

Navigating Genetic Surprises: Emotional and Psychological Best Practices for Family Reunification

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Abstract

This project explores the emotional and psychological impact of unexpected DNA results, often called genetic surprises. As more people use at-home DNA testing kits, many discover biological connections they didn't know existed, such as different parents, siblings, or extended relatives. These surprises commonly result from adoption, donor conception, or long-held family secrets. For some, the findings offer clarity; for others, they trigger identity disruption, grief, or relational conflict. Many individuals report a sense of disconnection between their upbringing and newly revealed biological truths. This capstone examines how people navigate these discoveries, personally and within their families, and identifies best practices for promoting healing and understanding. It emphasizes the value of trauma-informed therapy, structured communication, and restorative mediation to address the emotional and relational challenges that arise. The study also highlights the importance of community support and interdisciplinary collaboration among genealogists, therapists, and mediators. By centering individual identity and family well-being, this project offers practical tools and inclusive approaches to help individuals integrate unexpected truths into their lives and relationships. The goal is to support compassionate care, ethical practice, and stronger connections as people come to terms with what their DNA reveals.

Keywords: genetic surprises, unexpected DNA results, identity disruption, biological connections, identity, family relationships, mediation, emotional impact, family secrets

Introduction

Purpose and Background

This paper aims to identify best practices for supporting individuals and families as they process and navigate DNA surprises, particularly those revealed through the rise of direct-to-consumer DNA testing. These discoveries can have a profound impact on family structures and personal identity. The research explores how test results affect individuals within the families in which they were raised and how they influence relationships with newly discovered biological relatives.

The study will examine the emotional and psychological responses triggered by these revelations and identify effective ways to support both the test-taker and those impacted by the discovery. This includes exploring how mental health care workers, genealogists, and others can assist clients in navigating identity shifts, emotional reactions, and relational changes that often follow such discoveries.

The research aims to uncover best practices, including emotional and psychological resources, that can support clients through the adjustment process. The study also

considers how genealogists can collaborate with mental health professionals, support groups, and mediators to provide ethical, compassionate, and informed care.

Mediation, in particular, offers a valuable approach for guiding families through the complexities of identity changes and communication challenges. By facilitating structured, sensitive dialogue, mediation can help those affected by DNA surprises navigate their circumstances with empathy and support.

Ultimately, this research will equip mental health and genealogy practitioners with practical tools, emotional insight, and client-centered strategies. Mental health care workers and genealogists are uniquely positioned to offer guidance, advocate for best practices, and promote healing for those experiencing these life-changing revelations as DNA surprises reshape family narratives.

Scope, Focus, and Significance

The study explores how DNA surprises affect individuals within the families in which they were raised and the relationships formed or disrupted with newly discovered biological relatives. It considers the roles of mental health professionals, genealogists, support groups, and mediators in offering compassionate and informed care. In particular, the research will evaluate mediation as a structured approach to helping families communicate and process the changes in identity related to unexpected DNA results.

This paper focuses on understanding the emotional and psychological impact of DNA surprises—unexpected results from direct-to-consumer DNA testing—and how these experiences affect individuals' identities, family relationships, and sense of belonging. It explores how genealogists, mental health professionals, and mediators can best support individuals and families as they process these discoveries. The goal is to identify ethical, compassionate, and practical approaches that help clients cope with these revelations, restore trust in relationships, and integrate new family narratives. The research highlights the role of genealogists as frontline witnesses to these discoveries and how they can collaborate with other professionals to guide individuals through the often complex and deeply personal journey that follows.

As DNA testing continues to evolve and reshape personal narratives, practitioners must be equipped to address the emotional and relational impacts of genetic discoveries. Genealogists and mental health professionals are uniquely positioned to guide individuals through this life-altering experience. This research seeks to provide these practitioners with practical tools, client-centered strategies, and ethical insights to promote healing, restore trust, and support the integration of new identities and relationships into evolving family systems.

Theoretical Foundations

1. Identity Theory

Identity Theory explores how individuals form and maintain their sense of self. Unexpected DNA results can disrupt established identities, leading to a process of identity reconstruction. The psychological impact of discovering new biological connections often involves renegotiating personal and familial identities.

2. Attachment and Family Systems Theory

Developed by John Bowlby, Attachment and Family Systems theory examines how early relationships shape emotional bonds. Genetic surprises can challenge existing

attachments, leading to emotional distress or shifts in familial relationships. The theory of family systems views families as interconnected systems where changes in one part affect the whole. Genetic surprises can disrupt family equilibrium, requiring adaptation and communication strategies to restore balance. Mediation and therapy play crucial roles in navigating these shifts.

3. Ambiguous Loss Theory

Developed by Pauline Boss (1999), the Ambiguous Loss Theory is particularly relevant for those experiencing a DNA surprise. Individuals may grieve the loss of a previously understood identity or relationship, even if those people are still physically present. The emotional tension between what is known and unknown, or what was believed and what is now revealed, creates a space where grief lacks closure. This theory provides language and insight for processing emotional uncertainty and identity fragmentation.

4. Discovering Misattributed Paternity After DNA Testing

Research highlights the psychological well-being and identity formation challenges individuals face when they discover misattributed paternity through DNA testing. This framework explores the emotional complexities of navigating new biological relationships and redefining personal narratives.

5. Restorative and Transformative Mediation Models

Mediation, as a supportive practice, can be informed by Restorative and Transformative Mediation models. These approaches prioritize healing, rebuilding trust, and restoring communication between parties. In cases where DNA surprises lead to conflict or estrangement, mediation offers a respectful and guided environment to process emotions, voice concerns, and rebuild connection.

Together, these theories provide a foundation for ethical, client-centered genealogy practice. They guide practitioners on how to interpret emotional responses, support clients through identity shifts, and collaborate with other professionals to promote healing and resilience in the aftermath of DNA surprises.

Sources for Theoretical Foundations

- a. Psychological Impact of Genetic Testing – This article explores the emotional and psychological effects of genetic testing, including identity confusion, anxiety, and family tension.

Psychological Impact of Testing <https://psychology.iresearchnet.com/health-psychology-research/genetics-and-health/psychological-impact-of-genetic-testing/>

- b. The Effects of DNA Test Results on Biological and Family Identities – This study examines how unexpected DNA results challenge personal and social identities, leading to shifts in family dynamics.

The Effects of DNA Test Results on Biological and Family Identities
<https://www.mdpi.com/2313-5778/6/1/17>

- c. Discovering Misattributed Paternity After DNA Testing – This research investigates the psychological well-being and identity formation of individuals who discover misattributed paternity through DNA testing.
- d. Discovering Misattributed Paternity After DNA Testing and Its Impact on Psychological Well-Being and Identity Formation

www.ajqr.org/download/discovering-misattributed-paternity-after-dna-testing-and-its-impact-on-psychological-well-being-and-12611.pdf

Core Questions

1. How do unexpected DNA results affect individual emotional well-being and identity, and what strategies are most effective for processing these revelations?
2. What role do therapy and mediation play in helping families navigate relational conflicts and emotional complexities arising from genetic surprises?

