Motherhood Doesn't Always Come Naturally

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EPHRATA (Lancaster Co.)—
Mothers. Not a single one of us
would be here without one of
them.

So, for the past several decades, the second Sunday of May has been set aside as a day to remember and honor our mothers. It's a day on which nationwide phone networks hum with calls, restaurants prepare for waiting lines of customers, and mothers are remembered with cards, candy, flowers and hugs.

Motherhood for most women comes as a matter of natural course, a part of womanhood, love and marriage. But, for some it's not that simple.

"You think you're going to grow up, get narried, have children. Then you find out it doesn't necessarily work out like that. And, instead, you have to work at making it work out."

Those are the words of a Pennsylvania farm woman. She says them with a sort of catch in her throat and longing in her voice. Though insisting she remain anonymous, she agreed to lay open her deepest feelings, frustrations and the jumble of emotions faced every day by a woman who, through a quirk of fate, has faced difficulty attaining what a majority of women take for granted --motherhood.

Married for a decade, A. (for Anonymous) came from a large farm family. Even before marriage, she knew that she wanted to have several children. Since both she and her farmer fiance were older than many couples when they decided to marry, they both underwent fertility testing. And, while those tests showed some minor, but treatable, problems, physicians found no real barriers that were expected to prevent their ability to have children.

After several years of marriage and still childless, they sought help for their inability to conceive. What they found was the then still fairly-experimental technology known as in-vitro, or "test tube," fertilization. Success rate for invitro pregnancies in the mid-1980s was fairly low, about 16 percent.

An in-vitro pregnancy, with literally dozens of tests, surgery, hospital visits daily for weeks at a time, and endless injections, multiplies by several times the normal medical costs involved in childbirth.

"I was working where insurance would cover most of the invitro costs, so we decided to try it," says A. Soon doctors told her she would have twins.

The couple's ecstatic anticipation of two babies was short-lived; she lost one of the twin embryos within a few weeks. But the remaining one was healthy, and the couple became the parents of a baby girl.

Delighted with the success of in-vitro and their baby daughter, they again began the lengthy in-vitro process. That attempt was not successful -- nor were several more. With insurance paid out almost to the maximum allowable, plus spending thousands of dollars of their own, A. is trying to cope with the possibility of mothering no more natural children.

"Every time you go through invitro it's like being on an emotional rollercoaster. It doesn't seem possible, with the technology available today, that someone cannot get pregnant," she sighs. "No

matter what age you are, I think you must go through the same emotions when you want children so badly."

What spurs her on to try almost anything -- "I got 66 needles at one sitting during one in-vitro session" -- is that she desperately wants more children, and especially feels a desire to give her husband a son.

It's a hope of great intensity, with reasons that are buried deep within her own feelings and the rural tradition of farm families passing land down from father to son.

"I'm not under any pressure from my husband; I just don't feel complete. I know that sounds selfish because we have a beautiful daughter that we love so much. But my life just doesn't feel complete and I'm not sure at what point I'll feel that it is.

"Sometimes I think I'm in control and then something happens to bring it all rushing back. At some point I may feel ready to just give it up, but I don't know when that may be.

"I'm sure farm families will understand that I'd like a son. It's just one of my hopes for my husband," she confides.

Well-intentioned, but unknowing, friends only added to the emotional frustration with comments about starting a family or having more children.

About five years ago, the couple began looking into adoption possibilities.

"First thing that happens is that you are put on a waiting list wherever you apply. And, if you're on some sort of fertility program, you're told to call the agency if you become pregnant.

"We were on the waiting list for three years. After I got pregnant, we had to reapply and start all over on the waiting list."

Another agency "guaranteed" a baby in a year if they were "approved."

"What they didn't tell us right away was that we would have to go on a list to become 'approved,' and just getting on the list would cost \$2,000. It took a whole year to even get them to send an application; they kept saying they were re-doing their applications. And a total cost to adopt a baby through that program was between \$22,000 and \$30,000."

According to A., normal adoption procedures require the adopting parents to pay all legal and medical costs involved, but which may be much less with one agency than with another.

"I keep thinking if I put all sorts of 'feelers' out, then something will happen," says a hopeful A. That means having tried newspaper ads, letters to doctors, even looking into the possibility of a surrogate-mother arrangement. "I've even considered calling ads run by other people, just to see if they ever got any results." Adoption possibilities of both older and foreign children have also been considered.

Dr. Vincent Berger, phsychologist for Adoption Services in Camp Hill, said their waiting list for adoptions is three to four years. He adds that some agencies have waiting lists as high as 10 to 12 years.

Adoption Services places mostly Caucasion, and occasionally biracial, babies. Birthmother services are provided, and they are given extensive counseling to make certain that they wish to proceed with adoption.



For some, motherhood doesn't come naturally.

Pennsylvania law allows both agency and private adoptions, Dr. Berger explains. Agency adoptions are through non-profit organizations, such as the one he represents, while private adoptions are "everything else." That includes adoptions arranged through attorneys, physicians, or just "someone who knew someone, who knew someone."

He adds that most agencies provide a foster-parenting period for adoptive babies, from two to six months after birth, in which time the birthmother can terminate the procedure. Others like Adoption Services use "legal risk adoptions," in which the newborn is placed directly with the potential adopting family, offering a bonding period. The legal risk to the adoptive parents, however, is that the birthmother does have a period of time in which to terminate the adoption.

have begun giving serious consideration to applying for the fosterparent program. Would-be foster parents are screened on requirements similar to those for adop-

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tion -- personal interviews, training classes, assessments of housing facilities, meeting fire codes and space requirements, background checks for child abuse and police clearance.

To fill their desire for lots of children, A. baby-sits several youngsters and includes young friends and relatives in their daily and special activities.

"Sometimes just looking at our child, or at families doing things together, brings the emotions all rushing back. Sometimes I can talk about it, but other days it's really difficult. I've heard that as many as one-third of marriages have problems with being childless; who knows why it has to be that way.

"I just want other people to think about the emotions of wanting children and not being able to have them."



For some, this baby's smile brings pain to their hearts — because they do not have a baby to call their own.

Cost, according to Dr. Berger, may vary greatly depending on the adoption route taken, ranging anywhere from \$2,000 to \$15,000. He knew of none in the immediate area who charged up-front fees.

Another adoption agency listed in area phone books, Adoption With Love, replied when contacted that they preferred not to talk with newspapers. A spokeswoman gave New England as their location.

Recently, A. and her husband

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