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PATHWAY FAMILY

9 TIPS

to Long-Term Success in Adoptive Parenting

An Embryo Adoption
Success Story

of International Proportions!

10 Pregnancy
Myths

WINTER / SPRING 2018

In Process:
Choosing &
Completing
an Embryo Adoption

What Is a Home Study, and Why Is It Important?

A PUBLICATION BROUGHT TO YOU BY



PATHWAY 2 FAMILY

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Have you heard?

Embryo donation and adoption have allowed more than 8,000 babies to be born into loving families. It may be the solution you have been searching for.

Learn more in this issue of

Pathway2Family or at
www.EmbryoAdoption.org









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Check out our website for more information, videos, and webinars about embryo donation and adoption at www.EmbryoAdoption.org.

ADOPTION

Building Healthy Family Communications



When you are negotiating your adoption communication agreement, give careful consideration to how your communication will benefit your children. Establish clear boundaries for the present, knowing that these may shift over time as you build your relationship with one another. Face your fears and seek counsel from your adoption provider. They have experience and can help you understand the truth.





This is one of the most common problems in relationships. One or both parties don't speak up and things slowly but surely erode over time. Speak the truth in love if you are uncomfortable with something that was said, or if one person seems to want too much, too fast. Perhaps you want more direct communication—don't be afraid to ask the other party to consider it.





If you discover the plan you've agreed upon isn't working, pause and give some consideration to the other family. Have empathy. Propose mutually acceptable alternatives that will maintain some level of communication, such as Adopt Connect, Facebook, and Instagram. Many of these social media sites allow you to establish a private group. Building solid relationships takes time.





Did you commit to providing updates on a regular basis – monthly, quarterly, or annually? Do it! There are so many tools at your fingertips to help you set reminders for this important promise you have made. Use one! Don't procrastinate. The other family is counting on your promise. Each family should be providing updates to one another. If your matched family writes to you, write them back. Tell them what's going on with you and your kids.





(v) Be Thankful

Rejoice in your new relationships. Whether face-to-face, direct, or mediated, remember the relationship is in the current and future best interest of your child.



Want to learn more?

Watch Starting Up Healthy Communications with Adopting Families at https://youtu.be/3hp9FSyXq3E

It seems like everyone and their mother – and their extended family –

has advice for moms-to-be after they announce their pregnancy. While some of those tips will undoubtedly make the next few months easier and healthier for both you and the baby, there are many old wives' tales that you'll be relieved to know are bogus.

Here are 10 of our favorite pregnancy myths:

Putting your hands above your head can hurt the baby

This one likely started back when pregnant women were expected to do more of the literal heavy lifting for domestic duties and was prescribed to get them to sit down and rest. Thankfully, the fear that lifting your hands above your head will endanger the baby with its umbilical cord is complete hogwash, so stretch away (and grab the snacks off the top shelf).

You're stuck sleeping on your left side for the next nine months

This one is also false. Go ahead and get sleep whenever and however you can, even if that's sleeping on your back. Getting rest is the most important thing.

Myth 2 No baths while you're pregnant

While you should watch the temperature of your bath - warm, but not hot - feel free to take a soak to relieve swelling and muscle pain as you and the baby grow. A warm bath also stimulates the production of amniotic fluid and can prevent premature contractions.

Give into your cravings, because you're eating for two

Though it does take extra calories to grow another person, it's only about 300 calories per day on top of your normal intake. Cravings will come and go, and it's okay to indulge sometimes, but maintaining a healthy diet will be best for you and your baby.

Myth 5 Pregnant women can't eat sushi or smoked salmon

Both salmon and sushi are allowed for pregnant women and can provide a much-needed source of omega-3 fatty acids like DHA. There are some types of sushi - mackerel, shark, tilefish and swordfish - that should be avoided,



however. You should also limit how much tuna you eat to no more than 12 oz. (or two rolls) in a week.