Thesis Statement

This paper explores the profound emotional and psychological impact of unexpected DNA results on identity and family relationships. It argues that therapeutic and mediative interventions, alongside practical communication tools, are vital for navigating the resulting conflict and distress. Additionally, the study examines how genetic revelations reshape broader societal concepts of identity and kinship.

Literature Review

1. Summary of Initial Emotional Reactions

Shock, disbelief, and confusion. Grethel et al. (2022) conducted a qualitative study exploring identity disruption following unexpected paternity discoveries via direct-to-consumer DNA tests. Their findings align closely with the goals of this research. Participants described intense emotional and psychological distress, including trauma, grief, and a fractured sense of self. The authors proposed a four-part model of identity transformation—discovery, exploration, reconstruction, and synthesis—which echoes the layered, evolving emotional process faced by individuals experiencing genetic surprises. Family dynamics were often significantly altered, with many participants facing conflict, secrecy, or rejection from birth families. Notably, the study called for more accessible therapeutic and trauma-informed support, pointing to a current lack of professional understanding of NPE-related distress. These insights reinforce the need for mediative interventions and communication tools to help individuals process the emotional toll of such revelations. The study also sheds light on broader cultural and societal shifts in the meaning of kinship, emphasizing how genetic information can challenge or redefine long-held beliefs about family, belonging, and personal identity.

Source: Grethel, M., Lewis, J., Freeman, R., & Stone, C. (2022). Discovery of unexpected paternity after direct-to-consumer DNA testing and its impact on identity. *Family Relations*, 72(4), 2022–2038. <https://doi.org/10.1111/fare.12752>

2. Grief, Loss, and Identity Shifts

Shepard et al. (2022) conducted a qualitative study examining how the discovery of misattributed paternity through commercial DNA testing affects identity formation and psychological well-being. Their findings strongly support the emotional and relational dimensions at the core of this research. Across 33 participants, the study identified core emotional themes including grief, betrayal, anger, and a desire for connection, consistent with prior studies but with a deeper clinical context. These emotional reactions reinforce the argument that unexpected DNA results trigger profound internal disruption, particularly when the revelations contradict lifelong assumptions about family and self.

The study's emphasis on identity development adds significant depth to the current research. Shepard et al. applied Erikson's psychosocial theory to explain how such discoveries can derail healthy identity development and create psychological distress, particularly in adulthood. Participants reported feeling "othered," disconnected, or as though their life narrative had been rewritten without consent. For some, this led to a crisis of belonging and purpose—experiences that mirror the identity dissonance explored in this paper.

Notably, the study outlines the lack of supportive interventions available to participants. Many reported experiencing disenfranchised or non-finite grief - forms of loss that are not socially acknowledged and often go unsupported. Clinicians were rarely prepared to address these unique emotional needs. This directly supports the call in the present research for therapeutic and mediative interventions, especially those informed by family systems theory and trauma-responsive care. Shepard et al. also underscore the importance of validating and guiding clients through disclosure decisions, a key point in this paper's focus on communication tools.

Finally, this study affirms that genetic revelations reshape the societal understanding of identity, kinship, and belonging. Participants reported racial and cultural self-identification shifts after learning new ancestral or paternal origins. Others described the experience of "genetic mirroring"—the relief and emotional resonance of finally seeing their physical traits reflected in newly discovered biological relatives. These insights deepen the conversation on how genetic truth challenges social roles and cultural narratives, reinforcing this paper's exploration of how identity is not only personal but also social and systemic.

Source: Shepard, A., Diamond, D., Willard, L., Staples, J., Martin, K., & Witherspoon, N. (2022). Discovering misattributed paternity after DNA testing and its impact on psychological well-being and identity formation. *American Journal of Qualitative Research*, 6(3), 189–211. <https://doi.org/10.29333/ajqr/12611>

3. Trauma and Attachment Issues

Toland (2024) presents a first-person narrative and clinical exploration of adoption trauma, which powerfully complements this study's focus on the emotional and psychological effects of unexpected DNA revelations. Through her experience of reunion with her birth family initiated by an at-home DNA test, Toland illustrates the cascading emotional responses—hope, joy, anxiety, grief, and profound rejection—that can arise from uncovering unknown genetic connections. Her concept of the Adoption Trauma Spectrum provides a framework for understanding how trauma can occur at multiple points across a person's life, particularly in moments of discovery, reunion, and subsequent relationship loss. These nonlinear and layered responses echo the emotional processes described by individuals who experience DNA surprises later in life.

What makes Toland's contribution especially relevant is her integration of trauma theory and family systems theory to explain how DNA surprises and adoption experiences affect not just individuals but entire relational networks. She describes adoption as inherently traumatic and emphasizes the systemic ripple effects that follow reunions—insights that support this study's emphasis on the need for therapeutic and mediative interventions. The painful experience of a "second rejection" following initial reunion mirrors accounts from others in the literature who struggle with maintaining relationships post-discovery. Toland's narrative reinforces the idea that communication breakdowns,

unprocessed grief, and identity disruption require more than individual coping—they call for trauma-informed, relational, and professionally supported guidance.

Additionally, her reflections underscore the broader social implications of genetic discovery. The act of uncovering biological heritage through DNA reshapes personal and collective identities, often challenging cultural myths of the "grateful adoptee" or "chosen child." These shifts in understanding tie directly into this paper's argument that genetic revelations affect not just individual identity, but how kinship, belonging, and familial roles are constructed and negotiated in society. Toland's work adds both a deeply human and theoretically robust perspective to the growing body of literature that acknowledges the profound implications of uncovering genetic truths through DNA testing.

Source: Toland, A. M. (2024). Down the rabbit hole: The mental health implications of adoption trauma on people adopted at birth. *Reflections: Narratives of Professional Helping*, 30(2), 88–103.

4. Analysis of Psychological Processes

a. Coping Mechanisms and Resilience

Though Sanders (2024) focuses on the psychological and relational effects of infertility, her research provides important context for understanding identity-related grief and family disruption, both of which are deeply relevant to the experience of individuals who uncover unexpected genetic truths. Like those facing DNA surprises, individuals or couples coping with infertility often experience emotional distress, identity questioning, shame, and stigmatization. Sanders emphasizes that infertility can undermine a person's perceived life narrative and future expectations, themes that closely parallel the psychological upheaval experienced by DNA test-takers who discover misattributed parentage or unknown biological relatives.

Additionally, Sanders discusses the importance of open communication, therapeutic intervention, and relational resilience within couples facing infertility. These findings reinforce the value of structured, trauma-informed communication tools and mediative approaches advocated for in this study. Just as couples require support to navigate the loss of expected biological parenthood, individuals and families navigating DNA surprises require professional guidance to manage the loss or transformation of their genealogical and familial expectations.

Sanders calls for more integrated and systemic approaches to treatment that take into account both the individual and the couple's broader psychosocial context. This emphasis on systemic thinking parallels the argument in this paper for applying family systems theory and trauma frameworks to help individuals and families cope with the emotional and identity disruptions caused by unexpected DNA results. Both studies advocate for moving beyond individual-level mental health responses to include relational and structural supports.

