



When you are  
matched...

A step along  
your adoption  
journey



# Congratulations you have been matched

Please note that we did not say, congratulations you are adopting a baby. You will find that we will try to do our best not to congratulate you on adopting until your baby is in your arms. There are several reasons why:

1. The expectant parents are the baby's parents until they choose to sign their adoption papers.
2. The expectant parents should be treated as such not only for the legal reason above, but because they have the right emotionally as well to change their mind about their adoption plan.
3. You may change your mind. While that might sound shocking now ~ this has occurred. Perhaps something unforeseen happens in your life or the expectant parents receive a medical diagnosis not previously known that you are uncomfortable with, or the baby is born with special needs that you feel you could not handle.



It is important that you, as the prospective adoptive parent(s) realize that though the match is a part of the adoption journey, it is not the end of the journey. It is a time to be happy, it is a time to celebrate as it is a step toward adopting, but it is not a definite plan. While you should remain positive, somewhere you need to reserve a little bit of your heart to remind yourself and to understand that a match may not turn into a placement.

## Match Paperwork

In addition to this book, you have also received lots of paperwork regarding your "match." This paperwork will include a Match Letter, Match Form and Financial Risk Statement and may also include background and medical information on the expectant parents.

It is very important that you carefully review all the paperwork you receive and to keep a copy.

## Sharing the news

It is a very personal decision whether or not to share with family, friends and co-workers that you have been matched. There are several things to consider when deciding who you may choose to share the news with:

1. If you plan on taking time off from work, when do you need to prepare those at your place of work?
2. If you require child care for other children you are parenting, when do you need to arrange things if you suddenly get a call that the expectant parent(s) want you in



Dear Prospective Adoptive Parent(s):

Congratulations! Please be advised that you are currently matched with a pregnant woman (expectant parent) who is hoping to make an adoption plan for her child. This is your Match Letter. In addition, you are receiving a Match Booklet entitled, *When You Are Matched - A Step Along Your Adoption Journey, Expectant Parent Background, Packet(s), a Match Form, and a Financial Risk Statement*. Please sign and return this Match Letter, as well as the Match Form and Financial Risk Statement to the Agency **within five business days**. Please keep a copy of all of these documents. Any additional information we receive, including medical information, will be forwarded to you upon our receipt.

While we have already reviewed the case over the telephone, I would like to again review the following information with you:

### 1. Medical Insurance Coverage

Whether or not you were told that the expectant mother has Medicaid or insurance or is in the process of applying for such medical coverage, it is important for you to remember that Adoption STAR ("The Agency") **cannot** assure you that there will be no pre-natal, birth, delivery or post partum medical expenses due or co-pays due. If a birth mother does not qualify for Medicaid or a similar insurance plan, or she fails to participate in applying for coverage or denies coverage, you will be responsible for the medical bills associated with the pregnancy and birth, if she places the baby with you. These bills can range in amount to \$0 - \$10,000+. The Agency works hard to determine if there will be bills and attempts to estimate the cost of these bills, but sometimes we are unaware that there are medical costs until after placement.

### 2. Expectant Parent Living Expenses

Legally allowable expectant parent living expenses often include but may not be limited to: rent, utilities, food and maternity clothing. In your case, the expectant parent(s) may

- the delivery room or the baby has been born and the expectant parent(s) wish you to visit the baby in the hospital?
3. If you tell your family and friends will they be supportive of you during the match period and if the match falls through?

## Meeting the expectant parents

<p><b>Prior to birth the expectant parent(s) would like to*:</b></p> <p><input type="checkbox"/> Meeting with the adoptive parents</p> <p><input type="checkbox"/> Telephone calls      <input type="checkbox"/> E-Mails</p> <p><input type="checkbox"/> Have prospective adoptive parent(s) in labor and delivery</p> <p><input type="checkbox"/> Have prospective adoptive parent(s) visit in the hospital after delivery</p> <p><input type="checkbox"/> Other:</p> <p><i>*This could change prior to birth or surrender.</i></p> <p><b>Post Adoption Contact Agreement (PACA)*:</b></p> <p><i>Currently the expectant parent would like the following PACA with the adoptive family:</i></p> <p><input type="checkbox"/> Receive photos      <input type="checkbox"/> Receive letters and updates</p> <p><input type="checkbox"/> Send their own photos, letters, and gifts to adoptive family and child</p> <p><input type="checkbox"/> Telephone calls      <input type="checkbox"/> E-Mails</p> <p><input type="checkbox"/> Visits with the adoptive family and child (approximately ___ visits per year.)</p> <p><input type="checkbox"/> Other:</p> <p><i>*This could change prior to the birth, after birth and prior to surrender.</i></p>
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Now that you are matched you may have just learned that the expectant mother wishes to meet you. How exciting. How nerve wracking.

Sometimes the meeting includes the birth father and sometimes other birth family members. The agency will prepare you for what to expect, to the best of our ability, but please

be aware that we KNOW that you will be nervous. You will wonder what to wear, how to act, what to say, what not to say.

Our best advice is to just be you. Dress casually if that is who you are or dress up if you feel it is the occasion to do so. Act as you would to any extended family member. If you are a hugger, then hug the expectant mother! Try to sit close and to remember that you are not being interviewed. You were already selected! She just wants to meet you. With that said, please don't interview her. Leave the hard questions to the agency.

