COREY'S LULLABY: LIFE WITH MY ADULT DAUGHTER WITH ADD

Margaret Marcus*

For Corey Because I love her,

For Leah
For enduring love,

And

For all families struggling with the challenges of ADD

It is 9:30 p.m. on November 13, 2000, when I get the call. Eleven years earlier, on this very day, my father died. Now my 23-year-old daughter, Corey, is choking in anguish, "Mom, I think I am pregnant. I feel funny. There is mucous-y stuff coming out of me." My rage—my exquisite hot fury—gets only a fraction of a second. I automatically move into my crisis mode. I am the center of the tornado. I become hyper-alert, rational, directly keyed into the moment.

"You told me you hadn't slept with anyone since you and Sean broke up."

"I know, but it was only once."

"When?"

"I don't know—maybe June or July." Still sobbing.

"I don't want it!" Corey yells, furiously.

I calculate. She probably isn't in labor. I put my hand over the receiver and look at Leah, my partner of ten years. "Corey's pregnant. Something's wrong. I think I should go over there—take her to the hospital."

Our eyes silently acknowledge mutual incredulity and, instantaneously, a confirmation of what we had known but not known for months. Corey was pregnant, after all these months when I had been asking her if there was any possibility that she could be pregnant. At Leah's father's funeral in July, Corey's 26-year-old brother, Jonah, had wondered if Corey could be pregnant. She looked pregnant. I had asked then if she was getting her period. I had asked if she had had sex with anyone. And now, of course, she is pregnant after all.

Leah and I talk quietly before I leave to pick up Corey. Leah will stay home with the younger boys, Noah (12) and Robin (17), but I should call and let her know what is happening. I look at her and feel a surge of love and awe. Here is a woman who had no children of her own, yet accepted into her heart as a partner, me, a woman with five children who were ages 18 to 2 at the time. When we were dating, I inquired over and over, "You know I have five children, don't you? Five! For life."

Now, ten years later, she readily admits that she had no idea what that really meant. As it turned out, one thing it meant was a frightening lack of control over her own life, as ex-partners, extended family members, and children's undeniable and unstoppable needs buffeted her about in a series of storms and uneasy calm. Together—and sometimes furiously apart—we have survived the hurricanes of life: deaths of family members and friends, Jonah's illness and kidney transplant, Noah's struggle with Obsessive Compulsive Disorder, (OCD), teenagers and teenagers, car accidents and alcohol abuse, and all the mun-

^{*} This is a true memoir but names have been changed to respect the privacy of the individuals involved.

dane but accumulating wounds and scars (as well as the intense joys) of everyday life with children. And I still know she loves me. Her look of love (and worry) before I leave the house will sustain me in this difficult journey.

Driving to Corey's apartment, I am flooded with memories of her life.

We drove to get Corey from the adoption agency when she was six weeks old. I remember wondering what I thought I was doing with some other woman's child. Corey was considered to be a special needs adoption. She had a 50 percent chance of inheriting a rare muscle disorder from her mother—periodic hypokalemic paralysis. And she was a biracial child—half Caucasian, half Native American. We were told her birth father was full-blooded Cree, but we were never able to get her registered in a tribe because neither he nor his parents were registered. I was married at the time. Our five-year-old son, Simon, begged to hold the baby on his lap on the car ride home. Our three-year-old son, Jonah, wondered aloud what would happen if she fell out of the car window. And I pondered the huge responsibility I was taking on. That night I began a ritual of singing Corey to sleep. "Hush a bye, Don't you cry, go to sleepy little baby. When you wake, you shall have all the pretty little horses."

"Mom, I think I had sex in March or April." Corey greets me at her apartment door. I recalculate. Oh my God! Maybe she is in labor.

At the emergency room, Corey tells the receptionist that she thinks she is in labor. They escort us quickly to a room—only a curtain between us and another distressed person. Corey tells the questioning nurse that she has not received any prenatal care. The nurse inadvertently glances at me. I say nothing. I struggle with shame and embarrassment but

tell myself to stay in the moment. My job is to be as authentic and compassionate as I can.

They move us to a private room and begin the examination. We hear the baby's watery heartbeat—undeniable evidence. There is another human being in the room with us. Corey is in labor. The baby is term. I won't be teaching my college classes tomorrow.

I call Leah to deliver the news. She offers to call Corey's father.

"He's gonna kill me," Corey whines.

"Not 'til after the baby is born," I reply.

The fury keeps trying to force its way into my consciousness. If I stop thinking for an instant it threatens to overwhelm me. I cannot allow it space. Throughout her labor, it bangs wildly at the door of my consciousness and I close my ears to its angry desires.