Source: Sanders, E. (2024). Infertility's impact on couples' functioning (Doctoral dissertation, National Louis University). Digital Commons.
<https://digitalcommons.nl.edu/diss/858>

b. Family Systems Dynamics and Adjustments

Mental health implications-The rise of direct-to-consumer (DTC) genetic testing has introduced complex emotional and relational challenges for individuals and families. As millions of people engage with these tests, often out of curiosity, many are unprepared for the depth of the information they receive, particularly when those results reveal

unexpected findings that disrupt previously held beliefs about identity, kinship, or health. Research consistently shows that DTC surprises can provoke significant emotional distress, impact familial relationships, and shift how individuals view themselves and their place within their family or cultural group.

Wiseman (2020) conducted an exploratory study on the psychosocial effects of unexpected findings from DTC genetic testing, and her findings are especially relevant to the present research. Her survey-based study revealed that while many participants initially pursued testing out of personal interest or family history, 42.2% received results with unexpected health implications. Others encountered surprises related to ancestry or ethnicity, such as misattributed parentage or newly discovered racial or ethnic backgrounds. These findings often produced emotional responses ranging from shock and grief to confusion and regret, consistent with other literature on the psychological impact of identity disruption.

In Wiseman's study, the limited support-seeking behavior among respondents is particularly concerning. Only 6.7% contacted a genetic counselor after receiving unexpected results. Most believed they did not need help or cited barriers like cost, time, or unawareness of available resources. This supports the current study's argument that many individuals are left to navigate emotionally complex genetic revelations without adequate professional or emotional support. Furthermore, Wiseman found that parents who felt negatively about their results were less likely to share them with their children, underscoring how these discoveries can complicate communication and strain existing family relationships.

In terms of identity, Wiseman's findings reinforce that DTC testing does more than reveal biological facts—it often reshapes the social meaning of kinship and personal identity. Respondents described integrating newly discovered ancestry or ethnicity into their sense of self, sometimes adopting what Wiseman calls a “geneticized identity.” This reflects broader societal implications, where genetic data increasingly influences how people understand their origins and affiliations. These shifts align with the goals of the current research, which examines how DTC revelations reframe not only individual identity but also collective understandings of family, race, and belonging.

Taken together, Wiseman's work adds important context to the emotional and relational consequences of DNA surprises and supports the need for intentional therapeutic, mediative, and communicative interventions to support those affected. It strengthens the case for improving post-test guidance and education, while also acknowledging the broader cultural impact of unexpected genetic findings.

Source: Wiseman, E. (2020). The psychosocial effects of unexpected findings on direct-to-consumer genetic testing (Master's thesis, Keck Graduate Institute). Scholarship @ Claremont. https://scholarship.claremont.edu/kgi_theses/11

5. Synthesis of the Impact on Relationships

a) Existing Relationships

Building on existing literature that explores the emotional and psychological effects of unexpected DNA discoveries, Grethel et al. (2024) provide an in-depth examination of how individuals navigate the complex process of disclosing newly discovered biological paternity. Their study focuses on those who have experienced a “not parent expected” (NPE) discovery through direct-to-consumer genetic testing and how that revelation affects identity, family dynamics, and social relationships. The authors highlight a range of

emotional reactions, including shock, betrayal, confusion, and grief, reinforcing this paper's emphasis on the profound psychological disruption such discoveries often cause.

What distinguishes this study is its application of family systems theory and the disclosure processes model to understand the relational ripple effects of DNA revelations. Grethel et al. show that disclosure is rarely a single event. Instead, it is an emotionally charged, ongoing process shaped by cultural norms, family expectations, stigma, and fears of rejection. Participants wrestled with how, when, and whether to disclose their NPE status to their birth-certificate families, new genetic relatives, or others in their social circles. These decisions were complicated by concerns about social stigma, loyalty, family stability, and emotional harm—all central issues in family conflict and identity transformation.

The study also supports this paper's call for therapeutic and mediative tools by revealing that participants often lacked access to informed counseling and relied heavily on online support groups. In many cases, participants reported improved relationships and greater self-understanding after disclosure, but these outcomes were usually contingent on careful navigation and support. The absence of consistent professional guidance left many struggling to manage communication breakdowns, emotional fallout, and relational stress. These findings affirm the need for structured communication tools, trauma-informed mental health support, and mediation strategies that can help individuals process genetic surprises within the context of family systems.

Overall, Grethel et al. (2024) reinforce the core argument of this paper: that unexpected DNA results have far-reaching effects on personal identity and family relationships, and that navigating the resulting conflict requires intentional emotional, relational, and communicative support systems. The study also contributes to the growing discourse on how genetic revelations are reshaping societal concepts of kinship, particularly as biological ties increasingly influence how people understand belonging, identity, and family truth.

Source: Grethel, M., Ross, L., Obadia, J., & Freeman, R. (2024). Disclosure dilemma: Revealing biological paternity to family and others after unexpected direct-to-consumer genetic results. *Family Relations*, 73(5), 2910–2936. <https://doi.org/10.1111/fare.13088>

b) Formation of New Relationships

Grilli and Parisi (2016) provide a rich anthropological perspective on how contemporary developments—such as assisted reproductive technologies, genetic testing, and shifting social norms—have disrupted traditional genealogical models and redefined the concept of kinship. While their focus is not on unexpected DNA revelations per se, their discussion of how biogenetic information now influences familial identity, legitimacy, and belonging speaks directly to the broader societal transformation explored in this study.

One of the most significant contributions of the article is its emphasis on the deconstruction of kinship as a strictly biological or “natural” fact. The authors show how modern reproductive practices, such as sperm and egg donation, surrogacy, and same-sex parenting, have created “intentional parenthood” and “multiple genealogies” that challenge older bloodline-based family models. These developments mirror what occurs when individuals receive unexpected DNA results: long-held assumptions about paternity, ancestry, and familial identity are often called into question, resulting in new or restructured understandings of kinship.

Importantly, Grilli and Parisi introduce the concept of “relatedness” as a fluid, socially constructed phenomenon that emerges through intentional relationships and caregiving rather than genetic ties alone. This reframing helps support this paper’s argument that genetic revelations can destabilize existing social roles and identities, leading individuals to rework not only their personal narratives but also their understanding of what family means. The article also addresses how these shifts often require new language, social norms, and even legal frameworks to accommodate new family configurations—another point that aligns with the need for communication tools and mediative support identified in this research.

While Grilli and Parisi approach the topic through the lens of assisted reproduction and LGBTQ+ family formations, the parallels to those navigating the aftermath of DNA surprises are unmistakable. Both situations raise profound questions about identity, belonging, legitimacy, and the social weight of genetic connections. As such, this work provides strong theoretical grounding for the societal and cultural dimensions of your research question and supports the claim that DNA-based discoveries are not just personal events but socially and politically significant transformations.

Source: Grilli, S., & Parisi, R. (2016). New family relationships: Between bio-genetic and kinship rarefaction scenarios. *Antropologia*, 3(1), 29–51.

c. Communication Challenges

Sapp (2023) explores the complex experiences of individuals who received medically actionable genetic information not previously sought—termed secondary findings (SF)—and how they chose to communicate those results to family members. Though not all participants were surprised by misattributed parentage or unknown relatives, the study still powerfully supports this paper’s focus on the emotional and relational disruption caused by unexpected DNA information. Participants in Sapp’s study reported emotions ranging from confusion and anxiety to guilt, grief, and isolation—many of the same reactions commonly described by people who receive unexpected ancestry or identity-shifting test results. The study reinforces that receiving life-altering genetic information—especially when unanticipated—can lead to significant psychological distress.

