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The Relinquishment of Newborns and Women’s Reproductive Rights

The phenomenon of a new mother’s relinquishment of her newborn child to the care of the state, a practice called *otkaznichestvo* [from *otkaz*, “refusal,” “relinquishment,” or “rejection”], is an acute social problem. A thorough study of the circumstances and factors that cause this behavior would seem to be essential from the viewpoint of both science and society.

The present article is based on a survey of factors that cause a woman to give up her newborn child, in the context of other events and circumstances in her life; the method of qualitative interviews was used in the cities of Moscow, Nizhnii Novgorod, Samara and Samara Oblast, and Syktyvkar. Interviews were also conducted with a control group of women in similar circumstances who had not given up their children. Thirty-two interviews were conducted in Moscow (eighteen *otkaznitsy* [women who have given up their

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newborn] and fourteen who kept their babies), fifteen in Nizhnii Novgorod (ten *otkaznitsy* and five from the control group), twelve in Samara and Samara Oblast (eight *otkaznitsy* and four from the control), and two in Syktyvkar (one and one).

The purpose of the survey was to study just how the combined effects of societal, cultural, and individual aspects are manifested in cases of “rejection of motherhood,” to determine the social and economic conditions of the lives of *otkaznitsy*, the opportunities that were opened or closed to them in connection with becoming mothers, and the context in which they decided to give up their newborn child. The objective was also to compare the situations in provincial cities and in Moscow. In addition, the intent was to study the reproductive attitudes of Russian women today, by comparing *otkaznitsy* with other mothers living in similar circumstances. In the process, the author used the following hypotheses:

(a) Women’s attitudes toward motherhood are not psychobiological constructs shaped from childhood but the effect of social circumstances, one that can differ greatly during the different periods in the life of the same woman.

(b) The opinion most prevalent in the mass consciousness of Russians (shared by a number of researchers who have written about this topic)—that a woman’s relinquishment of her newborn child represents extreme deviation from maternal behavior, while a “normal” woman would never do such a thing—is not entirely justified. The role played by circumstances outside the individual in cases of maternal relinquishment should not be underestimated.

(c) The economic and social crisis that has surged in Russia since the early 1990s has had a huge effect on the behavior of women. Poverty in the traditional economic sense, as well as in the sense of insufficient social ties and inadequate social adaptability, which had their beginnings in the childhood of the *otkaznitsa* constitute the basic factor causing *otkaznichestvo* in most cases.

(d) It is also necessary to consider subjective factors such as the weakening of a positive attitude toward reproduction in society as a whole, the increase in negative public attitudes toward child bearing, especially in the case of second, third, or more children, or children born to mothers who are “too young” or “too old.”

(e) The psychological characteristics of the personality and the character of the socialization of *otkaznitsy* also have an influence on their behavior when it comes to motherhood. Nonetheless, these factors do not give grounds for asserting the stereotypical notion that *otkaznichestvo* is exclusively “deviant” or “abnormal” because many women with similar social and psychological problems would never think of giving up their newborn child.

Since the early 1990s the number of cases of new mothers giving up their babies in Russia has increased each year. The number of relinquished children admitted into children’s homes [orphanages] in Moscow rose by 2.1 times from 1988 through 1994 [1]. For the sake of comparison, in the same period the birth rate went down by 1.5 times. In the space of one year, 1991, from one to three cases of relinquishment of newborn babies took place every day in the maternity hospitals of Moscow. In 1992, in just one maternity home in Moscow, attached to Hospital No. 2 on Sokolina Gora, which had the most *otkaznitsy*, 113 babies were officially turned over by their mothers to the care of the state. In 1994 there were 156 such cases, and in 1995 there were 214.