As a baby, Corey, with her snapping black-brown eyes, dark skin, and sunny disposition, was striking. Strangers were drawn to comment. At the Stop-N-Go market, I met a woman, who would become a dear friend, who was compelled to tell me what a beautiful baby I had. When we traveled to Alaska to visit my sister's family and Corey was 18 months old, native women would teasingly tell me to give her to them—she belonged to them. I was challenged by the politics and ethics of this transracial adoption. And I was bonded to Corey as her mother. Later, when she sprouted freckles from her Scottish genes, her appearance grew even more impish and precious.

We are moving to a birthing room. Corey is in a wheelchair with IV trailing, me scuffling behind with coats, her clothes, jewelry, paperwork. She's been tested for drugs, STDs, HIV—I can't even think about that possibility. I push it into the think-about-it-later file, which is getting crowded.

Throughout her labor, her father and I, divorced for 21 years, work as a team, taking turns supporting Corey. Corey appears to have no awareness of her position as a curiosity—a woman who got no prenatal care and claims to have not known she was pregnant. Right now I envy that lack of social connection. I slip too easily into embarrassment and shame. Here I am a college professor, with a Ph.D. in social work! These people must think I am some piece of work, allowing this avoidable disaster.

I came home to feminism in 1970, a year after I married, when I read The Second Sex, and then Sisterhood Is Powerful, and felt instant connection. When we adopted Corey in 1977, I wanted her to have a strong and powerful name to encourage her in life. I worked in a battered women's shelter. At her first Take Back the Night march, Corey was riding in the backpack. "Mama," she exclaimed, enchanted, "Look! The moon is following us!"

Doctors, residents, interns, nurses are in and out. They are professional and efficient. Some don't ever introduce themselves, some do. They appear to be concerned about the monitor of the baby's heart, but they don't speak to Corey or us about it. I am a person who needs a good eight or nine hours of sleep each night. Corey's pain, all these people in blue scrubs and masks which hide half of their non-verbal signals, the various monitors—it feels surreal. Maybe I'll wake up and discover this was another anxiety dream.

When medical personnel ask Corey questions, she keeps turning to me for confirmation. "I'm only allergic to sulfa—right Mama?" I feel torn between wanting to give an accurate answer and wanting her to be capable of answering for herself. I think, "I am obviously *not* the one here with the answers."

Corey charmed everyone when she was in the Elephant Room for two to three

year olds in day care. She knew everyone's name and their parents. I had a T-shirt made that said "Corey's Mom" because, whenever we were out, strangers to me would say "Hi, Corey" and she would recognize them and greet them by name. She reversed letters in words. Her beloved blue cup with a lid was her "puc." When people mistook her for a boy because of her name, she informed them crisply that she was a "glir." Her daycare evaluation reads, "Corey bubbles over with laughter and sunshine. She enjoys relationships with both adults and children."

Corey's cervix is dilated almost ten centimeters but there is a lip still reluctant to open fully. They have her get on her hands and knees. Labor is intense and interminable. Then suddenly, the doctor announces that the baby is in distress and they believe it is in the best interest of all to get the baby out immediately. We are going to a C-section. Only one other person is allowed to be with Corey. Her father gives me the choice. I say, "If I am not there, I will worry." I go with her. I dress in scrubs. I sit at her head with the anesthesiologist. Corey is only a head now. A curtain separates her head from the rest of her body. She is finally out of pain. She drifts in and out. I try hard not to think ahead. The baby is in distress—what will that mean for us?

And then he is out, but not crying. I hold my breath. I stand and try to get a glimpse of him, but he is surrounded by a sea of serious blue scrubs. He is big, they say, 10 pounds, 3 ounces! Finally, a faint cry. They show him to Corey, then whisk him away. He is gone and we are there. I ask what his Apgar scores (ratings on a baby's health done at birth, with 10 being the best) were: 3 and 8. I think 3 sounds really scary, but 8 is OK. It leaves room for hope.

When Corey entered first grade, several years after her father and I divorced,

she was placed in an open classroom with team teachers. The room was overflowing with activity. Mobiles and signs hung from the ceiling. There were fish, and hamsters running on their endless wheels. Children wandered about freely from station to station counting with abacuses, balancing weights, listening to music with headphones. I was delighted and entranced. For Corey, however, it was a nightmare. Her only salvation from being constantly bombarded with painful noise and motion was to learn to read. From that point on, whenever she was getting over-stimulated when we went out to dinner or when we were unwrapping Christmas presents or when she came home to my sometimes chaotic family day care business—she would pull out a book. She was and is a voracious reader and a highly, albeit unevenly, informed individual.



