Premise: For many, the decision to pursue adoption comes only after many years of struggling with infertility. Letting go of the dream of the biological child and embracing the deepest wish - to become a parent - usually involves some emotional work.

Deciding to stop medical treatments

Even though the infertility experience is most often described as an emotional rollercoaster, knowing when to get off can be extremely difficult. Having a biological child is such a basic expectation.

Teri from Philadelphia states: "It was that belief that we couldn't possibly fail at this that kept us going and made it bearable." The ever-expanding advances in reproductive technology techniques plus the variety of third party reproductive family building options (donor egg, donor sperm, surrogacy, gestational carriers) make this decision especially difficult.

While donor options are sometimes presented by doctors as other medical treatment options they are really other family building options. Deciding what is right for your family can be overwhelming. Couples struggle to make timely decisions mindful of long term considerations and try to process how each option might impact them and a child. How will each partner feel if they use a donor option? How do children feel about born through donor options or about adoption? How comfortable will each parent feel about discussing adoption or donor origins with a child?

Looking to draw the line somewhere couples sometimes make a plan - to do a set number of cycles, to try a particular treatment or family building option or not. But even these plans can get modified when there is any sign of encouragement from these efforts. Many couples have the frustrating experience of having "unexplained infertility" which means that they have no specific diagnosis. This tends to perpetuate their effort to find a treatment that will work. Getting a diagnosis helped Laura M. of Safety Harbor, Florida who said "Our lives could resume and we could switch tracks."

Most people look for a point of no regrets. Barb B. of Mount Prospect Illinois said: "My husband and I decided to stop infertility treatment when the emotional, spiritual, relational, and financial burden became too great for us to bear. After treatment, surgery, and ultimately two failed IVF's, I felt I could no longer endure the trauma of loss and disappointment."

It's not like in the movies where there is a scene with dramatic music in the background and a moment when the people "just know." Making this decision is usually a process that takes time, and is moved along by some "AHA moments". Diane D. of Tinley Park Illinois said: "We went to a family birthday party, and when my 21 year old niece hugged my
brother-in-law I felt like crying because I realized we would be missing out on the whole relationship, not just the pregnancy/birth part."

And eventually people reach a point of greater clarity about their goals: Samantha H. P. of Georgia states "We decided to stop medical treatments because our desire to parent out weighed our desire to be pregnant."

**Coming to terms with Grief**

Gaby J. Greenwood SC, an adoptive mother recalls: "We grieved for the children that would not look like us, for the pregnancy we had expected would happen like it had happened to so many friends around us, and for the bond we had heard happens as you birth, breastfeed, and raise your biological child. While my children look nothing like us, I so love the way they look that I often wonder why I ever worried about that."

*How do you get from grieving to parenting?* Most people find it to be a multi-layered experience. As with an onion, you need to get through one layer before you can get to the next one and often there is often a lot of crying along the way. Cathy of Sun Prairie WI said "initially there were a lot of tears, a lot of anger and a lot of resentment. I HATED to look at pregnant women." Other common reactions include sadness, depression, feeling damaged or ashamed about the inability to become pregnant, lowered self esteem and social isolation, guilt (if they have the diagnosis and sometimes women feel guilt even when they don't have the diagnosis) and anxiety about the marriage.

People fear grief, worrying that if they allow themselves to feel it, they will plunge into a deep and never-ending depression. While that's how much this loss hurts, most people find that facing the grief actually centers them; and helps them to connect with their innermost feelings - often the deepest desire which is to become a parent.

Taking some time, getting support and validation - especially in peer pre-adopt groups where couples often benefit from the contributions and support of others grappling with the same circumstances, learning about the grief process and maybe some resilience building or coping skills, some rituals or acknowledgement of your decision all help with moving forward.

Grieving what might have been is not an easy task. If the grieving process extends for a long period of time, and symptoms of depression exist for more than six months, the help of a mental health professional with experience in infertility and adoption should be sought.

**Life transitions typically include 3 phases: Loss, Confusion and Re-direction.** Re-direction and exploration of adoption can bring feelings of relief and excitement about finally pursuing an option that will work. There is a sense of taking back control of one's life. Karen L. of Pennington NJ said: "When transitioning to pursuing adoption I felt hopeful, excited, overwhelmed, nervous and relieved and some anxiety about the adoption process." Christy Orabuena-Cimmento, Torrance CA concurs that "While I was going through infertility, I always said "IF" we ever had a baby. When we decided to adopt, it became "WHEN" we were going to have a baby."

Some experience resentment about all they need to do to become parents. Julie Molloy Eagan, of MN, mother of Olivia (3) - USA describes: "I was incredibly frustrated and impatient as we started on the road to adoption - paperwork, classes, references, fingerprints. Why did we have to go through so much scrutiny to become parents after we'd been through so much already?"
Some have fears about adoption. "My biggest fear was that our domestic open adoption would fall through & we'd be left child-less...again. I also worried about openness with birth family - I wondered how much we could open up our lives without feeling like we were co-parenting. We were matched with our daughter's birth mom when she was 5 months pregnant. Having 4 months to get to know Molly gave us time to build trust and grow comfortable in our roles as adoptive and birthparents." Julie Molloy Eagan, MN Olivia (3) - USA

It is a lot to take on a new family building process especially after pursuing infertility treatments which have been so wearing and devastating. Getting support and perhaps joining a pre-adopt group during this transition is validating and helpful for expectant parents who are adopting.