By the end of the 1990s and the beginning of 2000s the situation seemed to have stabilized a bit, but the statistical data obtained in this survey showed rather that there were fluctuations rather than an increase in the number of cases of relinquishment of newborns. In June to December 2001 we conducted our own interviews in the Moscow maternity home attached to City Hospital No. 36, the facility where new mothers who are the least well off socially are sent and, accordingly, the percentage of *otkaznitsy* is the highest in all of Moscow. According to annual reports coming into the Ministry of Health, in 1999 there were 2,943 live births in that maternity home, of which 404, or 13.73 percent, of the babies were relinquished (including *podkidyshi*, meaning babies whose mothers run away from the maternity home without drawing up official documents of relinquishment). In 2000, 2,910 babies were born in that maternity home, and of that number 345 (11.86 percent) were given up. In the space of the first nine months of 2001, 1,974 babies were born there, and of that number 249 (12.61 percent) were abandoned by their mothers.

By way of comparison, in Syktyvkar, according to data of the republic perinatal center where all relinquished children in the Republic of Komi are sent, fifty-nine children were left in the center (including *podkidyshi* and babies abandoned without formal documentary relinquishment as well as babies who were later picked up by the parents or by relatives acting as guardians). Of that number, a formal relinquishment was drawn up in the case of thirty-two babies.

Over the past six years we have observed a steady rise in the number of residents of children's homes: 18,500 in 1996 and 19,300 in 1998. According to 1998 data, the annual increase in the number of children without parental care in Russia was about 105,000.

Among residents of children's homes there has been a steady increase in the number of children whose parents have been stripped of their parental rights. A total of 21 percent have been given up, and of that number 10 percent were born to underage mothers. Between 35 percent and 40 percent ended up in a children's home owing to parents' alcoholism; and between 2 percent and 3.5 percent owing to parents' narcotics abuse, often aggravated by AIDS. A total of 15 percent were not wanted by their parents because they had birth defects [2]. There has been an increase in the percentage of children who have been placed in children's homes in the first months of their lives: in 1996 the figure stood at 24 percent, and in 1998 it was 32 percent [3]. However, the prevalence of *otkaznichestvo* (about 20,000 cases per year in Russia as a whole) can hardly be compared to the prevalence of abortions (about 20,597,000 in 1999; in 1990 the figure was two times higher) [4].

The phenomenon of relinquishment of a newborn child, which can be viewed as an option of a woman's reproductive behavior linked to solving the problem of becoming a mother at a point in her life where it is unwelcome, is related to other options for solving the problem such as having an abortion or using contraception. It can be evaluated from the standpoint of the following theoretical and methodological approaches.

The scholarly literature in the Soviet era and the post-Soviet era devoted to the rejection of motherhood has usually emphasized individual "blame" or individual psychological "problems"

of the rejecting mother [5; 6, pp. 23–24; 7; 8, pp. 38–47; 9, pp. 14–36], although there are exceptions [10, pp. 113–22]. This is due to the fact that theories accepted in the not too distant past basically viewed motherhood as a phenomenon that is natural and universal, not socially conditioned. It was considered to be the foundation of the sexual identity of every “normal” woman. Moreover, it was implicitly and practically unanimously assumed that the problem of an unwanted pregnancy ought to be solved by abortion.

In the early post-Soviet era, on the other hand, facts came to light that revealed inhumane treatment of abandoned children in children’s homes; these served as an additional argument against *otkaznichestvo* and reinforced the notion that the rejecting mother should be “blamed.” It hardly occurred to anyone to argue that “at least the baby is alive,” while an abortion would have killed it.

In the West, meanwhile, where real ideological wars have been raging in the past few decades between advocates [11] and opponents of abortion [12], behavior that is the counterpart of *otkaznichestvo* (in the West this category is defined as the decision to give up a child so it can be adopted by other people) cannot, to this day, be viewed separately from moral problems relating to abortion. To judge from the scholarly literature, having an abortion affords more problems for young Western women in the 1990s than for their Russian counterparts (compare [13] and [14]).