Myth 6 No more quality time with the cat

There's some truth in changing up your routine if you're a pregnant cat owner, but it's not because your furry friend itself is medically dangerous to you and your baby. While you should feel free to give the cat some love, try to avoid cleaning its litter box. There is something in cat poop that can be harmful to your baby.

Myth 7

If you're experiencing heartburn, your baby is going to be hairy

Reaching for the antacids every day? Don't be concerned that your baby will come out looking like Bigfoot. Plenty of women have heartburn throughout their pregnancy and it has no correlation to the amount of hair your baby will be born with.



Myth 8

Various astronomical/natural occurrences will induce labor or affect your baby

Despite what a multitude of forums on the internet claim, a full moon or storm can't trigger labor, and the uterus is not that sensitive to barometric pressure. Also on that note, the idea that touching your belly while watching a lunar eclipse will cause your baby to develop a

Myth 9

ammonia than

permanent dyes.

birthmark is equally as absurd.

You must stick to your natural hair color during pregnancy

Since only a small amount of hair dye is absorbed into the skin, it's perfectly safe for expectant mothers to dye their hair. The same rings true for hair straighteners and perm rinses. However, to avoid nausea, it might be good to stick to semipermanent dyes and highlights that have less

Myth D You'll be happy and glowing throughout your entire pregnancy

We all know women who breeze through their nine months of pregnancy looking radiant and feeling euphoric. So, what about the rest of us? Aside from sometimes causing anxiety and depression, pregnancy can also leave you feeling unattractive and exhausted. Hang in there. You're growing another human being, so cut yourself some slack and talk to a doctor if the pregnancy blues are getting the better of you – there's no shame in that!



In Process

Choosing and Completing an Embryo Adoption



After four years of dating, Tim and Ellen were joyfully married in January 2013. They always talked about having children.

Tim frequently joked that he wanted 2.5 kids

(the national average) and because Ellen's younger brother was adopted from Russia at the age of two, this topic was a part of the couple's discussion for building a family. What they didn't realize was how soon adoption was going to play a role in their lives.

Married two years, they began having discussions on starting a family. They started by adopting their four-legged kid—a white one with black spots, and the cutest ears—their puppy Gus! He was the practice round for "real kids."

Tim and Ellen began attempting to conceive a biological child in fall 2015. In March 2016, having had no success, Ellen made an appointment with an OBGYN. The doctor told her

everything looked in order and added she expected to see her back in her office pregnant in no time at all. That, however, did not occur.

While the couple was on vacation in July 2016, they were listening to a podcast, and an ad came on for a Bible club ministry in Eastern Europe. A thought clicked inside Ellen's head, "I want to adopt from an Eastern European country, and I want to do it now." Immediately,

through the magic of the internet, she began researching international adoptions. They discovered it was going to be extremely expensive. The realities of attachment and potential medical issues were also concerning to them. Tim and Ellen concluded that, at ages 26 and 27, and with one of them still in graduate school, international adoption needed to be put on hold.





In October, Ellen confided about their struggles to conceive and the desire to adopt to a coworker who then told Ellen about a couple she knew who had adopted embryos and given birth to their adopted child. Immediately, Ellen was intrigued. She went straight home after work, and you guessed it, started researching!

Tim and Ellen were blown away! They thought, "What an amazing thing to be able to adopt children as embryos and to carry them in pregnancy!" They spent several months thinking and praying about how to proceed. Ellen communicated

with women who had gone through embryo adoption. She watched video blogs, researched agencies, talked with agencies, and read the book, Souls on Ice.

After doing some fertility testing, a possible reason for their inability to conceive was finally discovered: Ellen had Polycystic Ovarian Syndrome (PCOS). The Reproductive Endocrinologist told them about intrauterine insemination (IUI), but they decided against it. "After getting the PCOS diagnosis, we decided embryo adoption was the right choice for us," Ellen remembers.

Tim and Ellen considered three different agencies. All were great options, but they elected to work with the Snowflakes Embryo Adoption Program. They felt comfortable with the people they interacted with and were able to get answers to most of their questions up front. Tim and Ellen's confidence in the program grew after each interaction.