**Getting on the same page with your partner**

If you'll be adopting as a couple, it's important to be on the same page as your partner. How do you get there?

It is common for each partner to feel ready to adopt at different points. While stressful, this makes sense when you consider that you are unique individuals with different feelings about the losses of infertility; fears, fantasies, and stereotypes about adoption.

*Build communication and decision making skills.* Making this transition often occurs early in a marriage before couples have developed strong communication and problem solving skills. Deciding to adopt can be hard on a marriage. It is not unusual to reach a point in this process when you are not certain your relationship will survive it.

Deciding amongst the different family building can be difficult. The options that would relieve one person may upset their other partner (EG donor egg or sperm). Sometimes the partner without the diagnosis feels guilty grieving and the partner with the diagnosis thinks they should be acquiescent. This is a major life commitment and not something one can do for their partner so it requires both self-exploration and communication together.

*If you are ready and your partner is not, consider that your partner may need more time to grieve.* Your styles of grieving probably differ based on your personalities or even gender-typical styles. While women tend to talk, emote, repeat and seek validation for their feelings; some men withdraw or fill their time with lots of work, sports or house projects to help them with their grieving. Jim L. of Lawrenceville NJ literally started a new and prospering business during the couple's infertility treatments. He states "I needed a place where I felt productive, and where I could be in control." Another man Michael R. of Yardley Pa. sadly reports that he withdrew from his wife after each failed cycle because he was so angry he was frightened that he could not contain it if he talked about the anger. This led to marital tension as his wife felt abandoned, but fortunately they were able to communicate through the help of couple's therapy.

*Talk to each other* - You will want to set aside some specific times to talk to satisfy the partner who wants to adopt, but not overwhelm the person who is not ready. And the person who is not ready needs to remember that "talking is not doing" but helps increase couples' understanding of each other and often themselves; and will help in eventually moving toward a decision.
Refocus on why you chose each other and take some time to re-connect. After all you began this parenting journey because you love each other and wanted to form a family together.

Get educated about adoption. Everyone has different knowledge and prior experiences that influence how they think about adopting. Alice M. of Hopewell, NJ said “my husband’s cousin was adopted and he was a real trouble maker. I think my husband was afraid that ALL adopted children would be unhappy.”

And if you reach an impasse, spend some time with adoptive families so your partner can experience their joy and normalcy; or counseling with a specialist in infertility and adoption helps most couples to get on the same page fairly quickly. And as Alison K. of Lawrenceville, NJ said: "When he still seemed a bit hesitant to start the adoption process – we went to a counseling session where he finally said what I wanted to hear – “He didn't want to live his life without experiencing parenthood as well.”

Getting started with adoption

Many people think they need to be fully "resolved" first but this is not true. This can be confusing when they think an adoption agency expects them to reach a point of “resolving infertility before pursuing adoption.” The definition of "resolving infertility" needs to be re-visited.

Take one step at a time - Many people begin to explore adoption to have it as a "back pocket" option, and others find that moving forward helps them to feel more certain about adopting. In fact, taking the steps toward adoption may help you work through some of the grief. Julie Molloy Eagan, MN said: "Looking at ultrasound photos of our daughter made me realize I wanted to be a mom - not a pregnant woman."

Learn how infertility grief works. The models that most people are familiar with define stages of grieving - shock and denial, bargaining, anger, sadness and acceptance. This model was built on the experience of death, but a life experience like infertility grief does not punctuate with acceptance. The reality is that when someone suffers a profound, life-changing, role-altering loss, grief will ebb and flow over the course of the life cycle. It will not stay front and center but it will bubble up at associative moments because that is human nature.

Many people feel guilty and confused when their grief resurfaces - Kimberly of Madison, ME said "What has taken me most by surprise is that even 6 years later I find that I have moments when I still grieve and wonder why.... It’s hard because it feels abnormal to still be grieving especially when I have two awesome kids."

1. It can be a great relief to learn that it is normal for grief to ebb and flow and that it is not uncommon to occasionally have thoughts or feelings at various moments throughout the life cycle about what was lost.
2. Grief does not mean you do not love the family you have through adoption, it means you are human, have suffered a profound loss and will at times be reminded of it or saddened by it. Resolved means that you have learned to manage it when your feelings resurface and that you live enriched lives because you have experienced such profound grief.
3. Your infertility losses and adoption gains are 2 branches of the same tree. The grief about infertility losses can run right next to the joy about parenting through adoption. Good to expect this rather than feel guilty, confused or blindsided.
4. Grief can continue and is something separate from loving your kids - grief of a role, of a norm, of never knowing your biological child. same as adopted kids who will at some stage grieve not growing up in bio family and maybe never knowing them although open adoption is making that possible

Moving forward yields happy results - Jill Chuckerman Test of Chicago, Illinois states: "We have no regrets about any of the choices we made throughout the whole process because we can't imagine a child better for us than our sweet, smart, silly, strong daughter--every choice we made, every step we took, led us to her. We are beyond thrilled with our family!" And Teri from Philadelphia adds "We firmly believe that family is not created by biology, but by the ties that bind us to one another."