This is a time to get to know each other. It is an awesome experience to meet each other. Bring a camera, though we can't promise that the expectant parent will let you take photos of her, it is encouraged by the agency to begin your baby album by having photos with you and the child's birth mother.

Most importantly, remember the expectant parent will have the same fears that you do. She will ask what she should wear, what she should ask and she will definitely wonder, "what if they don't like me?" You are probably worried about the same thing.

These meetings are so neat for the agency staff too as right in front of our eyes, we see two groups of strangers meet each other and within less than five minutes, you feel like you have known each other forever. It isn't that you have learned that much about each other in such a short time, but rather it's a feeling, a connection that brings you together... and it is just so special.

During the meeting we encourage you to share information about yourselves and show the expectant parent that you are interested in her, not just the baby. Also, even if you are open to post adoption contact, it is important to not make promises you cannot keep. Often, we get so emotional and excited that we make promises that may not be realistic. Take time to get to know each other.

It is okay to laugh. Most likely you will giggle and laugh or even cry during your first meeting. All of this is okay!

The agency does its best to get you ready for your meeting and to follow up with you after your meeting. If you feel you need more support before and after, then please let us know!

## Post Adoption Contact Agreements

Domestic adoptions at Adoption STAR often involve agreements between adoptive and birth parents to maintain communication after the placement of the baby.

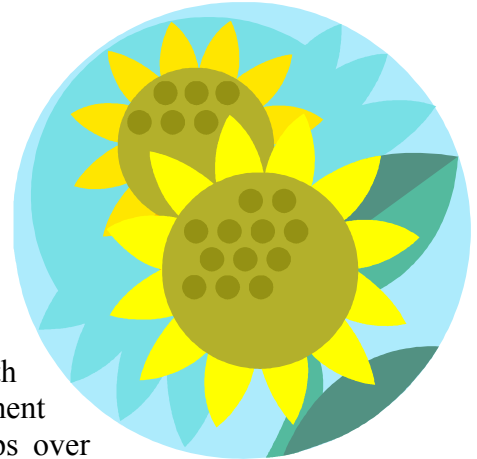
### Terms of Post Placement Contact

Ideally the kind and amount of post placement contact will be discussed and decided between adoptive parents and birth parents prior to placements. In many situations the post placement relationship will evolve to greater openness as trust develops over time. The agreement typically describes the type and amount of communication the adoptive family and birth family will have. It often addresses the sharing of photos, letters and communication through technology such as e-mail and social media.

There are all kinds of ways that recent technology can be part of post adoption contact. Some adoptive parents send videos to their child's birth parents, others exchange phone numbers, home addresses, e-mail addresses, and even "friend" each other on Facebook.

Whatever the method of communicating, it needs to be based on mutual respect and acceptance of reasonable boundaries. As you all have the child's needs and best interests at heart, so it is important to develop the kind of trust that makes your communications mutually satisfying. You should be aware of the recommendations Adoption STAR has made regarding utilizing social media and adoption: <http://adoptionstar.com/child-placement/adoption-and-social-media-recommendations-for-healthy-ongoing-communication/>

If you and the birth family have agreed to visits after placement, it is fine to begin meeting at the Adoption STAR office or with an Adoption STAR representative, but the purpose of these visits is for you and the birth family to develop a relationship on your own. Adoption STAR has developed a list of recommendations for creative and family friendly places to hold your visits. <http://www.adoptionstar.com/adoptive-parents/ideas-for-post-adoption-contact-visits/>



## Thinking of a name for the baby

Addison

Ben

You may have had a name in mind for your baby for a long time now. Or you may not have allowed yourself time to think about such a thing. Before you start naming your baby, there are a few things you should consider:

Charlotte

1. The expectant parents will be the ones to first name the baby. It doesn't mean that you need to keep the name they give to the baby, however we ask that you sincerely consider keeping the name, or at least in some capacity. You will often find adopted children with two middle names!

Devon

2. If this is to be an open adoption and you are lucky enough to meet your child's birth parents during the pregnancy, this is an excellent topic to discuss. Many of the children we placed have been named together by their birth parents and adoptive parents.

Emmalee

3. Your child's life does not start on the day you take him or her home, but rather it started before you even learned you were matched. It is a beautiful

way to preserve your child's biological heritage by asking the birth family to add to the name of the baby.

Flynn

4. Your last name is always given to the baby!

Gianna

## Sharing the birth of the baby with the birth mother

Sometimes an expectant parent asks the adoptive parent or parents to be in labor and delivery or a c-section with her. Everyone reacts differently to this request. You may have been dreaming about this opportunity or you may be dreading it. Please know that though the agency supports openness in adoption, we truly believe that the time in the hospital, including that of birth and delivery should be the birth family's time. We will carefully explore this request with the birth parent to be sure it is truly what she wants.