The recovery room is a torture chamber for me. Corey is sleeping much of the time. There are two wooden, padless rocking chairs. I stare sadly at the cold, gleaming linoleum floor. It is 5 a.m. I try to sleep sitting up and manage occasionally to doze off.

At some point the doctor comes in to inform us that the baby is very sick—"in extremely critical condition," she says. They believe he was a post-term baby who aspirated meconium (a baby's first defecations) in the womb. He is on a ventilator and they are doing what they *can*. We cry. A sense of dread permeates my soul as I realize how drastically our lives may change. I am so very tired and the burden of life is so great.

Corey's father comes to spell me when she is wheeled up to her hospital room. I go home to sleep fitfully for a couple of hours, eat, and shower. Leah is there to hold me. Robin and Noah have gone to school.

We return to the hospital and visit the baby. The ventilator is taped in his mouth. He has IV's in his belly button, head, toe, a little blood pressure cuff on his arm. He is having seizures, his body jerking and trembling uncontrollably. He is incongruous in his setting, a giant surrounded by tiny babies: 1-2 pounds in tiny isolettes. His 10 pound 3 ounce body lies exposed on a table, too big for an isolette. A heat lamp keeps him warm. He looks like a chubby cherub.

Later, I call my mother to give her the news. I tell her that Corey has had a baby and the good news is that Corey is doing fine. The bad news is that the baby is in critical condition. My 80-year-old mother weeps quietly, saying, "This isn't how I wanted to have my first great grandchild." I know. It has felt almost cruel to be called "Grandma" by the well-meaning hospital personnel. My family rallies round us during this crisis. My brother, a physician in Oregon, is on the phone to answer medical questions and, with his wife, to offer support and courage. My sister, who lives in Alaska, makes a point to reassure me that I am a good mother each time she calls. I am the little sister, the one who always seems to need to be taken care of. I wonder how people can survive without this safety net of love. And I take note again of how independence loses its luster in a crisis.

When Corey was in the fourth grade I was convinced that she was having some kind of neurological trouble. The school balked at doing a multidisciplinary team (M-team) evaluation of her, though, since she was performing adequately as a student. But her teacher, a former special education teacher, encouraged me to get an independent evaluation. She was diagnosed as having Attention Deficit Disorder (ADD) and put on medication. She began to see a counselor who also had



ADD. There was some improvement on medication but nothing striking. Corey hated it because of the side effects—especially insomnia.

My partner, Leah, is a respiratory therapist at the hospital. She is in an awkward and uncomfortable position, as she must explain over and over to co-workers that her step-daughter got no prenatal care and the baby is in critical condition. Leah too feels shame and guilt, although in all fairness I have to report that she tried to convince me to force Corey to see a doctor and I resisted. She, as I told her later, was right. Her coworkers respond to our plight with love and concern. If they do feel judgmental, they don't show it, instead going out of their way to demonstrate understanding.

It is comforting, when we are visiting the baby, to know Leah is working nearby. I often page her and, if she can, she comes to the special care nursery. She is my island of safety in the world of seizures that trigger buzzers and bells and caretakers who, while kind and professional and savers of lives, don't know our hearts.

One morning, Leah is able to get away for a few minutes to attend the doctors' rounds on the baby. Corey is there in the special care nursery, listening. The doctors discuss the baby, using medical terminology unintelligible to most lay persons. Leah, who is observing Corey's confusion, asks "Do you understand what they are talking about, Corey?" Corey shakes her head sadly and the doctors then make a point to explain more simply. After they leave, Corey hugs Leah tightly and cries.

Simon, Corey's oldest brother who lives in Colorado, calls the hospital after receiving a message on his machine from Jonah, which simply says to call this number. Corey and Leah and I are sitting in her hospital room when the call comes in. Corey answers and chirps brightly, "I had a baby!" Leah gets up

and leaves the room, shaking her head in disgust at Corey's light, cheery tone. Corey chatters on about the baby and his birth and how big he is.



I ask to talk with Simon and I break the news of how sick the baby is. Simon is very worried about Corey and the baby and wonders if there is some kind of in-patient treatment program available for people like Corey.

Corey decides to name the baby Alexander James—"after two kings." We go to the special care nursery and ask to have his name put on his bed, like the other babies. Many times over the next few weeks as Alexander struggles to live, Corey repeats, "At least he has a name—and he is named after two kings." It is as if his name might protect him. She writes him a letter, explaining where his name originates.