In April 2017, Tim and Ellen submitted their application to Snowflakes. Their home study was completed in about three months. Then, it was time to enter the matching phase of the program. Incredibly, Tim and Ellen were matched with a placing family in 10 days. They needed some time to pause, think, and pray. Two days later, they gratefully accepted the placing family's invitation to match.

Next came the adoption and communication agreements. Once the contracts were returned, signed, and notarized by both families, it was time to ship the embryos to their clinic.

"Our 'embabies' arrived at our clinic in December 2017. We expect to have our first frozen embryo transfer in January 2018. It's amazing to think that less than one year from submitting our initial application we could be pregnant

with our adopted child!"

"There are so many things we're eagerly awaiting: the day of our transfer, the day we feel our babies kick inside my growing belly, the day we can hold them in our arms, and the day we can tell them how much God loves them."

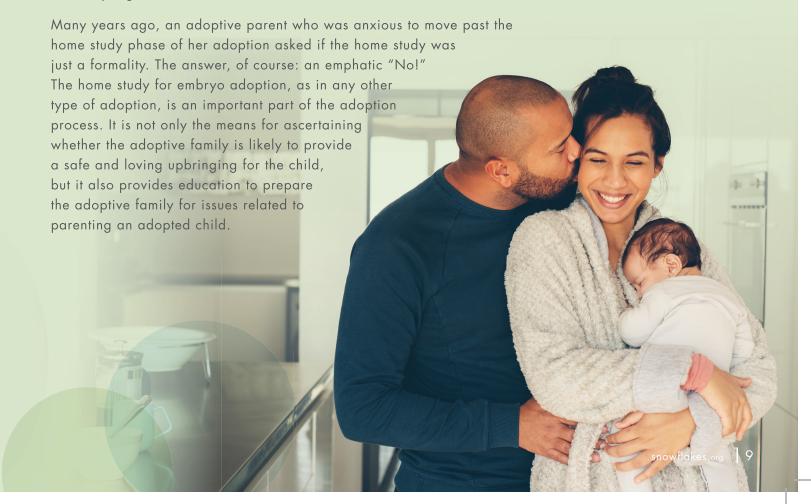
If you would like to follow Ellen and Tim's journey, you can find their video blogs on their YouTube channel Ellen VT or search "VT Embryo Adoption."



What Is a Home Study, and Why Is It Important?

In all types of adoption, a home study is required before an adoptive parent is approved to adopt. The home study involves several elements, including assessment, education, and preparation. It also provides peace of mind to the placing parents involved.

Contrary to what some may believe, the home study is not just the evaluation of an adoptive family's living environment, nor is it a practice of checking off items on an arbitrary list of eligibility criteria. Of course, the prospective adoptive family's living environment is inspected, but this is a minor part of the process. The family's financial situation; employment and education history; experience with caring for children; and mental, emotional, and physical health are assessed. Several references are provided and criminal and child abuse background checks are requested. Just as important as the assessment of the couple's background is their preparation to adopt. The home study process involves education about adoption-related issues that is invaluable to both the family and the child(ren) they are adopting.





to Long-Term
Success in
Adoptive
Parenting

Before we get to nine tips for long-term success in adoptive parenting, let's uncover a new way to frame adoption, and let's throw out the labels we typically use to describe contact (or lack of) in adoption scenarios.

Open Adoption Spectrum

Closed (no contact)

Open (lots of contact)

Such a spectrum describes an undefined way of measuring something we call "contact." Are we measuring quantity of contact? Quality of contact? Type of contact? Something else? To be more inclusive and accurate, we should be paying attention to something else.

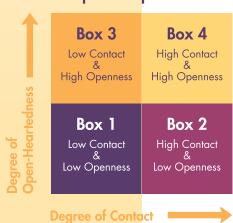
The premise of the book, *The Open-Hearted Way to Open Adoption: Helping Your Child Grow Up Whole*, is that adoption creates a split in a person between their biology (the DNA we're born with) and their biography (the life that's written by those we call family). Openness helps heal that split. When it comes to integrating oneself, openness is the key, not contact (though desire for contact often results from openness).