The experience will be amazing for you, but you will need to understand that you will see this woman experience a range of emotions aside from her physical pain. What you will see is what we see all the time. It is okay that they fall in love with their baby. It is okay that they hold their baby. It is okay that they cry. It is okay if she asks you to hold the baby. Because you will be together in this very intense time you will see and possibly learn things that is not known to the agency yet. You may feel intimidated, frightened and need additional support. It is important to realize that this is not a scripted experience, but one where anything can happen so it is important to accept the invitation to participate in this experience if you feel you are the type of person who can be very

patient, supportive, both physically and verbally to the laboring woman and strong enough to respect her possible roller coaster of emotions.

Even if you don't share the birthing experience with the birth mother, she may invite you to visit with her and/or the baby while at the hospital. It is important that this gesture come directly from her. If visiting, again confirm it is okay with her and call before all visits. Don't bring other family members with you. Hospital staff members are sometimes nervous that boundaries are crossed and the patient (birth mother) does not get the time she needs or wants with the baby. Remember, if the placement occurs, you have a lifetime with the baby.

## Planning for placement day

When the baby is born, it will no doubt be an exciting, emotional and overwhelming few days. This is often the hardest time for the baby's biological family and they will second-guess their decision. That is normal. That should be expected. The agency will provide you with the following information:



- ☐ BIRTH PARENT BACKGROUND INFORMATION (unless given to you pre-birth.)
- ☐ INFORMATION ON LABOR AND DELIVERY
- ☐ STATS ON BABY
- ☐ OPEN ADOPTION DESIRES OF BIRTH FAMILY (though you were provided this upon match, this may change after the baby is born.)
- ☐ PLANS FOR BIRTH PARENT TO SIGN ADOPTION PAPERS
- ☐ PLANS FOR PLACEMENT DAY
- ☐ DISCUSSION OF FEES DUE AT TIME OF PLACEMENT

The following is information that the agency needs from you before you sign your adoption papers and before you pick up the baby:

- ☐ NAME, ADDRESS AND PHONE NUMBER OF PEDIATRICIAN
- ☐ FULL NAME AND SPELLING OF THE NAME YOU WISH TO GIVE YOUR BABY
- ☐ ADOPTION ATTORNEY YOU WISH TO WORK WITH
- ☐ WHO WILL BE ATTENDING PLACEMENT DAY WITH YOU

The following are things you will need to bring with you on placement day:

- ☐ INFANT CAR SEAT (out of the box, and set up in your car. You will need to know how to use it!)
- ☐ BABY BAG
- ☐ INFANT OUTERWEAR (based on weather – hat, blankets, bunting, etc. The agency will provide you with a “going home” outfit.)
- ☐ PLACEMENT FEES INCLUDING POST PLACEMENT FEES - CERTIFIED CHECK
- ☐ CAMERA AND/OR VIDEO CAMERA
- ☐ FRIENDS AND/OR FAMILY (only if you wish and based on the circumstances and logistics of the day.)



☐ POSSIBLY A GIFT FOR BIRTH PARENT(S), such as flowers, candy, jewelry (with baby's birth stone, for example), photo album or frame, framed poem, an engraved gift, gift basket (bath and body spa products, etc.) or books (An adoption book or books, such as the following book, is a special gift to give.)

*A Birthparent's Book of Memories* by Brenda Romanchik - This beautiful package comes with fill-in-the-blank scrapbook pages for a birth parent to fill out. There are sections for explaining the birth family's history, the pregnancy, the adoption process, the birth, and more. The birth parent can one day return the gift to the child. This book and other adoption related books may be found at [www.tapestrybooks.com](http://www.tapestrybooks.com)

If you are traveling a distance to pick up your baby, below is an additional list that may help you prepare.

**Out of State Adoption Packing List:**

Prepared by Teri Henick, STAR adoptive mom

- ☐ DIAPER BAG WITH DIAPERING SUPPLIES
- ☐ BLANKETS: 1 REGULAR COTTON, 3 RECEIVING, 2 SWADDLE, 1 SMALL QUILT TO USE IN HOTEL ROOM AS A CHANGING PAD BASE
- ☐ WINTER COAT & HAT (AS SEASONALLY APPROPRIATE)
- ☐ NEWBORN HATS: ABOUT 5
- ☐ MITTS: 3 PAIRS
- ☐ ONESIES: 8-10
- ☐ GOWNS: 5-7
- ☐ SOCKS: 8 PAIRS PLUS ONE PAIR OF BOOTIES
- ☐ PJ'S: ONE PAIR
- ☐ BURP CLOTHS: 7-10
- ☐ OUTFITS: JUST A FEW ~ GOWNS ARE DEFINITELY THE MOST PRACTICAL FOR A NEWBORN.
- ☐ MICROWAVE BOTTLE STERILIZER OR DISHWASHER BASKET FOR PACIFIERS AND NIPPLES.
- ☐ BOUNCY SEAT: ASSEMBLED THERE. USED OFTEN IN HOTEL- ESPECIALLY HELPFUL FOR BABY TO SLEEP IN.
- ☐ INFANT CAR SEAT WITH COVER
- ☐ DIAPERS & WIPES
- ☐ DISPOSABLE INFANT WASHCLOTHS
- ☐ INFANT STAIN REMOVING PRODUCT AND DETERGENT
- ☐ IF TRAVELING WITH ANOTHER CHILD OR CHILDREN, PACK LITTLE "SURPRISES" TO OPEN ALONG THE WAY, INCLUDING A SPECIAL ONE FOR THE HOSPITAL. (A DOLL AND CAR SEAT LIKE MOMMY'S).