The neurologist comes into Corey's room on the third day after Alex's birth to tell us that the baby's EEG looks very bad. The baby, if he survives, will most likely be severely brain-damaged. He is very sorry to have to tell us that but he believes in being honest. While I appreciate his straightforward approach, my heart breaks. I can feel it crack open and bleed—as it has done on occasions before. I rub the middle of my chest to comfort it, but there is no repair for this kind of despair, except time. Corey's heart breaks open then, too. For the first time she seems to understand the enormity of what has happened.

"I probably caused this," she sobs. And I am torn between wanting her to really feel this pain so that she will make sure it never happens again, and wanting to comfort my baby whose heart is broken.

I go home and write a letter to Corey. She has never been an oral learner—always needing to see or touch to learn. I think in a letter I'll be able to say more clearly what I feel she needs to hear—that she has created havoc in the lives of her parents and stepparents, brothers, and extended family. And now, another family member, an innocent baby, has been harmed. She needs to make significant changes in her life. And, I love her forever with every cell of my body and heart.

I call my mother to update her. She struggles with how to respond to the situation. She has to decide which of her friends to "come out to" about this latest crisis of her youngest daughter. Unlike the necessity for Jonah to have a kidney transplant a few years earlier when he was only 21, this crisis carries with it a moral element. There is a question of control. There is a question of whether it could have been prevented. Whom do you trust to hold their judgment in the light of love and charity?

By eighth grade, Corey was falling behind, and the school finally agreed to do an M-team evaluation. She would have to be two or more years behind her grade level in at least two subjects to qualify for any help. The results came back that she was spelling and writing at a second-grade level. In contrast, her understanding of general information about the world was above 12th grade level. She qualified for an Individual Educational Plan. She would be allowed to study in a small quiet resource room instead of a large study hall. She would take tests there, too. She would not take any oral tests.

Adolescence had hit with a bang. She threw temper tantrums, slammed doors, screamed at her brothers for being too loud (oblivious to her own high noise level), and kept the rest of us on tiptoes. Leah and I were just newly in love—me after a traumatic break up of an 11-year lesbian rela-

tionship that had created two additional children—Robin and Noah.

Corey's ability to read social cues was poor. She had always had trouble with wetting and soiling her pants and now menstruation was further complicating the hygiene mess.

Her broad interests grew—she read about astronomy (and was given a telescope), Greek mythology, and Native American lore and was fascinated with the history of wars, especially World War II. She was an incredibly independent child, taking the bus to swim team practice beginning when she was only eight. She began to devour my Ms. Magazines when they arrived in the mail and was a natural-born feminist. She was teased meanly that year about having a lesbian mother. A "friend" told her, "and the apple doesn't fall far from the tree." Through our tears of anger, we laughed together about the fact that she was adopted and we joked about whether the orange fell far from the apple tree. We had thoughtful discussions about abortion, racism, and homophobia.

On her third day in the hospital, Corey wonders aloud why her younger brothers haven't been to visit her and Alex. She is hurt. I realize I haven't encouraged them to visit, too overwhelmed with my own confusion to reach out and comfort them in theirs. They are at their other mother's house for a few days now and I am relieved at not having to care for them. But I dutifully call them there and suggest that they need to go visit. Noah is eager to see the baby even though I explain how sick he is and how many tubes he has in him. After his visit, Noah (who is 12), begs Leah and me to adopt the baby. "I am an uncle," he says with reverence. Noah, who volunteers at the YWCA doing child care, wants to have a day care when he grows up. Once I told him that I thought he would be a great father someday. "Maybe," he replied wistfully, "but I'll have two problems. First, I won't want them to ever grow up. And second, I'll probably give them everything they want." When we tell Noah that we simply cannot adopt Alex because we are too old and Alex needs young, energetic parents, Noah resorts to trying to get his other mother, my ex-partner, to adopt him.

Robin, who is 17, is reluctant to visit. He is frightened of hospitals and needles and sickness. And he is confused about how to connect with Corey because he feels angry and upset about her lack of prenatal care. One night he asks if he can tell some of his friends. I tell him, of course, he can tell whomever he wants if that will help him take care of himself. He does ask two friends to talk with him and tells me how he cried about Alex and couldn't stop. "I guess some people think it's wrong and embarrassing for a guy to cry, but I didn't really care at all," he relates. He says they were very caring, letting him know that it wasn't his fault but that he needed to be there for his family now. Robin does eventually visit Corey and Alex and every night for weeks, Robin prays for Alex's recovery.

Every day, Corey and I (and often other family members and friends) go to the special care nursery, scrub our by-now raw hands, and visit Alexander. He is loaded up on Phenobarbital and another anti-convulsant, his ventilator giving him nitric oxide to coax his lungs into working, and IV painkillers. He is puffy with liquids. I suggest to Corey that she let him know that he can go if he needs to. I sit on a rocking chair and watch her tearfully tell him that he can let go if he needs to, that she won't be mad at him, that she loves him. And later I hold his fat little hand and sing: "Hush a bye, don't you cry, go to sleepy little baby. When you wake, you shall have, all the pretty little horses."