You don't need to have contact with your adopted child's birth parents in order help him/her heal the adoption split. But to maximize your chances of raising a well-functioning person who is primed to heal that split and who wants you along on their journey in building their identity, you will want to cultivate openness.

Our spectrum becomes a grid.

I define openness (open-heartedness) as dealing with What Is. The opposite—closedness—is when we are not dealing with What Is. We might be dealing in fantasy or not dealing at all, just ignoring reality.

Open Adoption Grid



Box 1 describes a traditional closed adoption. Not only was there very little contact or identifying information available, but people were counseled to act as if adoption didn't matter to anyone involved—the opposite of dealing with What Is.

Box 2 describes an obligatory open adoption. Contact is offered as part of an imposed agreement. But people here may not be ready and willing to deal with the complexities of adoption as they arise over time.

Box 3 describes many international, foster, and domestic adoptions, cases in which birth family is unavailable, unknown, unsafe, or unreachable. Though contact may not happen, parents here still deal mindfully with what comes up, and they respond rather than react to adoption issues.

Box 4 describes an extended family model. We many not always adore the people we're connected to as family, but we do what we can to make family relationships work.

Remember that even "normal" parenting stretches you.

Just as you're going to figure out how to deal with toilet training, choosing schools, middle school drama, the drugs/sex/ alcohol talks, and all the other quintessential and scary parenting moments, you will find ways to help your son or daughter deal with the question of "who am !?" over the years. You already trust that you will figure out regular parenting issues; trust that you're going to figure out adoptive parenting issues, too.

Commit yourself to the truth. Delivering truth will pay dividends in receiving your child's trust.

Be prepared, always, to deal in What Is.

See from your son or daughter's perspective.

What would it feel like to be raised by people with whom you have no genetic connection? Would you be curious about the "other family" and how you may have been a part of it? Would you want your parents to be alongside you as you wonder, or would you feel as though you need to keep your thoughts secret so as not to hurt them?

If you have to err, err on the side of openness, of dealing with What Is, because that is ultimately what you'd like your son or daughter to be able to do.

Attune to your son or daughter.

Attunement is an extension of empathy. Develop the practice of attuning to your son or daughter, being gloriously present with them, with who they are each day. Practice seeing things through their eyes, the way they feel now. And the next now. And all the future nows.

Ways to cultivate attunement include:

Face-to-face interactions:

Board games, card games, laughing together (no screens).

Side-by-side interactions:

Driving, walking, hiking. Without the requirement for eye contact, sensitive topics can seem less threatening.

Active interactions:

Movement gets flow going within a person and between people. Try outdoor games like tag or shooting hoops.

Stillness:

This "nothing time," time to just be together, is like the mortar between the bricks. My kids are teens, and they still ask to cuddle some nights during that relaxed time when defenses are down and closeness is easily attainable.



4

Tune into yourself.

Detect and resolve any triggers you may have about your family-building story. Your son or daughter will have a "spidey sense" whenever they get too close to one of your hot buttons.

You don't have to be triggerless – the point is not to be triggerless – but you should develop a way of knowing when you're being triggered so that rather than reacting from a hurt place, you can pause for a moment and choose how to respond. Your connection with your child is influenced by the connection you have with yourself.



5

Attend to your own sore spots that arise from grief, jealousy, insecurity, etc.

Grief:

Adoption doesn't address the loss of the dream of a biological child. You have filled the crib, but you may still occasionally be reminded of your neverto-be-manifested ghost child. How are you going to react/respond when you feel a sudden pang of grief? Will you be mature enough to recognize this is happening?

Jealousy:

Your embryo adopted child was created from a set of genes different from you and your spouse.