When you are traveling out-of-state for an adoption it is impossible to know how long you will be there. If you can, DEFINITELY stay close to the hospital the baby was born at in a SUITE (with a separate bedroom and a kitchen). Call the concierge at the hotel and tell them why you are coming. They have amazing connections and often have a soft spot when they hear you are adopting.

**I also brought with us:**

Directions! Go to the Chamber of Commerce website for the city you will be staying in. They have some great recommendations. Also, if you won't be traveling with a GPS (which I highly recommend) print out directions to and from hospital, hotel, and restaurants in advance.

**What we didn't bring:**

Formula- didn't know what kind she would be on. The hospital provided more than enough to get us through the week and then some.

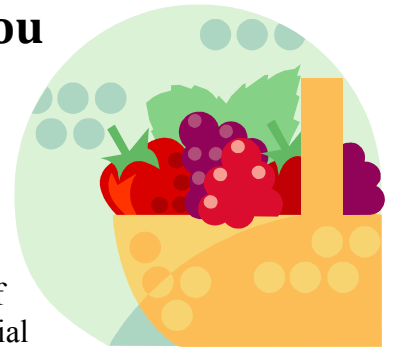
Pack and Play- it was too cumbersome. We just used her car seat and the bouncy chair.



## Who should attend placement day with you

Depending upon when and where “placement day” occurs, it is important to consider a number of things:

1. If you have a child or other children, it is often recommended that if they are younger than school age, they should probably stay at home with a family member or family friend. Why? Because placement day takes awhile, it is filled with signing of legal paperwork, discussing legal and other confidential information, and most importantly it is very emotional. It may involve meeting the birth parent(s) for the first time or witnessing the birth parents hand the baby to you. Though this sounds beautiful, young children need supervision and attention and the staff of the agency will need you to be focused on the paperwork, the birth parents and of course the new baby.
2. Where placement day may occur. If it occurs at the agency office, then it is more conducive to invite your family members and friends by providing a time for their arrival, such as after the birth family has left, after the paperwork is completed, etc. However if placement occurs at a hospital, for example, then only the adoptive parents will be permitted.



## Preparing for baby's arrival

Some prospective parents decorate the nursery and purchase everything they can before a baby's arrival. Others are more superstitious and just can't purchase one thing until after the baby arrives. Some of these behaviors come from family traditions or from religious teachings. Within adoption, it may be best to take the middle of the road approach. It is usually not suggested to prepare a baby's nursery prior to adoption placement. Unlike a 9-month gestational period, you have no idea when your baby will arrive. It is also emotional for many waiting parents to view an empty nursery. Though babies may not care what they sleep in, there are federal and state guidelines that require babies to sleep in cribs that meet current safety standards. Hand-me-down cribs most likely will not meet these requirements. Some good advice might be to register at baby supply stores or to keep a written record of the items, brands and quantities of items that you wish to be purchased. This list will be helpful to whomever you designate as "shopper" while you are busy picking up baby or as a gift list for those who wish to purchase something that you really want or need for baby.

The best way to prepare yourself for your adopted baby's arrival is to educate yourself about adoption, to connect with an adoption support group, and to talk with other adoptive parents who experienced "waiting" for their baby.

## Feelings you may be experiencing now

**Relief:** You are matched.

**Fear:** Perhaps you have been matched before and it did not lead to a placement. Our advice is to do your best to relax and to think positive thoughts. While a match is not a definite placement, it is a very positive step in your adoption journey. The majority of matches do lead to placements.



**Happiness:** Being matched and planning to adopt is a very joyous experience. But if you aren't jumping for joy, relax! Sometimes our bodies don't react the way we imagined them too. Often we are so overwhelmed by so many thoughts and feelings that we forget to relax and enjoy.

**Worry:** Adoptive parents worry about many things just as biological parents do. You will worry about the baby's health, growth, bonding, birth family, and if this is your first child, you may worry if you will be a good parent or be able to change your lifestyle to include this new family member.

These are just some of the many emotions you may experience. All of these feelings are normal. By talking about your feelings with your significant other, family members, friends, your adoption agency, physician and support group before, during and after placement will help you feel "normal." Finding support systems is paramount when becoming an adoptive parent. Even if this is not your first parenting or adoption experience, no two cases are alike and no two babies are alike. Finding a comfortable support system will benefit you! Talk to the staff at Adoption STAR if you need someone to talk to or if you need referrals to support groups and other adoptive families.

## Preparing for parenting

Now is a good time, if you haven't already, to begin thinking about what you need to know and do before your baby arrives.

It is time to identify a pediatrician if you haven't already. It is also a time to think about car seats and diapers and baby bottles. It is also time to educate yourself on "how to care for your baby." There are many classes offered at local hospitals on baby care, though they may not be adoption focused they may be helpful to you, but check their content before signing up. Adoption STAR runs a "Baby Care Class" geared specifically for those seeking to adopt a newborn, so check the agency calendar to see if one is coming up.

Even if the match does not lead to a placement, it is still worthwhile to begin your "how to care for your baby" education. Your best teachers are your family and friends who are already parents!