We discuss organ donation. We discuss what to do if he dies. Corey's grandmother has offered to have him buried by his great granddaddy. We discuss cremation.

Alex lies coma-like. We touch him (we can't hold him because of the ventilator). We comment on his beautiful chubby cheeks, his flannel-soft skin, his big toes (not like Corey's little stubby ones), his dark hair (like Corey's). I think he may be Corey's guardian angel—here to force her to get control of her life. Or perhaps he is a guardian angel for all of us as he changes our lives by his very presence. I fall deeply in love with him, as does Corey. I write in my journal:

"Life feels way too raw right now. I'm afraid I will bleed to death from the wound. Please, Spirit, give me some light to bask in. Help me. Are you sure you haven't given us too much?"

And I ask for a Sign.

Corey leaves the hospital and comes to stay with Leah and me, always a stressful situation. I go back to work. We visit Alex daily.

Corey has been meeting with an adoption worker recommended by the hospital social worker. Corey has told her that her first choice would be to place Alex with a gay or lesbian couple. She explains that it is more difficult for them to get babies and, since she grew up in a lesbian home and it was a good experience for her, she'd like to give Alex that chance, too. To her credit, the social worker doesn't miss a beat and assures Corey that she has worked with gay and lesbian couples. "But the most important thing is that he have a loving home. . . if he lives," Corey concludes.

When Corey entered 10th grade, Leah and I were building a house in the country. The house wasn't done by the time school started in August, so I decided to drive Corey to her new school every day so she could begin the school year there. We were up and on the road before the sun rose because she had swim team practice before school. All the way out there Corey would cry and tell me she didn't like it. I would

try to be encouraging and let her know that if it didn't work out, we would do something else. "But everyone in the school is white," she wailed. After dropping her off at the pool and smiling encouragingly, I would cry all the way back home. I thought, "What am I doing to my child?" I figured my car would be the only car in Minnesota that rusted from the inside out-from my tears. One morning on our drive we noticed a truck ahead of us with a pink triangle on the bumper. Both of us perked up. I drove faster and pulled into the lane next to the truck. "It's my homeroom teacher!" Corey exclaimed with excitement. I later heard from this teacher that Corey walked up to her in school and exclaimed, "Hi, Ms. Smith. I like the pink triangle on your truck! My mom is a lesbian, too!" By the time we finally moved into our new house, Corey had adjusted to her new school. It was going to be OK after all.

One morning I call to check on Alex. They have been weaning him from the anti-convulsant drugs to see if the seizures are over. So far, so good. His nurse can barely control her voice on the phone. "Have you heard from the neurologist?" she asks. "No, we haven't." "Well, they did another EEG and it was normal!" she bursts out. I am stunned. I think-I guess I got my Sign. When I get off the phone I tell Corey and we hold each other and cry. Later the doctor explains that we won't know about possible damage now except as the baby develops. He could have cerebral palsy, epilepsy, ADD, learning disabilities—but this normal EEG is still the best imaginable news.

Over the next few days, the pulmonary specialists are able to wean Alex off the ventilator. We can hold him for the first time. He isn't sucking well, but they are working with him. He will be able to go home soon. Home—wherever that is.

On the day the foster mother is taking Alex home from the hospital, Corey and I are there to meet her. We stop at a baby store on the way to buy him a special quilt. The store owner congratulates us and chatters on about what a happy time this is. Corey seems to enjoy the attention she gets when people like this unwittingly babble on about the joys of having a baby. But I am uncomfortable and depressed. I'm afraid Corey will blurt out something about giving him up for adoption, but she doesn't.

We enter the special care nursery for the last time, dropping off flowers for the heroic and wonderful personnel. The mood is festive. It is amazing and wonderful that this baby, who had been on the verge of death, is leaving the hospital with a guarded but good prognosis. But Corey and I are not festive. Corey holds him and talks to him while the foster mother takes care of business. Then it is time to go. Corey hands him over and runs out crying. As I head out to find her, the unit clerk says, "Oh, congratulations! How wonderful!" I thank her hurriedly and rush out to find Corey sobbing in the arms of Noah, who has come to say goodbye to Alex. He is tearyeyed.