In the contemporary feminist literature, giving a child up for adoption is sometimes viewed as a mother’s right [15], inasmuch as motherhood is extremely problematic from the standpoint of gender theory, which, in its early versions, affirms that motherhood demands too much from a woman as a person and gives too little benefit [16], and for this reason a woman has the right to decide whether she can find a place for a child in her life while keeping a place in it for herself as well, and also to make the choice even after her child has been born. The development and security of the woman as a person is the prime foundation of feminism, and everything else, including having children and bringing them up, is subordinate.

Two other approaches to the problem in the Western literature are of interest. First, the point of view of contemporary sociobio-

logical theories view the relinquishment of children, turning them over to someone else, in this case the state, as being on par with various forms of “elective infanticide,” or, to put it less harshly, getting rid of unwanted, “superfluous” children. The advocates of this view emphasize that such behavior is characteristic of both human beings and of animals, and its roots are to be sought not in the social context but in biology. S. Hrdy [17] has shown how different parental behavior can be at various times in the life of one individual, under the influence of various conditions of the external environment, and also how different and at the same time how basically similar have been the forms of getting rid of unwanted progeny over the entire history of humankind.

For example, getting rid of babies in tribes that live in primitive communities occurs frequently and in the natural course of things during times of famine, when the survival of such infants is not likely, whereas the preservation of the lives of adults, who will be able to have more children in the future, under more favorable circumstances, can be assured only on the basis of such behavior.

As civilization progresses, on the one hand, the reasons for getting rid of children become more varied: now, “unfavorable circumstances” may not be only purely biological but also social, which, however, does not make them any less fateful for the individual. On the other hand, forms that are accepted in society for getting rid of unwanted children become less and less harsh. Actual infanticide occurs less frequently and is condemned more strongly. Children are abandoned more often, or they are turned over to wetnurses from whom they are not picked up; they are turned over to shelters, or are neglected outright even if they live with their parents.

What is interesting about the sociobiological approach is that in this case the great variety of people’s parental behavior is seen as a continuum rather than as a case of norm and deviation; in certain circumstances getting rid of a baby is seen as a universal phenomenon that cannot be eradicated completely.

According to the second approach to the abandoning of children, from the point of view of Western social policy [18; 19], the best way to resolve a situation of unacceptable biological mother-

hood is to put a child up for adoption, or social motherhood. This is the most humane way to treat a child, and is probably the optimal solution in most cases, but sometimes, not infrequently, it leads to major problems for the mother who has given up her child and later begins to grieve for her abandoned baby, to look for him and want him. For this reason, social policy in the West sees one of its tasks as that of helping such a mother in her grief. Increasingly common is the practice of "open adoption," in which biological parents continue to have access to their child even though they have given him up, and the child knows that they are alive and even has contact with them. In Russia, however, adoption remains a secret, and disclosure is prosecuted by the law.

All of these approaches serve in one way or another to shape the present author's research position. It is true that the mother has a right to her own personal space. It is true that abandoning a child when circumstances are unfavorable cannot be avoided, and it is not easy to blame anyone for that. The best thing is to try to influence circumstances, to create favorable starting conditions for the life of a mother and her child so that they will be able to at least *live together* rather than separately; this would considerably reduce the number of relinquishments, as the experience of Western countries has shown. There can be no question, as well, that raising Russian women's contraception awareness would also lead to a reduction in the number of unwanted pregnancies. However, the occurrence of situations that make it likely that a baby will be given up is still unavoidable, as a consequence of hormonal disruptions that do not make it possible to diagnose pregnancy in time and/or to make use of safe forms of contraception, negative attitudes toward abortion, or a change in the social situation of a woman in the course of her pregnancy.

From the methodological point of view, the feminist approach, constituting as it does one of the sociological perspectives that perceive the process of research as the interaction between a *live* researcher who has the right to her own interpretation, her own vision, and a *live* object or phenomenon of study, which also has the right not to be dissected by way of traditional positivist analysis [20], and the autobiographical perspective ("life-history," as

coherent narratives in actual form, the continuity of whose text contains an important and inseparable part of the content [21]) lie at the basis of this author's ideas about the specific character of research in the field of social reality.