*The next few pages will briefly cover some topics that you should become familiar with before you take your baby home.*

## **Falling in love**

Some adoptive parents report falling in love with the child even before the baby is born. Others think they will fall in love with their baby at first sight. Sometimes that happens. Sometimes it may take time. Don't be concerned if you have mixed feelings at first.

Just remember that getting to know each other is the first step to falling in love. Right now you can only imagine what the experience of meeting your child will be like. Babies often surprise people. Newborns often have heads shaped oddly, are bow-legged, have lots of hair or no hair at all. Their skin coloring may be odd at first because they are brand new. Belly buttons look awful and their skin may be wrinkled or flaky.

Falling in love with your baby may take time and that's okay.

### ***Babies have many different behaviors***

Some babies are described as active and move a lot. They wave their arms and kick their legs. Others are very quiet, very calm and sleep a lot.

Some babies sleep and eat on a schedule. Others do not.

Some babies sleep through the night quickly. Some do not.

Some babies like outings and new adventures, and some take a long time to warm up to those experiences.

Some babies have long attention spans and others get bored quickly.

Some babies cry often and need calming. Other babies may find ways to calm themselves, such as sucking their fists.

Some babies are cuddlers and some are squirmers.

You may question, *"Does my baby behave this way because she is like her birth family, because she may have been prenatally exposed to substances or because of the way we react to her?"* Is there an answer to this question? Perhaps the answer is yes to all those questions. Or perhaps the baby is behaving the way she does "just because" it is who she is. As adoptive parents we must be aware and consider all possibilities, but we must also not overwhelm ourselves with concern for what appears to be behavior that many babies experience.

If ever there is a concern about your baby's behavior, without hesitation, you should contact your family pediatrician.

# Baby Care

Feeding, diapering, bathing and dressing your baby are important and necessary childcare steps and ways to get to know each other. But there may come a time when you don't know what your baby needs or wants. This is not only common with adoptive parents, but biological parents go through this too. Just because you did not physically give birth to this baby doesn't make you any less skilled in caring for him or her. It is okay if you are new at this and feel worried. Remember that you are not alone and you can receive lots of information and support from Adoption STAR, your adoption support group, your pediatrician, family members and friends and from your new baby too.



## ***Babies will try to let you know what they need by crying***

Consider many things if your baby cries. When was the last time the baby ate? Did the baby burp after feeding? Does the baby need a diaper change? Babies cry when they are lonely, sick, cold, hot, colicky, over stimulated, in pain and sleepy. Sometimes babies cry when they don't "need" anything. Babies often need to get rid of energy when they have too much of it. Many babies have "fussy periods" everyday. You may begin to realize that this period shows up around the same time every day. You will get used to your baby's cry and begin to notice if his cry sounds different which may indicate that he is not feeling well.

When you find that you are having trouble consoling your crying baby, try gently rocking your baby. A rocking chair is a wonderful thing to have! Sing or talk softly to your baby. Play music for your baby. Take a walk with the stroller or a ride in the car. And lastly, picking up a crying infant will not spoil him.

# Feeding

## ***Breastfeeding***

Adoptive parents are often surprised to hear that they may be able to breast-feed their adopted newborn. However, since preparations need to be made, this plan needs to be well established prior to picking up your baby. For more information on adoption breast feeding:

### Books:

#### Breastfeeding the Adopted Baby

Debra Stewart Peterson

Corona Publishing Company, 1995

Some people are surprised to find out that you do not need to have been pregnant in order to breast-feed. This book gives practical information and emotional support to breastfeed an adopted baby.

### Nursing Your Adopted Baby

Kathryn Anderson

La Leche League International, 1986

### The Nursing Mother's Companion 4th Edition,

Kathleen Higgins

Though not specific to adoptive nursing, it is an excellent resource book for breast feeding.

### Internet Support:

Adoptive Breastfeeding Resource Website

<http://www.fourfriends.com/abrww/>

Adoption and Breastfeeding Information and Support

<http://members.tripod.com/~Darillyn/>

Adoptive Breastfeeding Information from the La Leche League

<http://www.lalecheleague.org/NB/NBadoptive.html>

The Care Connection ~ Lactation and Wellness Center (located in Amherst, NY)

<http://www.careconnectiononline.com/>

### ***Formula feeding***

There are three basic types of formula: ready-to-feed, concentrate, and powder. Ready-to-feed is usually considered the most convenient because you just pour from the can and serve. Ready-to-feed can come in large and small sizes, the small cans make it easy to travel with. Concentrate takes a little more effort as it must be mixed with an equal amount of water before feeding. Powder must also be reconstituted with water, but has the advantage of a long shelf life in the can. Powder is also lightweight and handy for travel (as long as you have water easily accessible to you.). Each formula type is nutritionally equal and your choice will simply depend on your needs and lifestyle.



There are many brands of formula. Your infant will be discharged to you with a specific brand of formula. This formula was given to the baby from the hospital. Discuss the formula and its preparation with your pediatrician. Do not change formulas without first discussing it with your pediatrician. If your baby is doing well on a particular formula there may be no reason to switch the brand.