Corey is able to move back into her own apartment, which is so filthy and trashed that I am revolted. She has been living (astonishingly) with an equally messy roommate. Now she must clean up to move out. Her lease is up, and her Dad and I are encouraging (coercing?) her to move into her own efficiency apartment since she has had nothing but trouble with roommates in the past. I look around, almost sick to my stomach. There are boogers wiped on the wall. Pizza boxes with decaying food scraps, apple cores, and other food items and packages are strewn across the living room and bedroom floors. The burners on the stove swim in evil-looking black goo. I feel like I am leaving her off in a war zone.



Corey graduated from high school. Leah and I, her father, and my mother proudly watched her get her diploma. She lettered in swimming and participated in band. As she showed us her diploma, I breathed a sigh of relief. How naïve. How premature. She was accepted and went off to college half way across the country to a place she had never seen and where she knew no one. She had chosen the small, state school on her own—and it seemed a reasonable choice. We encouraged her to get in touch with the learning disabilities center to get the extra help with motivation and organization challenges. We would soon discover that she didn't take our advice. While she spoke of friends in the dorm and seemed to be having a good time, at the end of the year she was suspended for poor academic performance. During the year, her father and I both called her academic advisor, but she could give us no information. Corey was an adult and, therefore, as I've told concerned parents in my own role as an academic advisor, entitled to confidentiality. She returned home and took a job bagging at a local grocery store. Living on her own, Corey would sometimes forget to take her medication for her muscle disorder. She had given up taking her medication for the ADD as soon as she turned eighteen. One time, her muscles became so weak that Leah and I had to rent a wheelchair, carry her into our downstairs family room, and help her eat and drink. She had gone for a month without refilling her prescription. In a week she was up and out, with admonishments to keep up on her medications.

Leah suggests that Corey's families meet to do an "intervention" with her. And so Corey's dad and his wife, Leah and I, and Jonah, Corey's only adult sibling who lives in town, meet with Corey at a room in the hospital. We want her to hear how her decisions have impacted our lives. We are a motley bunch, steeped in a history of mistrust and betrayal, with long-term and short-term relationships with Corey and each other, and yet we pull together with an urgency and mutual desire to stop the pain and never-ending crises in our lives. We are desperate for Corey to hear and understand our wretchedness. As Jonah later notes, everyone there had very different personalities and approaches, but we all knew the stakes were extremely high. Corey cries, but will it lead to actual positive changes?

A book I am reading on Buddhism speaks to my condition. It says that we must surrender our obsession with outcomes (which we cannot control) and concentrate on making the right decisions, moment by moment. I think I will die if I give up the hope that Corey will learn to make better choices.

After bagging groceries for several months, 21-year-old Corey decided to move back to her college town, work for a while there to get residency, and then go back to school. It seemed like a decent plan. She took off in her father's old car and I breathed in my hopes and fears for her. She had somehow accumulated a huge phone bill. Creditors were hounding us. I finally paid one bill and recorded what she owed us. One of the bills was to an 800psychic. Corev swore it wasn't hers. Leah and I had all 800 calls blocked on our phone line. By the time Corey left, the arguing between Leah and I had intensified so that life felt like sleeping on a bed of nails. We recklessly embraced the illusion of calm created by distance. Distance became the false dream of launching her into adulthood.

Corey and I visit Alex in his foster home. His foster parents have cared for over 300 babies! Foster mom remarks that Alex may be the hardest one yet. He is fussy, cannot entertain himself, and wants to be held constantly. He continues to have difficulty with sucking and digesting. We take pictures. He smiles! His foster mother says, "When he is good, he is really, really good. And when he is bad, he is really, really bad."

Corey hasn't chosen an adoptive family yet. There is a lesbian couple that may want him, but they are worried about his prognosis. Corey chats with the foster parents about this as if it were an everyday occurrence. I slink down inside myself. On one hand I admire her lack of concern about others' judgments. On the other hand, I am frightened by her inability to pay attention to social cues.

The phone rang and Corey, having been back in Colorado for two months now, was sobbing, "I can't get a job here and I don't have any money. My boyfriend wants me to go home to Maine with him and I don't know what I should do!"

"Boyfriend?" I said, terror rising up inside my gut. I tried to discourage her from traipsing across the country, following a young man she just recently met. I urged her to come home. "There are plenty of jobs available here," I advised.