You may have times when you recognize some qualities that are simply due to genetic differences. Where did THIS come from? I'm math challenged—I don't know how to deal with gifted math. Or, I thought I'd raise an athlete, but instead I'm in music territory and I don't know music! Or, I'm a relaxed person—I don't know how to deal with such a yearning for motion. At times, you may wonder why this is so hard for you and so easy for others.

Insecurity:

There are genetic parents out there. That thought may make adoptive parents sometimes feel less than. What if my son would have been better off with someone else? What if I'm messing this up for him? I feel like a fake.

If you've had any of these fleeting thoughts, you're not alone. They're common and they're normal. What's dysfunctional is to squash them down and bury them rather than allowing yourself to feel them and let them pass.

When we can attune to what is going on within ourselves, we can make sure our below-the-surface emotions don't cause above-the-surface words and actions to erupt from us without our consent or awareness. Being mindful takes us from a place of reacting to a place of responding. We choose from a conscious level rather than have a knee-jerk reaction from a subconscious level.



Understand that what seems like a one-time event to you will be a lifelong journey for your son or daughter.

For you, bringing your son or daughter home was the happy ending you'd longed for. For your child though, that was just the beginning. While it may seem like a discrete event to you, it's a gradual journey to your son or daughter over the coming decades. You want to be invited on their journey.

7

Keep your eye on the big picture: raising an identity-integrated adult.

Be present so you can attune, but also keep your eye on the long-term goal: developing your son or daughter into a well-functioning, identity-integrated adult.

Have you noticed I have used the term "your son or daughter" at least as often as I have used "your child?" It's because we need to de-infantilize them. It's so easy for us to get stuck thinking our sons and daughters are forever children, but they're not. Our goal is to eventually get them to independence and adulthood.

Let's also talk about the tendency to delay difficult conversations. When we're figuring out how to deliver tricky information to our children, it needs to be done in an age-appropriate way, in which the information delivered matches the cognitive stage of your son or daughter (attune!).

But kicking the can down the road indefinitely doesn't resolve a problem and often allows it to grow by the time you are ready deal with it. Then you may have the added problem of your child feeling like they can't trust you to tell them their story – they can't trust you period. We need to make sure we don't miss our windows of timing to tell.



Allow your son or daughter the fluidity to process over time.

Today doesn't imply tomorrow. In other words, don't lock your son or daughter into one way forever. Oh, he's not the curious sort. Or Oh, she has never asked about it. Things can change for him or her over the years, so allow your kiddo room to wonder. Stay attuned so that you know if something has shifted in your child's processing of their story.



Neutralize the emotional adoption charge to gain clarity.

Take a situation that is triggering you and reimagine it without the adoption charge. Then ask, how would I handle this if there were no adoption component?

Example: During a communication interchange with the placing parent they give you some parenting advice based upon their experience.

Without a moment for reflection and discernment, maybe you get so immediately mad and feel so disrespected that you have the urge to shut down the relationship and keep them out of your lives – after all, you're the parent!

Or, maybe you reimagine the situation in which your sister-in-law is the one who gives the advice. Now how would you handle this? You may simply thank her for her insight and move on in the conversation.

Without the emotional adoption charge, you are better able to decide on a rational way to respond.

Don't expect your child to have the same relationship with their adoption that others you know have with theirs. People may have an assumption like, My best friend was adopted and it was closed and she's fine, so our child will also be fine with closedness. Each era and each person and each situation is unique. Your child deserves to find their own way and have their own preferences honored as they emerge and change.

The right response and right words tend to flow from an open, attuned, heart-centered GPS. Through these open-hearted practices, we are better prepared to help our sons and daughters integrate their various pieces and heal the adoption split.

These tips were originally presented as a webinar for the Embryo Adoption Awareness Center, which promotes the donation and adoption of embryos remaining from IVF treatments. View that webinar here: https://youtu.be/F3qWBNaJMxg

Lori Holden, M.A., is mom of a teen son and a teen daughter. She writes from Denver at LavenderLuz.com and is the author of The Open-Hearted Way to Open Adoption: Helping Your Child Grow Up Whole, on required reading lists at adoption agencies around the country. She is a supporter of education, empowerment and ethics in adoption and is on the board of the Family to Family Support Network. Lori speaks at agencies and support groups about what parents can do to help heal the split between biology and biography.