Sterilize all bottles, nipples, rings and preparation utensils in boiling water after purchasing them and before offering them to baby. Always wash your hands with soap before handling the clean bottles and before feedings. Before mixing a bottle of formula, be sure the water you are using is healthy. If you have well water make sure you had it

checked out. The use of tap water is usually fine. If you choose to boil water, cool it before mixing formula with it.

Formula should be warm or room temperature, not hot. Be sure to check the temperature of the formula on the inside of your wrist before feeding to the baby. NEVER heat formula in the microwave as it heats unevenly and creates "hot spots" that you may not determine when testing it.

Remember not to re-use formula once your baby has eaten from that bottle due to bacteria growth. Store prepared formula in the refrigerator for up to 24-hours.

Many babies spit up after they eat. You may use a bib or a cloth under the baby's chin. Babies usually feed every two to four hours during the day and on demand during the night. Newborns consume 2 to 3 fluid ounces during each feeding. This quickly increases as the baby grows. Babies usually let you know when they are full. He may turn away from the nipple or simply stop sucking. Gas bubbles can make a baby feel full before they have had enough so try burping and then offer the bottle after burping to see if the baby wants more. Burping your baby halfway through and at the end of each feeding is recommended.

For the first few weeks, a newborn may eat eight to twelve times in a 24-hour period; older babies eat less frequently. Each feeding can take 20 minutes or more depending on how vigorously your baby eats.

New parents often wonder if the baby is eating enough. It is easy to measure the outcome. Keep track of the amount of formula the baby consumes in a 24-hour period (your pediatrician and your post-placement adoption worker will most likely ask you this question so it is good to have the information at hand.) You can also keep track of the number of baby's wet and dirty diapers. Also weight gain is the best indicator that your baby is getting enough to eat.

Remember during infancy it is not necessary to offer your baby water, often this will fill him up and then he may not be interested in taking the formula he needs.

The use of pacifiers is strictly up to the parent. Just remember NEVER to tie a pacifier onto the baby or around the baby's neck.

## **Sleeping ~ For Baby and Parents**

### ***Baby***

It is common for a newborn to have his days and nights mixed up. Most babies take frequent short naps and have one longer sleep period. If you notice your baby's longer sleep period occurring during daylight you may need to teach your baby the difference between day and night. Some suggestions include, not letting him sleep longer



than four hours between feedings during the day and when the baby is awake during the day keep him a part of the house hold and family activities. Also don't try to reduce the noise while he is sleeping. Babies can easily get accustomed to the normal "daily" noises of telephones ringing, vacuum cleaners, door bells and siblings playing. He will adjust to his environment and be able to sleep through the "noise."

At night you will want to reduce stimulation and keep the lights low. Feed your baby on demand and infants should not be wakened unless it has been six hours or more between feedings. When your baby wakes for a feeding have all the supplies ready so you won't have to spend time preparing everything. Speak in a softened tone, cuddle, and feed baby in a darkened room and after the feeding return baby to his crib. This will teach baby that at night or when it is dark, it is not the time to play, but to feed and return to sleep.

### **Adoption STAR Safe Sleeping Policy**

All families affiliated with Adoption STAR will receive information on safe sleeping, baby care, and crib safety which supports an infant sleeping in an approved crib, not a "family bed" to assure the infant's safety and reduce the possibility of SIDS. Additionally, all adoptive families planning to adopt a baby are required to have a crib in their home that meets the current safety standards. This regulation refers to a "crib" and does not authorize a bassinet, cradle, or bedside co-sleeper, though a play yard that meets current safety standards is permissible.

The purpose of The Agency's Safe Sleeping Policy is to ensure the safe sleeping of infants and toddlers and to help educate all parents on its importance.

1. Adoption STAR believes that all parents should be knowledgeable on safe sleeping practices and be able to utilize the safe sleeping procedures.
2. Adoption STAR will provide prospective adoptive parents and birth parents that select to parent their child with information and literature on safe sleeping.
3. Such information will educate parents to practice safe sleeping procedures and habits.
4. The information will include but will not be limited to strongly recommending parents to:
  - (a) Always place a baby on his/her back every time the child is sleeping. A child will naturally cough or swallow fluids so choking will not be an issue. A child sleeping on his/her side is more likely to accidentally roll onto the belly causing the baby to be unsafe.
  - (b) Use current safety standard cribs (which may include play yards) designed to accommodate sleeping infants. Do not place infants to sleep on sofas, chairs, or other soft or unstable surfaces. Cradles, bassinets, and bedside co-sleepers are not recommended.
  - (c) Never allow the infant sleep in a bed with parents, other children or pets since this may lead to the unintentional suffocation of the infant.