Our interviews were biographical and were focused on the history of the latest pregnancy and the decision to give up the baby, if that decision came up. We also looked at the history of the formation of the female respondent: the family and the environment in which she grew up, whether she wanted children when she was a child, whether she planned on having a career, and so on. Also taken into account were questions having to do with determining the reproductive attitudes of the respondents, their attitudes toward sex, pregnancy, childbirth, young children, having many children, voluntary childlessness, single motherhood, whether they wanted children at all and if so how many, whether children's gender mattered, the importance respondents ascribed to the social and economic conditions in which they would want to raise their children, and also questions about attitudes toward contraception and abortion and the treatment of children in today's society.

We tried to make our sample as diverse as possible in terms of age, marital status, migration status (we included both migrants and women who had spent their whole life in the same city), and social and economic situation, as well as the characteristics of their lifestyles (for example, whether they had an alcohol or narcotics dependency), on the assumption that giving up a newborn baby would be more likely in the case of young mothers who were excluded from social ties, and mothers who are poor. Our hypotheses were confirmed only in part.

We had assumed, for example, that the rather widespread prevalence of narcotics abuse among young people and adolescents starting in the mid-1990s would mean that a dependency on narcotics would be one of the main reasons for giving up a newborn child. However, in all the time that we spent in field research in Moscow we encountered only one *otkaznitsa* who was addicted to heroin. We were able to conduct an interview with her. In a few other cases (one in Moscow and one in Samara) the child was given up in a situation where the father of the child was a narcotics abuser.

Nina, a heroin addict age twenty-four, did not at first want to give up her baby boy. Nonetheless, she was pressured to do so by her relatives (her mother and grandmother) because she was completely dependent on them financially. She also needed them to take care of her because her health had been ruined. The mother and grandmother also insisted on giving up the baby because he was born ill. In addition, they already had a narcotics-addicted daughter who was not working, who was sick and dependent on them, as well as the daughter's [*Nina's*] first child, a little girl age four, who had been born healthy. An additional complication was that the respondent's mother was herself an alcoholic.

Nina wanted to keep this second child of hers at first because in general children are of great importance to her, giving her the hope of being cured and resuming a normal life, as well as providing her with real help of the kind that people traditionally expect from their children in old age: "Vika [her daughter] is a joy to me. She comes up to me and comforts me when I am crying, she starts to cry herself and tells me, 'Mama, don't cry!' When I am hurting she brings me a glass of water."

As a phenomenon associated with giving up a newborn baby, alcoholism is encountered somewhat more frequently than narcotics abuse: there were three cases in Moscow, two in Nizhnii Novgorod, and one in Samara. Characteristically, *otkaznitsy* who suffer from addiction to alcohol also have a whole "bouquet" of associated problems, some of which, taken separately, would themselves constitute a reason to leave a child in the maternity home, including: sex partners who suffer from alcoholism themselves ("The next day, he [the husband] would surely scare the baby to death! Or he would kill it or injure it when he got drunk"—*Natal'ia*, age forty, Moscow); also parents and friends; poverty, unemployment; the lack of a place to live; having other dependent children.

On the other hand, the problem of alcoholism is also a factor in the lives of a number of the women in the control group. For example, *Varia*, age twenty-four in Moscow, said: "Yes, I do drink. As much as I want to. That is my own business and no one else's concern." She gave birth to her third child, whom, in spite of all the difficulties of her life, she would not even think of leaving in

the maternity home.