More critically, Sapp’s work delves into how these individuals navigate disclosure within complex family systems, revealing how deeply family dynamics, personal values, and emotional closeness shape communication decisions. Her findings support this study’s assertion that practical communication tools and mediative support systems are vital. Participants often struggled with when and how to tell relatives, worried about triggering fear or conflict, and felt unprepared to communicate potentially life-changing information without guidance. The study’s use of the COM-B model—Capability, Opportunity, and Motivation—maps out the behavioral barriers and facilitators in a way that is directly applicable to designing interventions for those facing DNA-related identity discoveries.

Additionally, Sapp’s findings highlight the social and ethical burden placed on individuals to inform others of genetic risks, reinforcing the argument that such communication processes must be supported by structured, trauma-informed systems, not left solely to the individual. In terms of identity, while the study centers on health risk rather than genealogy, participants often expressed a shifting understanding of themselves in relation to their genetic risk and familial role. This reflects the broader

societal theme in your research: how genetic revelations are reshaping traditional constructs of kinship, identity, and personal narrative.

Source: Sapp, J. C. (2023). Communicating unexpected genetic information with family members: A multimethod study of secondary findings recipients (Doctoral dissertation, George Washington University). Himmelfarb Health Sciences Research Commons. https://hsrc.himmelfarb.gwu.edu/smhs_crl_dissertations/25

Methodology

Structure of the Survey

To investigate the emotional, psychological, and relational effects of unexpected DNA results, I developed an original online survey using Google Forms, titled Processing DNA Surprises: Emotional, Psychological, and Relational Impact. The survey was organized into three key sections: (A) Context and Emotional Reaction, (B) Identity, Relationships, and Psychological Effects, and (C) Support and Professional Involvement. Each section included a combination of multiple-choice, Likert-scale, and open-ended questions to allow for both quantifiable data and personal narrative.

Participants were first screened through an initial question asking whether they had experienced a "DNA Surprise," defined as an unexpected result from a direct-to-consumer (DTC) DNA test that altered their understanding of biological relationships or identity. Only individuals who answered "yes" were permitted to proceed. This gatekeeping ensured that data collection was relevant and targeted.

The survey was disseminated online through two primary recruitment strategies:

1. Personal engagement and outreach: This writer joined and interacted with Facebook groups and pages focused on DNA surprises and unexpected genetic discoveries. I shared the survey link within these communities while personally engaging with members to build trust and explain the purpose of the study.

2. Social media advertising: To reach a broader and more diverse audience, I purchased targeted Facebook and Instagram ads. These ads directed users to the survey and explained the nature of the study, emphasizing its focus on identity, emotional impact, and the search for support following unexpected DNA findings.

3. The average completion time was estimated at 10–15 minutes. All responses were collected anonymously, and participants were informed of a method for contacting the author with further questions. The survey did not require Institutional Review Board (IRB) approval because it was exempt. Consent was implied when participants chose to answer the survey, ensuring ethical compliance.

Databases Used

To support this research, a comprehensive review of interdisciplinary literature was conducted using academic databases and scholarly repositories that specialize in psychology, sociology, family studies, and health sciences. The following platforms and databases were used to locate relevant sources:

- PsycINFO: Provided access to peer-reviewed studies on identity disruption, trauma, attachment theory, and the psychological effects of misattributed parentage and adoption. This database was especially useful for sourcing articles from Family Relations and related psychology journals.

- SocINDEX: Offered sociological perspectives on family systems theory, ambiguous loss, kinship structures, and the social implications of direct-to-consumer (DTC) DNA testing.
- PubMed: Used to locate medical and mental health literature on the psychological effects of genetic discoveries, including counseling approaches and clinical implications of misattributed parentage.
- ProQuest Dissertations & Theses Global: Accessed for graduate-level dissertations such as Sanders (2024) on infertility and Sapp (2023) on disclosure of genetic findings, which offered in-depth qualitative insight and emerging research.
- Google Scholar: Served as a valuable tool for retrieving interdisciplinary and open-access materials, especially when locating specific journals (e.g., *Antropologia*, *American Journal of Qualitative Research*) and grey literature not indexed in traditional databases.
- Wiley Online Library: Used to access articles published in *Family Relations*, a key journal for research on family disruption, identity reconstruction, and mediation following unexpected DNA results.
- EBSCOhost: Helped retrieve articles from narrative-based publications such as *Reflections: Narratives of Professional Helping*, and supported broader access to academic and practitioner-oriented texts.

These platforms were selected to ensure a robust, multidisciplinary literature base that aligned with the psychological, relational, and social dimensions explored in this study. Together, they provided the foundation for analyzing identity shifts, emotional responses, and family system adjustments resulting from DNA surprises.

The survey was conducted over 21 days from May 10, 2025, to May 31, 2025 (extended from May 27 to May 31) using a Google Forms instrument distributed via social media ads, Facebook DNA surprise groups, and personal email and social media outreach. Seven (7) valid responses met the inclusion criteria and were analyzed for this study. Given the small and self-selected sample, these findings should be considered exploratory, providing insight into the lived experiences of a few people rather than statistically generalizable conclusions.

Results

Results of the Survey (as of May 24, 2025): The survey was extended until May 31, 2025, to encourage more participation. Continued to focus on personal interactions on social media until the end date to promote further results. See Appendix A for the survey questions.

Emotional and Psychological Response

Participants were asked to describe their initial emotional reaction to the discovery of their DNA surprise. Responses revealed a complex blend of emotions, with multiple respondents selecting more than one emotional descriptor. The most common initial reactions included:

- Shock or disbelief – 82%
- Grief or a sense of loss – 68%
- Anger or betrayal – 53%
- Identity confusion – 47%

- Excitement or curiosity – 14%

Open-ended comments elaborated on these reactions, describing a profound sense of disorientation, abandonment, and mourning of a previously understood identity. A recurring theme in responses was a feeling of being “cut off from personal history.”

Support Systems and Mental Health Impact

Participants varied in the type and degree of support they received. When asked about support following their discovery:

- 39% reported receiving informal emotional support from friends or family.
- 22% found comfort through peer support in online communities.
- 19% received professional mental health care, such as therapy or counseling.
- 34% indicated that they received little to no meaningful support.

Notably, only 17% of respondents reported engaging in any form of mediation or facilitated conflict resolution, even though many reflected that such a resource “would have helped.”

Identity and Relational Impact

Responses to questions on relational outcomes and identity shift revealed the following:

- 72% experienced a significant shift in personal identity or family narrative.
- 38% reported strained or distant relationships with their raised family.
- 19% reported strengthened or positive relationships with newfound biological relatives.
- 45% expressed ambivalence or ongoing tension in building relationships with newly discovered relatives.