- (d) Be sure that the crib mattress is one that is approved by the Consumer Product Safety Commission or the Juvenile Product Manufacturers Association.
  - (e) Be sure that the crib should be free of any blankets, stuffed animals, pillows, bumpers, or any other object that could restrict an infant's breathing.
  - (f) Communicate to those caring for the child the importance of placing the baby on his/her back to sleep. A child who is placed to sleep on it's back at home and then placed on it's belly to sleep, while being cared for by another person, is more likely to die of Sudden Infant Death Syndrome (according to the American Academy of Pediatrics).
  - (g) Avoid bundling the child too much while sleeping, as this may make the child become too hot. Signs that a child is too warm are flushed cheeks, damp hair, and sweating. The baby should be dressed lightly and the room temperature should be set at a level that a lightly clothed adult would be comfortable in. Keep the infant's room a comfortable moderate temperature.
  - (h) Have a caretaker, who is free of alcohol, tobacco or other drugs, within earshot of the sleeping infant.
  - (i) Avoid smoking around the child and not let babies sleep in a room where smoking is permitted.
  - (j) Not utilize car seats and infant seat carriers to replace the crib as a sleep surface due to the risk of the harness straps causing upper airway obstruction.
  - (k) Understand that "tummy time" is safe for a baby while they are awake and being watched closely by an adult.
5. An information packet including the above information as well as other related information is presented to the Adoption STAR client during educational classes, counseling and at time of placement or discharge of infant from the hospital/agency. The packet will include:
- (a) Safe Sleeping HFCA-SIDS – a 2-sided flyer from The American Academy of Pediatrics
  - (b) Safe to Sleep flyer – English and Spanish flyer endorsed by NYS OCFS, NYS Children and Family Trust Fund, Healthy Families NY and the NYS Department of Health
  - (c) Keeping Sleeping Babies Safer – a brochure produced by NYS OCFS
  - (d) A Parents Guide to Safe Sleep: Reducing the risks of SIDS – 2-sided flyer from The American Academy of Pediatrics
6. In addition to the above Safe Sleeping literature, the Adoption STAR client who elects to parent will also be provided information on Crib Safety and Shaking Baby Syndrome.

## ***Parents***

What about sleep for the new parent? It is normal to become sleep deprived and feel exhausted. However, while it goes along as part of parenting, it is also not healthy. If possible, nap when the baby naps. Don't be shy to ask a friend or family member to stop by and help out so you can get some sleep. You may think you will feel tired forever, but it is amazing how our bodies get used to the change.

Remember also to exercise and to eat a healthy diet. Not only should you care for your baby, you must not forget to take care of yourself.

## **Diapering**

Just like formulas, there are many brands of diapers out there. You will need to choose the diaper you like the best. The hospital and adoption agency will send you home with sample diapers. You do not need to use those brands.



A baby will go through many diapers in one day. Most of the diapers will be wet but many may have stools as well. A newborn can move his bowels ten times a day or just one time a day and that is still normal.

Before you begin to change your baby's diaper, be sure you have all the necessary supplies within easy reach. NEVER leave your baby alone on the changing table. Remove the dirty diaper and wipe away as much stool as you can with the front of the diaper. Use a warm, wet wash cloth to clean the entire diaper area, paying special attention to folds and creases. Do not use store bought wipes on a newborn. It is usually recommended not to use wipes until the infant is more than one or two months of age.

For baby girls, always wipe front to back to prevent stool from getting into the vaginal area. This will help prevent vaginal or urinary tract infections. Female infants may have a bloody discharge that you notice when you change her diaper. Do not let this concern you as it is common and it is due to hormones left from the pregnancy.

For baby boys, special attention must be paid if the baby was circumcised. If the area is still very red, place a generous amount of Petroleum jelly to the tip of the penis after cleaning with warm water. This will prevent the diaper from sticking and protect the new circumcision site from stool and urine until it heals.

Once the diaper area is clean, pat it dry and if possible, allow the area to have some air without a diaper. This will help prevent diaper rash. You may also apply a thin layer of Petroleum jelly to the entire diaper area to help keep wetness away from your baby's skin.

## Cord Care

If you have never seen a newborn with an umbilical cord stump then it may surprise you. Often the child's belly button area (including belly) has been covered with a blue or purple looking dye to prevent infection. This will disappear within a short time with washing.

Years ago, it was suggested to continuously clean the cord with rubbing alcohol. Now pediatricians report that it prolongs the cord from falling off. Until the umbilical cord falls off and is healed, you should not cover that area with the diaper. If necessary, fold the diaper down below the stump to allow air to get to the umbilical cord. The cord will fall off within one to two weeks. Call your pediatrician if the cord gives off a foul odor, bleeds or leaks puss.

The most important thing to remember is not to give your baby a tub bath until the cord completely falls off. Instead, an infant must receive sponge baths. (See bathing below.)

## Bathing

Until the baby's umbilical cord falls off and the area is healed (and a boy's circumcision is healed), you will need to give your baby a sponge bath. It is not necessary to do so everyday. Infants do not get very dirty and frequent baths may dry out their delicate skin. Many soaps leave baby's skin tight and uncomfortably dry. You may give a sponge bath simply with warm water. If you feel you wish to use something more, then use a non-soap cleanser, like Dove. Bathe the baby in a warm area and make sure all your supplies are within immediate reach. NEVER leave the baby unattended.



The best way to sponge bathe the baby is to lay him on a large towel in the kitchen or bathroom and undress him, leaving his diaper on. Wrap the baby in a smaller towel to keep him warm. Have a basin filled with warm water. Check the basin water temperature with your wrist or elbow. Dip a Q-tip or cotton ball in warm water and squeeze out excess water and wipe each eye from the inner to outer corner, using a separate cotton ball for each eye. Wash the baby's face with plain water on a wash cloth. Moisten a Q-tip with warm water and gently clean inside each nostril and the outer portions of his ears, using a clean end for each nostril and each ear. NEVER insert the Q-tip into the ear canal.