On the other hand, the social and economic reasons for *otkaznichestvo* turned out to be more important and widespread than we had assumed at first. Among other factors, this is due to the virtually complete lack of state support for families and the birth rate and the inadequate development of the appropriate public organizations. Some of our female respondents (six in Moscow, two in Samara, and two more in Nizhnii Novgorod) would most likely not have decided to give up their newborn babies if they had been able to get at least minimum assistance from some state or charitable organization. That would include, in particular, at least a temporary place to live that was suitable for mothers with babies, inasmuch as most of the *otkaznitsy* in Moscow (and also a few in the other cities) are young migrant women living in a situation of social isolation without any kind of official residence or official work. They are forced to give up their children unless someone else gives them help, usually a man, who may not necessarily be the father of the child, as in the case of *Lida*, age twenty-six; sometimes female friends, as in the case of *Lina*, age twenty-eight, and *Inna*, age twenty-two (all from Moscow); relatives of the mother herself who live in other cities, who have never provided her with that kind of support, or at least we never encountered such a case. Many of them could also use some financial support for a while, as well as medical help. This is true not only in the case of young migrant women but also a second and relatively numerous category of *otkaznitsy*, women who are living in extreme poverty and who already have one or several children. There turned out to be especially many of these in Nizhnii Novgorod (nine out of ten cases), quite possibly because in that city the survey was carried out at the home address of the *otkaznitsa*, which means that the sample there was confined to people who had permanent residence, which is to say, it simply did not include migrant women.

In general, the problem of housing turned out to be one of the most basic ones in the case of the relinquishment of a newborn baby, and the only important problem in cases of what is called temporary relinquishment. Temporary relinquishment, which en-

tails the possibility of taking the child back from the state's care after a certain period of time (from one month to three years) is encountered extremely rarely at the present time, because a woman who chooses that option, as a rule, has to have a permanent address (residence permit) in the same town where she gave birth to and relinquished the child. For example, there were two women in Moscow who were given the opportunity to "relinquish" their babies for one month in the hope that in that period of time they would obtain permission to reside in Moscow, to rent or buy a new apartment (they were not able to remain in their former residence), because they believed that the situation of moving from one place of residence to another one would not be good for their newborns.

On the other hand, temporary relinquishment is an option that is generally preferred specifically by women for whom the lack of a permanent place of residence that they could take their child to is the basic or the only reason for giving the child up (one respondent in Moscow and one in Samara). As a rule, social workers try not to permit temporary relinquishment in this case, because it is not possible to put such children up for adoption immediately, and because they do not think it is very likely that the mother herself is going to be able to take the child back after a certain period of time after she has solved her problems.

About two-thirds of the cases of relinquishment involve single mothers who are deprived of spousal support (which is to say, they are not in a registered marriage or an unregistered marriage, or in a state of cohabitation, and they are not getting help from their former partners).

Moreover, pregnancy may occur either due to temporary, casual relationships, or from a long-term partner, relations with whom ended during the pregnancy. In cases where the relationship came to an end at the woman's initiative, the father was not made aware of the birth of his child even if he would be very interested in it and might actually take responsibility for the child's upbringing in spite of the mother's unwillingness to take care of the little one.

The other one-third of cases of relinquishment involves the following reasons: the women's husbands or partners are insolvent in economic terms, and/or they suffer from alcoholism or narcot-

ics abuse, they are aggressive, they do not believe that it is their child, they do not want to accept the consequences of their own carelessness and instead believe that the responsibility for contraception is the woman's alone, or the parents of the child are already on the brink of divorce.

In the case of two women, *Raia*, age twenty-two, and *Lera*, age twenty-one, both from Moscow, the relinquishment occurred in a situation of sudden widowhood, as a particular case of termination of spousal support. In both of the cases, psychological factors were also at work, due to the shock from the death of people close to them (in the case of one mother, her first child and her husband were killed in a car accident while she was pregnant). As a result of that shock, the mother feels that taking responsibility for her newborn child is beyond her powers. But the deciding factor in this situation was the lack of support from relatives living in poverty in other cities.