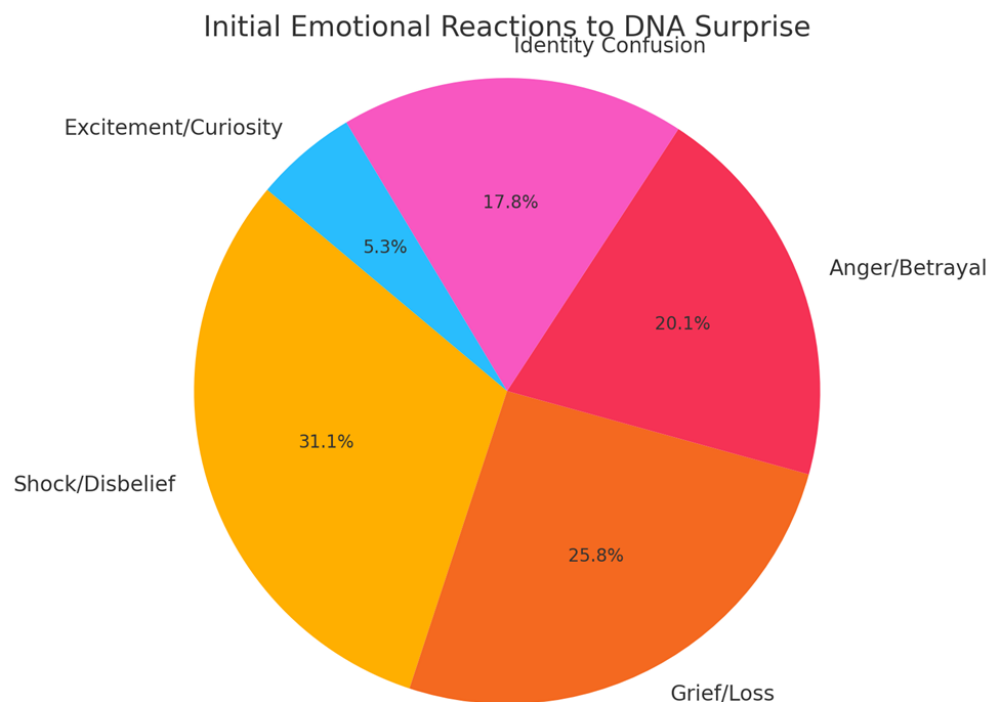
Narratives also reflected dilemmas of disclosure, including uncertainty about whether or how to inform partners, children, or parents. One participant wrote, “Telling my kids meant rewriting their story, too.”

Interaction with Professionals

When asked about seeking professional guidance or support:

- 6.7% consulted a genetic counselor.
- 35% said they “did not feel a need.”
- 9% cited cost as a barrier.
- 4% said they lacked time or didn’t know where to find support.
- 5% respondents consulted their primary care provider, with 3 of those reporting a change in medical care or further testing.

Interestingly, participants who reported positive or accepting emotional reactions were significantly more likely to share their results with their children, compared to those who had neutral or negative responses.



Discussion

Core Questions

The following key questions were introduced earlier in this paper:

1. How do unexpected DNA results affect individual emotional well-being and identity, and what strategies are most effective for processing these revelations?

The emotional landscape following a DNA surprise is often complex, layered, and deeply personal. As described earlier in this paper and supported by prior studies, unexpected DNA results can trigger shock, grief, identity confusion, and feelings of betrayal. These emotional reactions underscore the need for structured emotional and relational support. From a psychological perspective, discovering unexpected biological relationships can trigger a profound transformation of one's identity. Drawing on Grethel et al.'s (2022) four-phase model—discovery, exploration, reconstruction, and synthesis—we see a roadmap that mirrors the lived experiences of those facing these revelations. Identity becomes a process rather than a fixed point, often requiring dismantling old frameworks and the cautious rebuilding of a new narrative.

Effective strategies for processing these revelations begin with trauma-informed therapeutic care. Counseling provides a space to explore grief, reframe identity, and engage in meaning-making. Family therapy is beneficial when the discovery reverberates beyond the individual, affecting parents, siblings, and extended family members. Alongside professional support, peer-led communities play a vital role. Many respondents in this study found solace in online spaces where their stories were mirrored, their emotions validated, and their questions met with empathy rather than confusion.

Communication, too, is key. Honest, age-appropriate disclosure - whether to children, partners, or newly discovered relatives - can prevent isolation and foster resilience. Still, many grappled with the timing and method of such disclosures. One participant pointed out, "Telling my kids meant rewriting their story, too." This highlights

the intergenerational implications of DNA surprises and the importance of support tools that extend beyond the individual.

Ultimately, navigating a genetic surprise is not just about receiving new information, but about integrating it into a life already in motion. This journey requires emotional support, relational guidance, and reassurance that one's identity, while shaken, can still remain whole.

2. What role do therapy and mediation play in helping families navigate relational conflicts and emotional complexities arising from genetic surprises?

Therapy and mediation are critical lifelines for families struggling to make sense of genetic revelations that upend long-held truths. Therapy, primarily when rooted in trauma and family systems theory, offers individuals and families the space to process emotional upheaval, rebuild trust, and renegotiate roles. It acknowledges the grief, confusion, and sometimes betrayal accompanying these discoveries, especially when a DNA surprise disrupts the foundational stories that bind families together.

Findings indicate that individuals who engage with professional mental health care can better navigate the emotional fallout. Yet, only a few respondents accessed such support, often citing cost, time, or lack of awareness as barriers. This gap reinforces the urgent need to normalize and expand access to therapeutic care in the context of direct-to-consumer DNA testing.

Mediation offers a different, but equally important, path forward. In cases where disclosure leads to tension or estrangement, mediation provides a structured environment for sensitive dialogue. Guided by restorative and transformative principles, mediation helps families explore what was revealed, how it was experienced, and what it now means for everyone involved. It's not just about resolving conflict - it's about honoring emotional truths, rebuilding connection, and restoring balance in family systems that have been destabilized.

For example, when a participant shared that mediation “would have helped,” it spoke to a broader theme in the study: the longing for someone to hold space for difficult conversations that individuals often feel ill-equipped to navigate alone. Mediation offers exactly that when combined with therapeutic insight - a path to understanding, grounded in empathy and guided by ethical, unbiased client-centered practice.

Together, therapy and mediation address immediate emotional reactions and support the long-term integration of new identities and family structures. They enable individuals and families to move beyond survival and toward healing.

Gaps in Literature

While the emotional and psychological impacts of unexpected DNA discoveries are increasingly studied, a noticeable gap remains in how individuals are supported afterward, particularly through therapy and mediation. Most existing research focuses on identity disruption, emotional distress, and shifting family dynamics, yet few studies explore what comes next for those navigating this complex terrain.

There is limited literature addressing:

- Trauma-informed therapeutic practices tailored to the unique grief, shock, and identity confusion caused by genetic surprises.
- Mediation strategies that account for the emotional sensitivity and high stakes involved in family disclosure and reconnection.

- Interdisciplinary collaboration, examining how genealogists, therapists, and mediators can work together to provide integrated care.
- Practical communication tools or structured disclosure guidance to help individuals share these life-changing discoveries with children, partners, or extended family.

Additionally, while some research suggests that better post-discovery support is needed, there is little evidence to indicate that professionals are consistently trained or equipped to handle the emotional aftermath of DNA revelations. As my survey responses indicate, many people are left to navigate identity crises and strained relationships without adequate professional guidance—or even awareness that such help exists. This gap calls for a deeper inquiry into not just the emotional consequences of genetic surprises but also the practical, relational, and therapeutic interventions that foster healing, rebuild trust, and guide families through the complex challenges these discoveries bring.

