Adoption is an area that they don't teach in medical school."*
> *– Emergency Medicine Physician*

> *"As a newborn provider who has worked in a hospital for more than 25 years, I have never had formal training in the adoption process."*
> *– Medical Director, Newborn Nursery*

Because healthcare professionals often receive little to no foundational training on adoption, they can lack even a basic understanding about the history and evolution of adoption. Yet that context matters; understanding how adoption has changed throughout the years, the steps in the adoption process for expectant parents, and the protections now in place for birth parents and adopted persons is critical to helping providers challenge outdated stereotypes and offer accurate, informed guidance to patients who are considering making an adoption plan.

When asked what knowledge or skills hospital staff could develop to better support them during the adoption process, birth parents most frequently identified the importance of respectful, non-judgmental care and sensitivity toward those going through the adoption process along with a stronger understanding of the adoption process itself.[12]

Providers recognize these gaps as well, with 76% reporting a need for further education on adoption processes and 69% citing a need for training in ethical adoption practices.[13]

Appropriate Language

> *"I think the reason we [may be] uncomfortable [discussing adoption with patients] is we're not often clued in to the social-emotional things and how that may be affecting [the patient], and what we're saying, and the way we're saying it... If you haven't had a situation like that, the fear of the unknown makes it uncomfortable."*
> *– Medical Director, International Adoption Clinic*

> *"After birth I was placed in my room for recovery, and the poor nurses just didn't know what to say to me, didn't know how to interact... I felt like they were walking on eggshells... Having those personal biases and those fears of hurting my feelings hurt me as a person and put shame on me that they probably didn't mean to do, but I felt it, and it stayed with me."*
> *- Birth Mother*

Healthcare professionals who are not accustomed to talking about adoption may feel unequipped when speaking with patients

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[11] Association of Women's Health, Obstetric and Neonatal Nurses. (2024). Adoption. *Journal of Obstetric, Gynecologic & Neonatal Nursing, 53*(6), E1–E3. https://www.jognn.org/article/S0884-2175(24)00252-1/fulltext

[12] Willis, *supra* note 6

[13] Ibid.

considering or making an adoption plan. Without proper training, even well-meaning providers may unknowingly use language that is coercive, stigmatizing, or perpetuates shame for their patients.

Medical and mental healthcare providers who participated in a 2025 adoption training pilot program reflected on the training material presented. All six training participants identified the information about accurate and appropriate adoption language as one of the most valuable topics covered.[14] This was also reflected in the ASCC 2024 survey of healthcare professionals, where 66% of respondents flagged "appropriate adoption-specific language" as an area in which they would most want or need training.[15]

Adoption Policies

> *"We have a pathway for pretty much anything else that walks through the door..., but we don't have an algorithm for an unplanned pregnancy. So I think we all do things very differently."*
> *– Pediatric Emergency Medicine Physician*

In many hospitals and clinics, there are no established adoption policies or procedures, which can lead to uncertainty about steps to take, rights to be aware of, or when and where to make referrals. Hospitals and clinics may not have adoption policy on their radar, or they may consider adoption to be the realm of the hospital social work department, failing to realize that adoption-sensitivity for physicians, nurses, and others can have a significant impact on a patient's experience and ultimate satisfaction with their decision.

Adoption Experiences

> *"We are taught very early on in medical school and residency to check for postpartum depression... Have I ever once asked, or been taught to ask, an adoptive mother if she has depression? Have I ever been taught to ask the birth father if he has depression? No. Those are things we can miss very, very easily."*
> *- OB/GYN*

The unique experiences and needs of individuals involved in an adoption plan are nuanced and can be overlooked or misunderstood by providers who are unfamiliar with the emotional journey of adoption. When a provider lacks the context for a patient's experiences, they are more likely to make assumptions, act on unconscious biases, and miss symptoms that, in the correct context, would be easily recognizable.

Without proper training, even well-meaning providers may unknowingly use language that is coercive, stigmatizing, or perpetuates shame for their patients.

For example, a provider unfamiliar with adoption may misread a birth mother's display of grief as a sign that she regrets her decision or is changing her mind. The opposite assumption is equally problematic: a patient who is not outwardly grieving may be incorrectly

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[14] Willis, T., Fowler, J., Vanderwill, J., Miller Richards, A., Read, J., & Henneman, K. (2026). *Building non-coercive, adoption-competent practice: A theater-test usability pilot of training modules and portal* [Manuscript submitted for publication]. Adoption-Sensitive Clinical Care.