If a mother had mental health problems, they were of enormous importance, as in the case of *Nadezhda*, age forty, from Moscow. The situation of this respondent was worse than all of the other cases in our sample. In the opinion of the psychiatrist in the maternity home, the woman suffered from schizophrenia (he refused to make a definite diagnosis without making the necessary special examination, which could only have been conducted under the conditions of a psychiatric clinic), but she refused to be hospitalized in a psychiatric hospital. *Nadezhda* had an extremely vague understanding of her pregnancy or any idea about the possible father of her child: "I was not certain at all that I had a baby in my belly. At any rate I expected that it was a being with more than one head and two legs." In addition, she had just arrived from Turkmenistan; she was all alone and was living at the airport for several days before she gave birth, because she had been abandoned by all her relatives, who had evicted her from her former apartment and had bought her a one-way ticket to Moscow. She changed her mind several times about giving up the child, but in the end the medical people themselves persuaded her to sign the documents, because in this case the child's well-being would have been subject to considerable risk if left with his mother. None of

her relatives wanted to take her in, and not a single shelter could be found for her in Moscow, whether church-related or supported by the state to help women in crisis.

Still another reason for giving up a child is in the case of congenital pathology. In the case of *Vera*, age thirty-three, her daughter was diagnosed with Down's syndrome. For *Vera* and her husband the situation was a tragedy, but it is very difficult to take care of such a child, and in addition they were influenced by fears that families who have children with congenital pathologies are stigmatized in society: "If we do keep this second little girl now, our first daughter will suffer from it." In this case, only very extensive prenatal diagnosis of the fetus could have led to a different resolution of the situation, but *Vera*, who did not have a permanent residence in Moscow, was not able to have it analyzed free of charge, and the family had enough money only for bare necessities. She was not informed by the doctors about the availability of that possibility.

In some cases, the deciding factors turned out to be specifically personal reasons (two cases in Moscow, one in Nizhnii Novgorod, and two in Samara): the inability to accept the child, the necessity of taking care of it at the particular moment. In other cases, the most important thing from the mother's point of view was that the child was not wanted by its father (five cases in Moscow, three in Samara, and two in Nizhnii Novgorod). The circumstance that a mother had other children who very often had been born into the same unfavorable conditions served to encourage the decision to relinquish the new one if other factors were involved as well (generally, poverty). It is more difficult to give up first children: Interviewer: "Would you have given up this baby boy if you had not already had a daughter who was born a few years before?" Respondent: "*No, not for anything*" (*Nastia*, age twenty, Moscow).

More than half of the situations we examined of relinquishment (eleven cases in Moscow, five in Nizhnii Novgorod, and five in Samara) were complicated by a "problem" childhood (the parents beat their children and/or abused alcohol, they neglected the needs of the children, children were being brought up in a children's home or by grandparents who emphasized that they were forced to take care of their grandchildren). However, the situation was

similar to that of a number of mothers who were not *otkaznitsy* (two in Moscow, one in Samara, and one in Nizhnii Novgorod).

This difference in behavior can be accounted for by differing economic situations at the present time as well as by factors of personality: mothers of this type who are not *otkaznitsy* are characterized by considerable strength of will and by having a definite life plan, "making their own way" in life, one that is necessarily the "opposite" of that of their parents, whereas for the most part the *otkaznitsy* are a bit infantile, they prefer to rely on other people and just "go with the flow."

Incidentally, some non-*otkaznitsy* also completely fit that description, for example *Lida*, age twenty-six, and *Irina*, age thirty-five, in Moscow. In their case the decision to keep their babies is based on the fact that they have support from people around them.

In four cases, two in Moscow and two in Samara, we encountered the problem of giving up a newborn conceived as a result of rape. In such situations, relinquishment seems unavoidable, inasmuch as the mother's rejection of the child has deep psychological causes. In all four cases the women did not have an abortion because their pregnancy had not been detected until it was too late, in part because of their "denial," their unwillingness to acknowledge such an unpleasant reality.