Corey is wavering about the adoption. She thinks maybe she should try caring for Alex. She is afraid he won't know that she loves him. We meet—her father, Leah, Corey, and I-in her father's cramped offices. Boxes are piled in the room since the business is moving, echoing the disruption in our lives. We tell Corey bluntly that we cannot support her keeping the baby because we believe the baby will be better off with adoptive parents. Later that evening I call my dear friend who lives in another state. She says, "If circumstances were different for me right now, Iwould take him." "You're too old, too," I reply jokingly, but feeling rebuked. She, like many people, would never push a family member to give up a child for adoption. I am push-

ing. I search my heart concerning that ageold question of sacrifice. Of course, parenting, and partnering, too, sometimes requires sacrifice. I grapple with the complex and unanswerable question that social workers must constantly confront in our work-What is in the best interest of the child? There is no way to know how Alex will cope with being adopted. I feel pressured to act with conviction (although I don't feel it), aware that any hesitancy on my part will increase the confusion and pain for Corey, Leah, Robin, and Noah. I feel tremendous responsibility for making the right decision for Alex as well. I always had trouble with that part of the IQ test where they have pictures of hands in odd positions and you must identify them as right or left hands. Everything feels all twisted up with no clear answer.

My mother called me from Missouri. Did I know that Corey and her boyfriend, Sean, were on their way to her house? No. They were on their way to Maine and would be stopping at our house too on the way.

After a discussion, Leah and I agreed that, since we let Corey's older brothers bring their girlfriends here and stay together, we would be hypocritical not to allow Corey to do the same. She was 21, after all.

When Corey and Sean arrived on our doorstep a week later, Corey asked where to put their bags. "That depends," I began shakily,"...on whether or not you are sleeping together." "We are!" Corey replied cheerily.

"Well then, we have a rule in this family," I said, thinking quickly. "That is, if you are going to sleep together in this house, then you have to use protection. Because you aren't ready to be parents."

Corey assured me that they used protection.

Several hours later, Leah had to go out to get buffered aspirin for our dog who had sprained her ankle.

"Oh, do you think she could pick up some condoms for us?" Corey inquired lightly.

In an instant my thoughts swung from:

- 1. Thank God she asked—to
- 2. Oh my God, they haven't been using them—to
- 3. Heaven help me, I'm going to have to ask Leah to buy condoms!

We still laugh wryly about the night Leah made a trip to the store to buy buffered aspirin and (for the first time ever) condoms!

I visit Corey in her new efficiency apartment that Jonah helped her find. It is reassuring that she has no roommates to multiply the inevitable havoc. The apartment is so small that there is no space for chairs. We sit on her futon mattress on the floor. The apartment is still relatively neat and orderly. I am trying to work with Corey on some systems so she can remember to pay her \$2000+ phone bill in installments to the collection agency, take her medicine for the muscle disorder she inherited, get to her doctor's appointments, and take her Depo-Provera shots on time. She mentions that she brought Alex to her apartment for an afternoon. "I needed to talk to him and let him know how much I love him," she explains. The TV is on—white noise to her—and I look at it, muscles tense, and think about how no one taught me how to act in this kind of situation.

The lesbian couple has decided not to adopt Alex due to his potential long-term disabilities. Another couple, friends of a friend, has not yet pursued the adoption, although they sounded so eager a few weeks ago. The adoption social worker is getting anxious. They are paying for foster care and Alex has been there for two months now. She explains that Corey needs to choose an adoptive family

before she can set a court date and move forward with the termination of rights. I urge Corey to make an appointment to meet the couple who is still interested—a young man and woman who are happy to take a special needs child.

In September, 1998, when Corey and Sean left our house for Maine, Leah and I once again breathed anxious and troubled sighs of relief. Once again, distance brought with it some respite. And, surprisingly, we found that we liked Sean! He and Corey seemed like a good match. Corey called, telling us that she and Sean were living with Sean's mom and two brothers in their trailer home. They were looking for their own apartment. They found jobs in a grocery store.

After a couple of months they found a little apartment on an island off the coast of Maine. Corey reported it was so small that they could only fit in a single bed. Corey's phone calls home were full of work woes and social problems, but she and Sean were getting along well, as far as we could tell.

Corey and I are on our way to meet the prospective adoptive parents. We have made a list of questions. We are both nervous. What if we don't like them—or they don't like us? After being lost for some frantic moments (Corey forgot to bring the address of the adoption agency office), we arrive. The adoptive parents sit together on a couch with a pile of scrapbooks. After our awkward swap of information, which takes about a half hour, Corey hugs them. We are all teary-eyed. We are dealing with a child's life. In the bitterly cold parking lot afterwards, Corey chokes and cries in my arms. "I never knew a little baby could break your heart like this!" she wails. And I hold my baby close and cry and think, "Oh yes—how they can break your heart!"

At age 22, just over a year after Corey went to Maine with Sean, she called to say he had broken up with her and her car had died. Her dad and I spent many hours helping her find a car, sending her money to pay for it, and figuring out how to get her home. She stayed with Leah and me as she was no longer allowed to stay in her dad's home.