[15] Willis, *supra* note 7

presumed to be "fine," and a provider may not offer additional, critical referrals or support. In reality, grief is a completely normal and expected part of the birth mother experience, regardless of how it presents. When providers lack this important context, patients may not receive the resources, information, or support they truly need.

Background: Adoption Training for Hospital-Based Staff

The federal government has a longstanding commitment to educate healthcare staff on presenting unbiased, accurate adoption information and referrals to expectant parents.

This work began in 2000 with the passage of Public Law 103-310, which amended the Public Health Service Act to require federally funded health centers to offer adoption information on an equal basis with all other pregnancy options.[16] This legislative shift led to the creation of federal Infant Adoption Awareness Training Program (IAATP) best practice guidelines, which sought to fill pervasive gaps in provider knowledge, cultural responsiveness, and confidence around discussing adoption with patients experiencing unintended pregnancies.

Understanding Infant Adoption: 2000 – 2020

Regional and national curricula based on these best practice guidelines launched in 2001. By 2004, a unified, evidence-based curriculum—Understanding Infant Adoption (UIA)—was developed. The UIA curriculum integrated legal, clinical, cultural, and psychosocial components related to infant adoption in healthcare settings. From 2001–2012, more than 70,000 healthcare and helping professionals were trained on UIA. Evaluation findings consistently demonstrated significant increases in participant knowledge, confidence, and skill in presenting adoption as an option.[17, 18, 19]

From 2017 to 2020, the focus included extending the reach of UIA into medical settings nationwide, preparing 3,591 healthcare professionals through 298 Train-the-Trainer sessions, and certifying 180 UIA trainers. Participants again reported substantial gains in knowledge and confidence and strong alignment with nondirective, non-coercive standards.[20]

Current Efforts: Adoption-Sensitive Clinical Care

Training efforts have continued with the current Adoption-Sensitive Clinical Care (ASCC) project. The ASCC project is funded through the federal Children's Bureau and

[16] Children's Bureau. (2012, May 17). *Infant adoption awareness training program*. U.S. Department of Health and Human Services, Administration for Children and Families. https://acf.gov/cb/grant-funding/infant-adoption-awareness-training-program

[17] Children and Youth Research Services (2005). *Adoption awareness: An evaluation of a national level training program for pregnancy counseling.*

[18] Gallagher, J. R., & Rycraft, J. R. (2014). Evaluation of the Infant Adoption Awareness trainings: Transforming training knowledge to adoption practice. *Adoption Quarterly,* 17(4), 253–279. https://doi.org/10.1080/10926755.2014.891552

[19] Vazquez, M. (2014). *Infant adoption awareness training program evaluation: A quantitative study* (Publication No. 1528062) [Doctoral dissertation, California State University, Long Beach]. ProQuest Dissertations & Theses Global. https://www.proquest.com/openview/60a13d59d31825446f12c98bfed73b30

[20] Public Research and Evaluation Services, Inc. (2020). *Summative Evaluation Report: Hospital-Based Adoption Support Services (H-BASS).*

is being led collaboratively by National Council For Adoption, Spaulding for Children, The Adoption and Foster Care Clinic, and University of Washington School of Social Work.

ASCC is built on a framework of collaboration across the adoption and medical communities, striving for a diversity of perspectives, clinical accuracy, and adoption-competent empathy. The project is supported by a national advisory committee[21] whose collective expertise includes medical providers, mental health clinicians, and adoption social workers, alongside birth parents, adult adopted persons, and adoptive parents.

ASCC is built on a framework of collaboration across the adoption and medical communities, striving for a diversity of perspectives, clinical accuracy, and adoption-competent empathy.

A central pillar of the multi-tiered ASCC project is bringing the Understanding Infant Adoption (UIA) curriculum into its next chapter. This initiative focuses on adapting the content to meet the specific, modern-day requirements of healthcare providers and the families they serve.

Understanding Infant Adoption 7 Core Curriculum

In 2025, the ASCC project released Understanding Infant Adoption 7, or UIA 7, which builds upon the UIA legacy in helping clinicians and social workers to feel more confident in presenting adoption as an option for unintended pregnancies and providing patients with comprehensive, adoption-sensitive support and referrals throughout the process.