Taking Your First Step

A safe way to learn about all of your adoption options is to have a Pre-Adoption Consultation at the IAC Center. The Center is a source of neutral guidance and advice, does not do adoptions and is not affiliated with any adoption agency or attorney. You will gain an unbiased view of ALL of your adoption options rather than being overwhelmed by the choices on the internet or influenced by the marketing approaches of the "business" that is adoption. Call 609-737-8750 or see: http://www.iaccenter.com/how/pre-adoption-consultation.asp for more information.

Conclusion

The infertility experience teaches parents to be sensitive to loss, and to improve resilience and coping skills, which often has the side effect of increasing self esteem and self confidence about dealing with life's ups and downs. All of these gains are superb skills for dealing with the adoption process and parenting!

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Sidebars

Secondary Infertility’s special challenges

While almost always unexpected, secondary infertility - the inability to get pregnant after having given birth - is actually quite common. Coping and getting support can be especially complex.

1. Living in the world of families and kids - These parents don't want to isolate their child from playgroups and birthday parties; yet they may be surrounded by pregnant mothers, or the younger siblings of their children's friends, precisely the situations that stir their pain. Friends, who have been supportive while parenting the first child, can be linked to the feelings of pain and jealousy.

2. Facing insensitive questions - Women experiencing secondary infertility also field more than their share of unwelcome comments, such as "Don't you think it's time to have another child?" or the couple may be asked when a couple is going to have another baby or why they've decided to only have one.

3. Couples with secondary infertility tend to receive less social support - People may say things like "You're lucky to have one child" or "Just relax. It happened before, it
will happen again in time." or even "Be grateful for the child you have," with the underlying message that it is foolish to go to extremes to increase family size. Couples can be grateful and still want another child.

4. **Guilt about not giving their child a sibling** - Concerns for their child's current and future happiness, especially when parents are older. And children may unwittingly add to their parents' despair by asking for a baby brother or sister.

5. **Dividing personal resources** - Parents need to weigh the expenditure of time, money and energy for medical treatment or adoption while keeping the needs of their existing child in mind. Couples often are concerned whether or not they will continue to be good parents in light of the emotional and financial stresses involved.

6. **Special concerns about bonding and attachment** - Wonder whether they will feel the same way about a child through adoption or donor options. Wonder how a new child will impact the child they have and whether they can handle certain unpredictable issues such as a special needs child; or the complexity of parenting children with different backgrounds and possibly races, etc.

7. **Marital stress** - Partners may feel unequal need to parent a second child. Often men do not want to dwell on failure and want to move on with their lives. This can leave a partner feeling unsupported and can tug couples apart.

It is crucial for parents to acknowledge and mourn the loss and then to legitimize the existing family. Families come in all shapes and sizes, even size three.

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**Infertility, Adoption and Social Stress**

1. **Social Triggers** - Couples dealing with infertility and waiting to adopt often choose to avoid pregnancy - or child-related activities, such as baby showers, first-birthday parties or even certain holiday events, in order to minimize their pain. Given that their childless status is temporary, missing these events at this time may be a good way to cope. If you feel that you must attend, plan a signal to let your partner or a close friend know when you need support or that it is time to leave.

2. **Intrusive questions and insensitive comments** - "We had a few family members who tried to keep telling us about a better doctor for IVF and it became very annoying. We had to tell them a few times we have made our decision - we are adopting." Lauren T. of NYC. Friends and family may know very little about infertility and adoption. Handling this is especially stressful before a couple becomes parents and knows how things will work out.

3. **Surround yourself with supportive people** - other couples seeking to adopt or the friends and family who "get it." Many people find pre-adoptive groups to be the best solution - they can get validation and support, and make friends who will also be parenting through adoption. As Maryanne S. of Bedminster, NJ said "I don't know how people do this without a support group."

4. **Dealing with Birth Parent's pregnancies** - Lindsay Conover, MSW, IAC Center Counselor states: "When it comes to the point that prospective adoptive parents are actually meeting with a prospective birthmother - their focus is very different. They are more interested in how the Birth mom is doing, how the baby is doing, and
presenting themselves positively to the Birthparents." And Chris R. New York City said "I have had difficulty surrounding other pregnancies but not the pregnancy of Justin's birth mother, Rebecca. Her pregnancy offered us hope and ultimately our beautiful son. Rebecca was very generous with us and sent ultrasound pictures and allowed us to be a part of an ultrasound visit. While it crossed my mind that I wished it was me on that ultrasound table, I was really much more elated to get a glimpse of my son."

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