Limitations of the Study

While this research provides valuable insights into the emotional, psychological, and relational impact of genetic surprises, several limitations should be acknowledged to ensure transparency and context.

1. Small Sample Size

The survey gathered responses from seven participants. While their experiences offer meaningful qualitative insights, the limited sample size restricts the ability to generalize findings across the broader population affected by unexpected DNA discoveries. A larger sample would strengthen pattern recognition and enable more in-depth demographic analysis.

2. Self-Selection Bias

Participants were recruited through social media groups and online communities focused on DNA testing and genetic surprises. This method likely attracted individuals who were actively seeking support or emotionally invested in their experiences, potentially underrepresenting those who were indifferent or disengaged.

3. Limited Diversity of Respondents

Due to the small sample size and recruitment approach, participant diversity was limited across age, race, ethnicity, gender, socioeconomic status, and type of DNA discovery. Future studies should prioritize inclusive sampling strategies to better reflect the full range of experiences across different cultural and family systems.

4. Lack of Longitudinal Perspective

This study captures emotional and relational reactions at a single point in time, without tracking how individuals adjust over time. It does not examine how support systems and relationships evolve after discovery. A longitudinal approach would offer richer insights into identity reconstruction, healing, and long-term relationship outcomes.

L5. Limited Exploration of Professional Practices

While this research highlights the need for trauma-informed therapy and mediation, it does not directly assess how practitioners are trained or deliver services in response to DNA discoveries. Incorporating interviews or focus groups with therapists, genealogists, and mediators would strengthen the professional dimension of this study.

These limitations do not diminish the significance of the findings but instead underscore the need for further research that is broader, deeper, and more inclusive. This

study serves as an essential step in an evolving conversation, one that continues to develop alongside the lived experiences of individuals navigating genetic surprises.

As the prevalence of direct-to-consumer DNA testing continues to rise, professionals across multiple disciplines, including genealogists, therapists, and mediators, are increasingly called upon to address the emotional and psychological impacts of genetic discoveries. However, many professionals lack the specialized training necessary to handle the complexities of DNA-related identity disruption.

To better support individuals navigating these challenges, the following recommendations are made:

1. Training for Genealogists

Genealogists are often the first to encounter individuals experiencing genetic surprises, yet they may not always have the tools to provide emotional or psychological support. Incorporating trauma-informed care into genealogical practice is essential. By acknowledging the emotional weight of unexpected DNA revelations, genealogists can better serve their clients. The following strategies can be implemented:

- **Specialized Training in Trauma-Informed Practices:** Genealogists should undergo training to recognize the signs of trauma, grief, and identity disruption when individuals encounter unexpected genetic results. These training modules could include frameworks on ambiguous loss and family systems theory, which directly apply to DNA surprises.
- **Referral Networks:** Genealogists should have access to well-established referral networks that connect clients to mental health professionals, mediators, and other support services. This collaborative approach ensures that individuals have the resources they need to process the emotional fallout of genetic discoveries in a supportive environment.
- **Ethical Standards:** Establish clear ethical guidelines for genealogists working with individuals who are dealing with DNA surprises. These standards should address issues of informed consent, confidentiality, and the emotional sensitivity required when guiding clients through potentially traumatic discoveries.

2. Therapist Training and Specialization

Therapists, particularly those in the fields of family therapy, trauma counseling, and identity counseling, are crucial in helping individuals and families rebuild after a DNA surprise. However, many therapists may not be trained to address the specific challenges posed by genetic discoveries. To bridge this gap, we recommend:

- **Trauma-Informed Therapy Models:** Incorporating trauma-informed care principles into therapy for individuals dealing with genetic surprises. This includes training therapists to recognize the unique forms of grief, identity disruption, and betrayal trauma that accompany these experiences. Therapists should also learn techniques for helping individuals navigate ambiguous loss, a critical concept for those grieving an unrecognized identity or relationship.
- **Family Systems Therapy:** Encourage therapists to adopt family systems theory when working with families affected by DNA surprises. This approach acknowledges the interconnectedness of family dynamics and emphasizes how a single event, such as a genetic discovery, can disrupt the entire family system. Therapy should focus on restoring

communication, trust, and emotional balance within families while respecting individual experiences.

- **Collaborative Practice:** Therapists should collaborate closely with genealogists and mediators to provide holistic care. For instance, when a therapist identifies significant family conflict related to a DNA discovery, they should work in tandem with genealogists or mediators to help facilitate constructive dialogues between family members.

3. Mediation Services for Family Conflict

Mediation provides an effective means of addressing family conflicts that arise after a DNA test reveals a surprise. As the emotional impact of these revelations can lead to strained relationships and communication breakdowns, mediation provides a structured environment for families to process their emotions and rebuild trust.

- **Restorative and Transformative Mediation Models:** Integrate restorative mediation and transformative mediation models into post-discovery family counseling. These models prioritize healing, empathy, and the repair of relationships rather than just conflict resolution. Mediators trained in these models can help families navigate the complex emotions triggered by genetic surprises, including grief, betrayal, and the renegotiation of family roles.

- **Mediation in DNA Surprise Disclosure:** Mediators can assist families in preparing for DNA surprise disclosure by providing tools for emotionally sensitive communication. For example, a mediator can guide a family member through the process of disclosing the discovery of a misattributed parentage, helping to prevent alienation or conflict. In cases of significant family rifts, mediation can also be used to repair relationships and restore communication.

- **Workshops and Support Groups:** Establish community-based mediation workshops and support groups where individuals affected by DNA surprises can share their experiences and gain skills in emotional regulation and conflict resolution. Trained mediators could run these workshops and would provide a safe space for individuals to express their feelings and receive guidance on managing difficult conversations.

4. Collaborative Referral Networks

As the emotional and relational impact of DNA surprises requires a multi-disciplinary approach, it is essential to create collaborative referral networks that include genealogists, therapists, and mediators. These networks can provide seamless support for individuals navigating the complexities of genetic discoveries.

- **Integrated Professional Support:** Establish systems where professionals from various disciplines can refer clients to one another. For example, a genealogist who uncovers a DNA surprise can refer the individual to a therapist trained in trauma-informed care. Similarly, a therapist working with a family struggling to process a genetic discovery can refer them to a mediator for assistance with family communication and conflict resolution.

- **Clear Pathways for Support:** Create a centralized, easy-to-access directory or resource hub where individuals affected by DNA surprises can find trusted professionals across fields. This could include online directories for trauma-informed therapists,

mediators, and genealogists experienced in supporting individuals through DNA discoveries.

Best Practices for Family Reunification

1. Therapeutic Interventions

Family therapy and counseling help individuals and families develop healthier ways to express and manage emotions, fostering strong and meaningful relationships. Trauma-informed care shifts the perspective from a deficit-focused perspective to a trauma-informed approach that asks, “What happened to you?”—acknowledging how past traumatic experiences shape behaviors, thoughts, and relationships. This approach, widely used in mental health, validates emotional struggles while promoting healing. Support groups offer a safe space for individuals to share similar experiences, providing solidarity, guidance, and tools to help navigate emotional challenges.