The curriculum comprises six modules covering the following key topics:

Module 1: Introduction to UIA 7 – statistics about private domestic infant adoption, findings on the experiences of birth mothers, professional responsibilities of healthcare professionals, ethical principles in options counseling, and personal values acknowledgment and assessment

Module 2: Adoption Is an Option – the evolution of adoption, the private domestic adoption process, the relationship continuum (open, semi-open, closed), kinship adoption, federal and state laws governing adoption, and the rights of expectant parents

Module 3: Presenting Adoption as an Option and Making Referrals – accurate and appropriate adoption language; interacting with birth parents; non-directive, non-coercive pregnancy options counseling techniques; ethical issues with last-minute adoptions; impact of trauma on pregnancy counseling; and ethical adoption referrals

Module 4: Influences on Decision-Making – influences on pregnancy decision-making, with specific focus on patient backgrounds, birth fathers, adolescence, substance use, and trauma

[21] Adoption-Sensitive Clinical Care. (n.d.). *National advisory committee.* https://hbasct.org/national-advisory-committee/

Module 5: Adoption Best Practices – Implications for Healthcare Settings – the hospital experience for expectant and birth parents, issues that impact adoption work within hospitals, adoption plans and legal paperwork, and hospital adoption policies and procedures

Module 6: Pulling It All Together – case scenarios designed to help participants integrate the information and knowledge from the first five modules

When developing the UIA 7 curriculum, the ASCC project team built on its predecessor (UIA 6) through a comprehensive review and revision, incorporating recent research on birth parents, revisions to language throughout, and a new suite of diverse video interviews. (The anonymized quotes from providers, professionals, and those with lived experience throughout this article are sourced from these interviews.) The update also features additional case scenarios that help prepare professionals for the nuances of hospital-based adoption care.

Prior to the ASCC project period, the UIA curriculum was only delivered live in a full-day training format. However, in 2025, the ASCC project team released UIA 7 as an asynchronous online learning program featuring a mix of reading, audio narration, videos, interactive questions and reflection, case scenarios, and resources. The online training is available in four lengths ranging from 1.5 to 6.5 hours, each of which offers free accredited continuing education.

In addition to the online training, UIA 7 continues to offer a Train-the-Trainer model that provides materials for intensive or condensed live hospital-based sessions. At the time of publication, specialized versions for tribal communities and Spanish speakers are also in development to broaden the program's reach, as well as audiobook and e-book formats.

Complementing the core curriculum are resources to support adoption-sensitive care, including 11 supplemental asynchronous trainings offering a deeper dive into important adoption topics, and state-specific adoption guides which were designed to help providers understand state-level adoption regulations and referral resources.

Lessons Learned

The ASCC project's early implementation of the UIA 7 curriculum has reinforced that adoption training in healthcare settings is both needed and feasible, but impact depends on pairing strong content with practical supports. The ASCC team used pilot testing and a national Train-the-Trainer approach to refine training content, strengthen usability, and accelerate dissemination.

Pilot Test Overview and Takeaways

The ASCC project team conducted a pilot test of the UIA 7 curriculum in May 2025. The pilot indicated strong acceptability and perceived usefulness of the modules, while also clarifying what makes the training "stick" in time-constrained settings. Key takeaways centered on the outsized importance of adoption-sensitive, non-coercive language guidance; the need for more scenario-based learning; and ensuring role clarity and realistic integration into a professional's workflow.

Train-the-Trainer Session Feedback

The project team also held a UIA 7 Train-the-Trainer workshop in December 2025 that demonstrated strong national interest and high satisfaction with the ASCC approach. Participants rated the session very highly overall and reported strong perceived learning gains across objectives.

Open-ended feedback revealed highly actionable implementation insights and clear recommendations for strengthening dissemination, including a ready-to-use Train-the-Trainer toolkit (facilitator guide, slides, cases, implementation checklist), follow-up supports (office hours or communities of practice to troubleshoot barriers), strengthened accessibility and logistics guidance, and increased interactivity and deeper-dive options.

Planned Evaluation Efforts

Continued evaluation will monitor reach and uptake of the UIA 7 curriculum; assess learning outcomes and confidence gains; examine implementation outcomes; and capture early indicators of practice change.

What's In It for Adoption Professionals

A reputable adoption training program like UIA 7 offers a valuable opportunity for adoption professionals who serve expectant and birth parents to strengthen collaboration with hospitals and other healthcare settings. Benefits include:

Pathway for building relationships: Adoption professionals frequently identify trust-building with healthcare providers as a challenge, while healthcare professionals have expressed skepticism toward training offered by adoption agencies, citing concerns that such initiatives may be primarily motivated by client recruitment rather than educational objectives.