Another very important factor is the age of the mother ("too early": "I think it is way too early to have a child. What a thing, to have a baby at the age of fifteen!" (Lika, age fifteen, Moscow) or "too late": "At my age, after all, I'm a toothless old woman, and it is somehow shameful to have a baby at my age, and besides that I don't have any time to raise it" (*Valentina*, age forty-six, Moscow). Another factor is the state of the mother's health, because having poor health creates the feeling that she is not going to have enough strength to take care of the baby: "They told me that this . . . this baby would not survive, that I would not survive myself. They told me it was not good to give birth, that I ought not to keep it. They told me that I have ailing kidneys and that my hemoglobin is very weak, only 86. I rested and rested. I did not feel like doing anything. They told me, 'Make yourself ready and then go to sleep again.' I was weak, I didn't have any strength at all." Interviewer: "How do you see yourself in five years? Where will you be, what

will you be doing?" Respondent: "I don't know. I won't live that long." (*Larisa*, age twenty-two, Samara).

On the whole, the impression that is created is that the social norm dictates that it is best to have children just between the ages of twenty and thirty, or up to forty at the outside (even though we did encounter three cases of relinquishment at the "borderline" age, at thirty-nine and forty). If they give birth earlier or later than that, the mothers themselves perceive it to be a deviation from "proper" behavior.

To sum it all up we can say that the women in the control group are distinguished from *otkaznitsy* both in terms of their social and economic situation and in terms of their personality and psychological characteristics. Very often they have a stronger will, the ability not to have to be dependent on anyone, the ability to depend only on themselves. In any case in which women do not possess these qualities, their main difference from the *otkaznitsy* is that they have support from people who are close to them (their male partners or their mothers) and do not suffer from an acute lack of housing (having an inadequate income was a factor common to all the women in our sample).

There is no doubt that the adoption of a social and legislative policy that offers real assistance, including psychological assistance, to mothers who would like to keep their babies instead of being left to their own devices, as things stand now, would change the decisions of a substantial portion of the *otkaznitsy* we encountered. At present, society and the state provide minimum support for women: motherhood has become almost completely their own personal concern, a decision that is to be made at their own risk.

The way the situation has taken shape, a woman is forced to look for a job that pays quite well in order to be able to live on the pay. And even if she does find such a job, the policy of employers is such that they make it unbelievably hard, or even impossible, for her to exercise her reproductive rights if she still wants to become a mother. In practical terms, if she does become a mother, she loses her job; it is not always easy to find even a low-paying, nonprestigious job once she has a child, and it is practically impossible to combine working with taking care of her children.

Very often a woman simply has no place she can go with her

child, no place to live. She might be able to find a job (generally on an unofficial basis, from a private entrepreneur), and then she would have the money to rent an apartment. However, neither employers nor landlords are very eager to be involved with a single mother of a nursing infant. Relatives as well, increasingly often, are very cool, perhaps even openly hostile, to the idea of supporting a mother in this situation, not least because they themselves do not have much to live on.

Theoretically a woman in such a situation is supported by a man. In practice, however, there has been a steady increase in the percentage of single mothers, and many other mothers are living with men who are unemployed and/or socially maladapted and who are not able to provide them with the necessary support.

The situation described here is completely different from that in the West. The development of capitalism and personal initiative in Russia could be more civilized, it could go hand in hand with the corresponding development of social policy. In our country at the present time, parenthood is more like a luxury, one that has to be paid for in all the meanings of that word, your own personal concern rather than an obligation common to all, an obligation that you ought to be helped to perform at least in part or at least symbolically, the way things used to be back in the Soviet era.

The increase in the number of relinquishments of newborn babies in the 1990s is one of the consequences of the atomization of Russian society, the kind of rationalization that has affected all relations among people, and that includes relations between a mother and her child. In many cases, the resulting separation of a mother from her child looks to be one that has been “coerced,” one that has been forced from without, based on social problems. In other cases, the separation takes place within the personality of the mother.

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