At one point, her dad asked her three times if she had purchased car insurance. Each time she said yes—even the third time when he told her he was going to call the insurance agent to be sure. When he called the next day, the insurance agent said that Corey had not yet purchased insurance and that the offer would be withdrawn at the end of that day. Her dad immediately picked her up at work at the grocery store and took her over to buy it.

I am meeting Corey at the lawyer's office before she goes to court to terminate her parental rights. They have not found the birth father, although all the legal protocol was followed. Corey has never talked with me about him—saying only that she slept with him just one time and he was a jerk. When I asked her if she had been raped, she said no. But the rest of what she said was only for the adoption social worker.

The lawyer gives Corey a copy of the questions she will ask in court and they go through them. Has anyone coerced her in any way to give up the baby? I shift uneasily. Does she understand what she is doing today? Is she aware that there are services available to help her if she wants to keep the baby?

Afterwards, we walk to the courthouse. When we are in the courtroom, the lawyer requests that Corey be allowed to testify from the table with her. The judge agrees. I sit alone in the wooden benches on the left side. On the right side, the adoptive parents sit. Corey has invited them to come so that they can "know everything." The adoption worker,

who sits at the front table because she will testify, offers tissue to the adoptive parents and to me. The judge is the same one we had when we adopted Corey 23 years ago.

The lawyer explains that Corey has a copy of the questions to accommodate her disability. She cannot follow oral questions. Corey sits stiffly and answers the questions quietly but firmly. The adoption worker testifies that she believes it is in the baby's best interest to be adopted. She notes that the foster mother agrees. The guardian *ad litem* concurs. The judge notes that while this was clearly a difficult decision for Corey, she appears to be firm about it. He terminates her rights.

Corey rushes into my arms and we cry. This is Corey's birth child—my first grand-child. We love him.

Back at home, in November, 1999, and still mourning her break-up with Sean, Corey found an apartment with a friend and moved out of our house. She worked in an upscale grocery store for several months but was eventually fired for problems with customer service. However, after a month or two she found another, higher paying job doing sorting and organizing in a biotech company. It seemed to be a good fit—no customer contact. And she would get health insurance from the beginning—a wonderful perk.

She had begun to put on a lot of weight. Leah and I wondered if she could be pregnant. When I asked Corey about it, she said she couldn't be pregnant because she hadn't slept with anyone since she and Sean broke up. I asked her if she was having her periods and she said she was. Leah and I had discussions about whether people put on weight all in the stomach like that. I thought it was possible. Leah didn't. And Corey continued to grow.

Corey and the whole family attended her brother Simon's beautiful outdoor wedding in August, 2000. Family connections were strong. Simon's new wife, Kelly, told him she thought Corey was pregnant. But I continued to ask and Corey continued to deny. It had been over nine months since she had left Maine, so she couldn't be pregnant by Sean, I reasoned.

On November 13, 2000, Corey came over to our house for dinner. Afterwards she said her stomach was upset. I asked her again if there was any possibility that she could be pregnant and she said no, curtly. She left shortly after dinner to go home and lie down.

After court, Corey and I drive to the foster home. Alex, who now has a new name, will be going home with his new parents. Alex is all smiles and laughs. I hold him and he beams up at me impishly. He likes to try to stand and march on my lap. I love to touch him and smell him and soak him up into my senses. The adoptive parents give Corey a silver heart locket with Alex's pictures—and an album of additional pictures. As we prepare to leave, Corey hands Alex over, saying, "Here is your new mommy." We leave, weeping. But Corey says through her tears, "I feel happy." And I know what she means.

Last night, Corey called. She had received some new pictures of Alex. He was four months old now.

"Hi, Mama!"

"Hi, Corey. How's it going?"

"Fine! When can we get together?"

Postscript:

Although we did not seek additional professional support during the height of this crisis, Corey has seen a psychologist who specializes in ADD (and who has ADD himself) in the aftermath. For a while, her father and I also paid for an ADD coach, a relatively new kind of helper, who worked with Corey to create structure and organization in her life. Corey has seen many counselors over the years and her favorites were the two who also

had ADD, perhaps because they challenged the shame she felt and modeled the ability to overcome.

I too have seen counselors at several times in my life. Last year I went to a counselor for several months and found the work tremendously helpful.

But perhaps the most therapeutic action I took to integrate and grow from this crisis was writing this paper. I began writing over winter break, two months after Alex's birth, and finished a draft during spring break. Then I sent copies out to many people, friends and family, asking for feedback. The richness of the resulting communications helped my healing process. It was a way to honor and examine my pain and to work through the trauma, and it became a powerful positive force in my life. The writing itself was transformative, and I am grateful that I listened to and honored my need to get it out onto paper.

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