One of the primary strengths of the ASCC project is its ability to help establish trust and rapport among adoption and healthcare professionals, with its nationally recognized UIA 7 curriculum and clear emphases on shared priorities, such as ethical care and referrals, autonomous decision-making, and informed consent.

Free continuing education: An additional advantage of ASCC's UIA 7 curriculum is that it offers free social work and medical continuing education credits. This not only serves as an incentive that adoption professionals can offer to local hospital providers and social workers, but it also supports adoption social workers' own licensure and professional development requirements.

Robust toolkit of resources: The ASCC project has designed the UIA 7 curriculum and materials with the realities of adoption professionals' workloads in mind. The options for flexibility and customization included in the training package help adoption professionals offer training options based on the needs identified within their local hospital system. The package includes presentation tools, handouts, and marketing resources with practical guidance on how to effectively introduce and position the training within hospital systems, reducing the burden on agencies and individuals to develop messaging from scratch.

Without training, providers may inadvertently use language, make assumptions, or offer guidance that undermines patient trust or overlooks critical needs.

In Their Own Words

SAARA MCEACHNIE, LICSW, LCSW-C, ADOPTION PROFESSIONAL

In my work, I have spent time in many hospitals alongside staff who are compassionate and well-intentioned, yet often fearful of saying the wrong thing when supporting patients navigating complex decisions. This training creates space for healthcare professionals—already grounded in empathy and care—to gain foundational knowledge about how to thoughtfully support expectant parents who are exploring their parenting options, including adoption.

The training strengthens core competencies while clarifying the appropriate scope of practice, helping staff understand where they can confidently provide guidance and where it is best to defer to adoption professionals. For many, this clarity alone has made a significant difference, increasing both confidence and comfort in these sensitive conversations.

Most importantly, the training humanizes what is often an incredibly vulnerable experience. It works to reduce bias and stigma that can sometimes surround expectant parents considering adoption and fosters a deeper understanding of the profound weight of this decision.

CELESTE LIVERSIDGE, JD, ADOPTION ATTORNEY

As an adoption attorney, I have seen firsthand how much the earliest conversations in a medical setting can shape an expectant parent's experience when facing an unintended pregnancy and considering adoption. Since healthcare professionals are often the first voices in that moment, when they lack adoption-specific training, even well-intentioned interactions can unintentionally oversimplify the process, reinforce stigma, and undermine truly informed decision-making.

The ASCC training is critical because it helps ensure that expectant and placing parents receive non-coercive, trauma-informed support.

What's In It for Healthcare Professionals and Systems

Healthcare professionals work at the intersection of medicine, ethics, and some of the most emotionally significant moments in people's lives. Few situations illustrate that intersection more clearly than infant adoption. Yet, as identified earlier, many providers receive little to no formal training on how to approach these moments. Benefits of the ASCC project's UIA 7 curriculum for healthcare professionals and systems include:

Higher quality of care: Adoption situations often involve heightened emotional vulnerability, legal considerations, and complex family dynamics. Without training, providers may inadvertently use language, make assumptions, or offer guidance that undermines patient trust or overlooks critical needs.

ASCC's UIA 7 curriculum addresses this gap in a way that is practical, efficient, and immediately applicable, with its emphasis on a solid understanding of adoption processes and experiences, appropriate language, and ethical referrals.

Convenient, flexible continuing education: Two of the most compelling aspects of the UIA 7 training are its convenience and flexibility. The virtual, asynchronous training options allow healthcare professionals to gain valuable expertise and free continuing education without adding another burden to their schedules, while the variety of training lengths and modalities provide direct support options that facilitate connections and collaboration.

Skills that benefit every patient: The UIA 7 curriculum reinforces core values of modern healthcare, such as empathy and patient-

centered care. Many of the competencies emphasized through this training (e.g., trauma-informed communication, non-coercive and nondirective delivery of information, adoption sensitive language) are universally applicable across healthcare settings and situations.

Strengthening systems through standardized training: A national, standardized curriculum offers another key advantage: consistency. When healthcare teams across the country draw from the same evidence-informed training framework, it reduces variability in how adoption situations are handled. It also offers an opportunity for individual hospital systems to standardize training for their own staff by integrating UIA 7 into existing onboarding or professional development pathways.