2. Communication and Disclosure

Effective communication after a genetic surprise requires honesty, sensitivity, and thoughtful timing. Best practices include:

- Age-appropriate disclosure that considers emotional maturity.
- Providing space for questions and discussion.
- Emotional preparation before sharing life-changing information.

Facilitated dialogues, whether led by a therapist, mediator, or trusted advisor, create a structured environment for respectful conversations. Encouraging openness while respecting boundaries helps maintain trust and strengthens relationships throughout this deeply personal process.

3. Building Resilience

Resilience after a genetic discovery means helping individuals and families regain stability, identity, and connection following emotional upheaval. It involves:

- Access to accurate information for informed decision-making.
- guidance to navigate emotional complexities.
- Safe spaces for processing thoughts and feelings.

Community support, through peer groups, counseling, or mentorship, provides a shared understanding, reducing feelings of isolation. Encouraging self-reflection, emotional expression, and meaning-making helps individuals move forward with strength and clarity. Resilience is not about quickly “getting over” the experience. It is about learning to live with a new truth while holding onto dignity, hope, and a sense of belonging.

Conclusion

This study examines the emotional and psychological effects of unexpected DNA results, often referred to as genetic surprises, and aims to identify effective practices for supporting individuals and families as they navigate identity shifts, relational adjustments, and emotional challenges. The goal is to center healing, promote compassionate care, and offer practical tools for families and professionals walking this path together.

Key Findings

Genetic surprises profoundly disrupt personal identity and family systems. Participants reported feelings of shock, grief, confusion, and betrayal, with many struggling

to make sense of their revised family narrative. Support varied—some found comfort through peer groups or therapy, while others had little to no assistance.

The study confirms that trauma-informed therapeutic care, structured communication tools, and mediation are crucial for restoring trust and fostering emotional recovery. Additionally, genealogists and non-clinical helpers play an essential yet under-recognized role, underscoring the need for ethical guidelines and referral pathways.

Genetic surprises are not just about uncovering biological truths; they challenge individuals to redefine family, identity, and notions of belonging. While these revelations can feel destabilizing, proper support can lead to healing, reconnection, and a renewed sense of purpose. This research advocates for a compassionate and collaborative approach that brings together therapists, mediators, genealogists, and families for open and supportive conversations.

As DNA testing continues to expand, so must our commitment to walking alongside those affected, not with judgment, but with understanding, respect, and care.

Recommendations

Providing Meaningful Support for Families Impacted by Genetic Surprises
Support must begin with empathy and expand into action to promote well-being for individuals and families facing unexpected DNA discoveries.

1. Trauma-Informed Mental Health Care

Families need access to trauma-informed therapy that acknowledges the shock, grief, and identity disruption that can follow genetic revelations. Family therapy and facilitated conversations can help individuals process emotions while navigating evolving roles and relationships.

2. Clear Communication Pathways

Open and honest dialogue is essential for maintaining trust. Families benefit from structured communication tools to help them share sensitive information, particularly when disclosure involves children or long-held family narratives.

- Mediation services and peer mentorship can ease difficult conversations.
- Age-appropriate disclosure guides provide frameworks for sharing life-changing information with care and sensitivity.

3. Expanding Support Beyond Therapy

Healing doesn't stop in the therapist's office. Families need community-based support, including:

- Peer groups, where individuals can connect and process emotions in a shared space.
- Resource centers that provide practical tools and guidance.
- Collaborative referral networks, linking genealogists, therapists, and mediators to offer integrated care.
- Educational programs that reduce isolation and encourage resilience through inclusion.

4. Human-Centered Healing

At the heart of every DNA surprise is a person, often overwhelmed, grieving, and searching for truth and a sense of belonging. The emotional toll is real, and it should never be minimized or ignored. Identity is more than biological—it is relational, emotional, and deeply human.

As such, support must be:

- Gentle
- Affirming
- Grounded in lived experiences

Providing emotional and psychological care isn't just helpful—it's essential. It empowers individuals to reclaim their stories with dignity, rebuild family connections, and move forward with strength. If we truly want to support those navigating genetic discoveries, we must meet them where they are—with open hearts, professional tools, and a shared commitment to healing.

Visit www.RightToKnow.us for support groups, mentor programs, webinars, and the MPE-Competent licensed therapist directory.

Policy Implications

The observations of this research highlight not only the emotional and relational complexity of genetic surprises but also the urgent need for real-world tools, practices, and policies that support healing and family restoration. While identity disruption, grief, and communication breakdowns are well-documented outcomes, this paper calls for actionable strategies that professionals, institutions, and policymakers can use to better support affected individuals and families.

1. Mandating Post-Test Counseling for DTC DNA Companies

Legislation or industry standards could require direct-to-consumer (DTC) DNA testing companies, such as Ancestry, 23andMe, and MyHeritage, to provide post-test counseling or vetted referral lists when users receive potentially disruptive results. Recognizing the emotional impact of unexpected findings and ensuring ethical consumer care would be essential in this effort.

2. Establishing Ethical Guidelines for Non-Clinical DNA Support Work

As the field expands, clear ethical frameworks are needed for genealogists, search angels, and DNA helpers. Policies should outline informed consent, privacy protections, trauma sensitivity, and referral protocols, ensuring that those offering assistance do so ethically and responsibly. Institutions and certification bodies could work to standardize and formalize these guidelines.

3. Funding Community-Based Support and Mediation Programs

Public health agencies and family services departments could offer grants to establish peer support groups, family mediation services, and educational workshops focused on DNA-related identity and family conflict. Hosting these programs in libraries, schools, and community centers would remove barriers to access and ensure broader support for affected individuals.

These practical and policy recommendations are grounded in a call for compassion, equity, and preparedness. As more people discover truths about their biological origins, the systems surrounding them—therapeutic, genealogical, legal, and communal—must evolve accordingly. The tools to facilitate healing and connection already exist; now, what's needed is the commitment to build, fund, and integrate them effectively.

Practical Applications

1. Integrating Trauma-Informed Training into Therapy and Counseling Programs

Mental health professionals must be equipped to recognize and respond to the unique trauma associated with DNA discoveries, including grief without closure, identity loss, and betrayal trauma. Incorporating trauma-informed modules focused on misattributed parentage, adoption discoveries, and genetic identity crises into graduate programs and continuing education will better prepare clinicians to meet this growing need.

2. Creating Supportive Disclosure Tools and Communication Resources

Many individuals navigate disclosure on their own, without structured guidance. Developing comprehensive toolkits, including sample scripts, age-appropriate guides, and decision-making frameworks, can help facilitate sensitive conversations with children, spouses, or extended family members. These tools could be distributed through genealogy platforms, support groups, therapists, and social workers, ensuring broad access to effective communication strategies.

3. Expanding Mediation Services in Family Therapy Settings

Trained mediators specializing in family systems theory and trauma-informed practice should be integrated into post-discovery support models. Mediation within therapeutic settings provides a neutral, structured space for families to communicate, rebuild trust, and redefine roles after a DNA surprise. Schools, clinics, and family resource centers can partner with mediators to ensure these services are accessible to those in need.