An Embryo Adoption Success Story of International Proportions!

In August 2006, native Brazilian, Anabelle Petersen and her husband, Tom were anxiously awaiting the result of their first embryo transfer. Pregnancy success! The couple, who met in 1999 when Anabelle was vacationing in San Diego, California, married in June 2000. Anabelle and Tom tried unsuccessfully for five years to have a baby. They decided to use in vitro fertilization (IVF) and their embryologist created seven tiny embryos. On transfer day, Tom recalls,

"Before the nurse inserted the embryo into Anabelle's womb, I remember seeing the tiny embryo through a microscope and realizing that it was alive!"

Nine months later, they gave birth to their first son, Andrew. When he was 14 months old, Anabelle was surprised to discover she was pregnant with baby number two! Their second son, Lucas was born in February 2009. Their daughter, Louisa joined the family in February 2011.

But Anabelle and Tom still had six embryos in frozen storage, and they had to decide what to do with them. At the same time, 2,000 miles away in Canada, Bert Pohl, born in South Africa and raised in Australia, and his wife Kryna, a United States citizen, were trying to start a family of their own. They were working at a small Presbyterian church in Ontario where Bert served as the pastor. Even though they were not having success getting pregnant, they trusted that children would someday be a part of their future.

Back in the U.S., after having three children in four years, the Petersens knew their family was complete. However, Andrew, Lucas, and Louisa still had six potential genetic siblings, frozen in time as embryos. Anabelle and Tom knew they had to make a decision about these embryos. Their options were limited. They could continue to store them, but the cost was no longer easy to budget. They could thaw the embryos and discard

them. They could donate the embryos to science, but this too would destroy the embryos. The only choice they felt was right for them was to donate the embryos for reproduction. They wanted to give their embryos a chance at life. They wanted to have a say in who received their embryos. Their clinic would not allow this, but when Tom was searching for solutions on the internet, he discovered the Snowflakes Embryo Adoption agency. He then discovered that the Snowflakes staff would help them find and choose a family to adopt the embryos.

Bert and Kryna, still childless, had learned about Snowflakes and decided to pursue embryo adoption as the means to build their family. The Pohls completed the application process and family profile and waited to be matched with a donor family.



When Snowflakes staff presented the Pohl's family profile to the Petersens for review, they were instantly attracted to the family. Tom and Anabelle quickly realized this family was the family they desired for their remaining embryos! The two families met in person in spring 2012, when Bert and Kryna came to the U.S. for their first frozen embryo transfer (FET) at the southern California clinic where the embryos were stored. Both families describe their relationship as friendly and connected, like extended family.

For their first frozen embryo transfer, the Pohls decided to have two of the six embryos they adopted thawed and transferred. They gave birth to their first son, Amos, the full genetic sibling of the three Petersen kids. Two years later, the adopting family, now living in the eastern U.S., had a second frozen embryo transfer, and Enoch was born.
The Pohls had their final frozen embryo transfer in 2016 and gave birth to their third son,
Joseph, earlier this year.

The families continue to meet and communicate regularly. The Petersens are delighted to know three of their remaining embryos are now living their lives as the adopted children of the Pohls.

The focus of embryo adoption is to help families who have remaining embryos choose life for those embryos by placing them for adoption into a family matching their preferences. The level of open

relationship between the matched families is mutually determined by the families, not the agency.

Watch the webinar, Fearful to Fearless: Understanding the Benefits of Open Adoption brought to you by the Embryo Adoption Awareness Center, www.EmbryoAdoption.org.

Considering Embryo Adoption?



- Couples, once in your shoes, now have embryos remaining from IVF
- Some of those families have chosen to donate those embryos to adopting families like yours

Your bundle of joy is waiting for you! CONTACT US TODAY TO LEARN MORE.



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