In Their Own Words

SARAH PRAGER, MD, MAS, OB/GYN

All healthcare professionals who work with pregnancy have training in continuing pregnancies, labor and delivery, miscarriage and often abortion. Adoption is another endpoint to many pregnancies or the way that individuals and couples are completing their families, and yet adoption falls almost entirely into the realm of our social workers. This creates a situation where patients spend much of their pregnancies and most of their time on Labor and Delivery interacting with providers who are not well-trained or knowledgeable about adoption and how that may change the situation.

ASCC training is so important to enhance this knowledge for all doctors, midwives, nurses, and other birth attendants so pregnancy care can be holistic and sensitive to the patients' situation and needs. Both in [the] clinic and in the hospital, a much broader coalition of people need this knowledge and education, and it can vastly improve patient-centered care.

Conclusion

Adoption-sensitive clinical care is an opportunity to increase understanding and empathy around the adoption experience within the healthcare field, promote professional collaboration between healthcare and adoption professionals, and create awareness around common adoption experiences and emotions, all with the goal of providing a higher quality of healthcare to those considering or involved in making an adoption plan.

For individual clinicians, it builds confidence and competence in situations that many have never been formally taught to navigate. For healthcare systems, it promotes consistent, trauma-informed practices that reflect the highest standards of care. And for the families whose lives intersect with adoption, it ensures that the healthcare professionals they encounter are prepared, medically and compassionately, to support them.

Learn more about the ASCC program at hbasct.org or check out the core UIA 7 curriculum and supplemental trainings on training.hbasct.org.

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In Their Own Words

JANELLE BASHAM, BIRTH PARENT

\Women navigating an unintended pregnancy deserve care that is compassionate, respectful, and grounded in accurate information about all of their options, including adoption. Healthcare professionals are often among the first individuals a woman encounters during a deeply vulnerable moment. The way adoption is discussed can influence whether she feels supported in exploring her choices without pressure or stigma.

As someone who works to raise awareness about adoption and support women impacted by it, and as a birth mother who benefited from clinicians comfortable supporting my adoption plan, I believe training that equips providers to address adoption with clarity, accuracy, and sensitivity is essential. When clinicians are prepared to discuss adoption in an informed and respectful way, women are better equipped to make fully informed decisions and feel supported throughout the process.

KELLY CURRY, ADOPTED PERSON

As an intercountry adoptee and an adoption professional, I've had the experience of witnessing the evolution of adoption practice from two deeply personal perspectives. Over the years, I've had a front-row seat to the tremendous growth in education, awareness, and trauma-informed support for the entire adoption constellation. I've experienced firsthand how informed, compassionate care can shape identity, belonging, and healing. I've also seen the powerful ripple effects when adopted people and their families are supported with intention, integrity, and empathy. The UIA 7 training reflects that same forward movement, a commitment to doing better because we now know better.

Adoption professionals and healthcare providers who work alongside expectant and birth parents are helping to write the opening chapters of an adopted person's life story and how they will one day understand their own beginnings. They can provide stability and compassionate support to expectant and birth parents during one of the most vulnerable times in their lives. In doing so, they help lay a foundation of respect and humanity for the child whose story is just beginning.

KRISTEN HAMILTON, ADOPTIVE PARENT

Although I've never met them, I feel a sense of protection toward my children's birth mothers. Those women were, and are, an inextricable part of the amazing humans that I have the privilege to raise. And it pains me to think about what their pregnancies and birth experiences were like, knowing their circumstances. I wish they could have received the compassionate, ethical care that this training teaches. My heart aches knowing they were likely not offered resources for post-placement grief counseling or birth mother support.

Adoption-sensitive clinical care should be the standard of care for every woman facing an unintended pregnancy. The expectant and birth families deserve it, and the entire adoption and child welfare community would benefit.

Additional Resources

Supporting Birth Parents

- AdoptMatch
- Birthparent Support Alliance
- BraveLove
- Bellis
- Postpartum Support International

Articles and Professional Standards

- Birth Parent Grief in Adoption
- Teaching Medical Students About Adoption and Foster Care
- Could This Get Any More Complicated? Supporting Adoptions and Surrogates in the Birth Place
- AAP Committee on Adolescence: Options counseling for the pregnant adolescent patient
- ACNM Position Statement: Access to comprehensive sexual and reproductive health care services
- AMA Adoption Policy
- ANA Code of Ethics for Nurses

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