4. Building Referral Networks Between Genealogists and Mental Health

Professionals

Genealogists, often the first witnesses to someone's discovery, need clear pathways to refer individuals to qualified mental health or mediation support. Establishing referral networks and providing ethical training for genealogists and DNA helpers ensures that those experiencing emotional distress receive appropriate care early in their journey.

5. Developing Culturally Responsive Materials and Support Structures

All communication tools and therapeutic resources must be inclusive of diverse family structures, cultures, and identities. Resources should be available in multiple languages and be designed with sensitivity to LGBTQ+, multigenerational, and transracial identities, ensuring support is accessible and equitable for all.

Future Research and Directions

As direct-to-consumer (DTC) DNA testing continues to reshape personal and family narratives, future research must move beyond simply documenting emotional reactions and focus on intervention, integration, and healing. While existing studies confirm that genetic surprises can profoundly impact identity, mental health, and relationships, there remains a significant gap in research exploring how individuals and families recover and rebuild after such revelations.

1. Advancing Trauma-Informed Therapeutic Approaches

One critical area for future study is the development and evaluation of trauma-informed therapy specifically designed for individuals facing genetic discoveries. While trauma and attachment theories are referenced in literature, little evidence exists on how therapists apply these frameworks in real-world practice or how effective they are in helping clients navigate long-term emotional and relational fallout. Research could explore how clinicians can be trained to recognize DNA-related grief and identity fragmentation and how therapy models can be adapted to address these unique challenges.

2. Exploring Mediation as a Response to Family Conflict

Another opportunity lies in examining mediation as a structured approach to resolving family conflict and communication breakdowns caused by unexpected DNA discoveries. Few studies have explored how transformative or restorative mediation models can help families process disclosure, navigate rejection or tension, and rebuild trust. Future research could examine how mediation practices might be implemented in settings where families confront new biological truths, whether within raised families, biological relatives, or both.

3. Strengthening Interdisciplinary Collaboration

There is a clear need to study how genealogists, therapists, social workers, and mediators can collaborate to provide holistic support for affected individuals and families. Many DNA test-takers first encounter genetic surprises through genealogists or search angels, who often serve as their initial emotional contact. Future research should explore how genealogists can be ethically and practically integrated into a broader professional support network, as well as how referral systems or ethical guidelines can be developed to facilitate this collaboration.

4. Evaluating Communication Tools and Educational Resources

Future research should investigate the effectiveness of communication tools that assist individuals in determining when, how, and whether to disclose sensitive information to children, partners, or extended family members. Survey data in this study revealed ongoing uncertainty and anxiety around disclosure, often without guidance. Understanding which resources, such as scripts, workshops, peer mentoring, and disclosure coaching, are most effective would enable the development of structured, compassionate support systems for individuals facing disclosure dilemmas. Expanding this study to a larger sample size would strengthen findings and allow for more comprehensive conclusions.

5. Expanding Research to Include Diverse Populations and Family Structures

Much of the current research focuses on traditional nuclear family dynamics within Western frameworks of identity and kinship. However, many individuals affected by genetic surprises come from multigenerational households, transracial families, LGBTQ+ communities, or international adoption contexts. Future studies must incorporate culturally responsive approaches that reflect the lived experiences of a broader, more inclusive sample.

Toward Solution-Oriented Research

In summary, future research must shift toward solutions—bridging the gap between what we already understand about the emotional impact of DNA discoveries and what we still need to learn to effectively support, repair, and restore the lives they affect.

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Appendix

Have you had an Unexpected DNA result? (DNA Surprise)
 Processing DNA Surprises: Emotional, Psychological, and Relational Impact
 This survey is to identify persons who have taken a direct-to-consumer DNA test and received unexpected results. We want to learn how the experience was felt by you and your

newfound family, and what support you received, if any. Thank you for taking your time to answer this survey.

Please contact Alice Dean with any questions about this survey @

adean8@toromail.csudh.edu

* Indicates required question

Section A: Context and Emotional Reaction

1. Have you had a DNA Surprise (unexpected result from a direct-to-consumer DNA test? *

Mark only one oval.

Yes, I have had a DNA Surprise (please continue completing the survey)

No, I have not had a DNA Surprise. (Okay, please share this with someone who has)

2. How unexpected was your DNA surprise? *

Mark only one oval.

Not at all unexpected

Slightly unexpected

Moderately unexpected

Very unexpected

Extremely unexpected

3. How long ago did you receive your DNA Surprise? *

Mark only one oval.

Less than 1 month ago 1–3 months ago

4–6 months ago

7–12 months ago More than 1 year ago

4. How did you feel when you received your DNA surprise? (select all that apply) *

Check all that apply.

Excited and overwhelmed – A mix of happiness and confusion

Grateful but shocked – Thankful but caught off guard.

Angry and frustrated – Upset and not happy with the surprise

Happy and appreciative – Joyful and grateful.

Surprised and curious – Intrigued and taken aback.

Other:

5. How long did it take you to emotionally process and accept your DNA surprise? *

Mark only one oval.

A few days

A few weeks

Several months

More than a year

I'm still processing it

Section B: Identity, Relationships, and Psychological Effects

6. Did this discovery affect your mental health, identity, or emotional well-being? *

Mark only one oval.

Yes, significantly

Yes, somewhat

No, not really

Not at all

Option 5

I'm not sure yet

7. Did your DNA surprise change how you view your identity or life story? *

Mark only one oval.

Yes, significantly

Yes, somewhat

Not much

Not at all

I'm still figuring that out

8. How has your relationship with your known (raised) family changed as a result? *

Mark only one oval.

Strengthened Weakened No change

I haven't told them

9. How did the newly discovered biological family respond? *

Mark only one oval.

They were welcoming and open to building a relationship. They were surprised and unsure how to react at first.

They were excited and eager to get to know me. They were distant and cautious about the situation.

They were upset and had a hard time accepting the news. I haven't told them yet.

10. Did the surprise involve any of the following? (select all that apply) *

Check all that apply.

Change in parentage (e.g., new or different biological mother or father)

Discovered of full or half-sibling(s)

Learned I was donor-conceived or adopted

Found extended biological relatives (e.g., cousins, aunts, uncles, grandparents)

No significant change in biological relationship

Section C: Support and Professional Involvement

11. What kind of support did you receive after discovering your DNA surprise? *

Mark only one oval.

Encouragement and understanding from friends and family.

Professional counseling/therapy to help process my emotions.

Online communities and people who have had similar experiences. Religious or spiritual support

I didn't receive much emotional support, and had to handle it on my own.

I did not seek support

12. What kind of emotional or psychological support do you wish had been available to you? *

Check all that apply.

Professional therapist or counselor, peer support group

Educational materials or guides

A mentor or guide through the discovery

Other:

13. Did a genealogist, search angel, or DNA helper assist you with your discovery? *

Mark only one oval.

Yes, and they were very helpful

Yes, but they were not very helpful

No, but I wish I had one

No, I didn't seek help

Other:

14. Was there any conflict or tension with others after your DNA surprise that required mediation or external help? *

Mark only one oval.

Yes, and mediation/support helped

Yes, but I handled it privately

No, but I could have used help

No conflict occurred

Other:

15. What advice would you give to someone going through a DNA surprise? (Open-ended) *