To clean hair, keep baby wrapped in towel and wet his head with a wash cloth and lather a small amount of the non-soap cleanser such as Dove or a delicate baby shampoo into your hand and apply to the baby's head. Rinse the baby's hair completely with warm water and gently towel-dry his hair before continuing the sponge bath. Place the baby back on the towel and remove his diaper and wash his body with warm water or a small amount of the non-soap cleanser. Pay special attention to the folds and creases in the diaper region. If your baby boy has been circumcised use plain water on his penis until it

has healed. After drying your baby off, clean the umbilical cord with alcohol as described earlier.

Once a baby can be immersed in a tub, use the small tubs made for babies. Wash the baby similarly as described above. Bath time should be enjoyable and not just a chore. New parents are often tempted to immediately use the sweet smelling baby baths and lotions that they have received or pre-purchased. Please hold off from using those items until the newborn is a little older. Babies smell good without them!

## Clothing

Many new parents worry about how to appropriately dress their baby. Dress your baby in easy-care and comfortable fabrics and remember to take consideration of the weather. We have a tendency to over bundle our babies. Dress your baby the way you would dress yourself for an outing. The most you would dress your baby in is one more layer than you are wearing.

## Laundry Care

While it may be more expensive, it is usually recommended to use a specialized baby laundry detergent in the first few weeks or months of the baby's life. Dreft is one name brand that is recommended. Many laundry detergents contain perfumes and cleaning agents that are known allergens and can cause skin reactions. You may be able to tell if your baby's skin is extra sensitive. Look for dryness and itching, skin rashes and irritation from diaper or clothing.



You will find that you are doing laundry frequently and changing your baby often. Baby may spit up and have formula stains or leaks from the diaper region. Wash clothes often to prevent stains.

## Common Newborn Conditions

**Blocked tear ducts:** A mild infection can cause a tear duct to become partly blocked causing your baby's eyelids to stick together. This isn't serious, but you should see a doctor. In the meantime, soak sterile gauze pads into warm sterile water and place pads on baby's eyes to soften the discharge and then gently wipe it away.

**Constipation:** A hard, dry stool that is difficult to pass can be classified as constipation. Your doctor may have suggestions on how to help your baby. Often placing a rectal thermometer into Petroleum jelly and then gently into your baby's bottom is a way to open up the area a bit and allow for bowel movements to pass easier.

**Cradle Cap:** This is caused when baby's skin produces too much of a waxy, oily substance called sebum. Massage baby's scalp with mineral oil to loosen the scales then shampoo and comb hair. When cradle cap stays around for awhile, carefully use a dandruff shampoo by placing a small amount in your hand and lathering into baby's hair.

and scalp being very careful not to get the shampoo on the baby's face or near his eyes. Leave the shampoo in for three to five minutes then rinse away thoroughly and comb through.

**Spotty Skin:** Many newborns have blotchy or spotty skin. Some have little white spots on their faces caused by plugged pores. African American, Indian, Hispanic and Asian babies commonly have bluish-black spots on their back, shoulders, buttocks, and genitals known as Mongolian spots. Mongolian spots are common birthmarks, especially in babies with darker skin pigmentation. They are less common in Caucasian babies. Mongolian spots appear as blue to gray patches, usually over the lower back and buttocks, and sometimes in other areas, including the upper back, shoulders, arms, and legs. They are caused by pigment-producing skin cells that don't quite make it to their normal position during development. The pigment in the cells reflects light shining on the skin, giving the spots their blue-gray color. Mongolian spots are harmless, and they fade on their own with time, usually disappearing completely by a few years of age, so they need no treatment.

These spots are not the cause of any illness or abuse. The Mongolian spots mentioned here are important for new parents to be aware of since unfortunately not all physicians or child-care providers are familiar with them and may mistakenly fear abuse. These areas should be called to your pediatrician's attention.

## Babies that need special care



You may be planning on adopting a baby that has special needs or is at-risk for developing special needs. You will be provided with as much information as possible on the child's special needs and medical history. You will be told about the possible developmental stages your child may struggle with or challenges your child may experience medically, physically, socially and educationally. These are only challenges that your child may experience due to the at-risk situation of his birth or genetic history or due to the diagnosis given at birth.

No one can predict the outcome of any child. However, with appropriate education, information, and support, a family can raise a child with special needs or at-risk for special needs feeling prepared to care for and love such a child and with knowledge on how to obtain the resources the child may need.

All adoptive parents require support, but most importantly, parents who choose special needs adoption must be prepared and willing to seek and receive support before and after child placement.

## Concerns with baby

Don't be afraid to call your child's pediatrician if you think that something may be wrong. Some warning signs that should prompt you to call your doctor are:

- A high fever.
- A strange skin rash.
- Serious injury or bleeding that cannot be stopped by pressure.
- Difficulty breathing.
- Recurrent vomiting.
- Appears to be in pain for more than 30 minutes.
- An obvious increase in the wateriness of bowel movements.
- Overly cranky or fussy for more than a day.

## Pediatric care

If you haven't chosen a pediatric group and a pediatrician for your new baby, now is the time to do so. This physician will get to know you and your baby very well. It is very important to share your baby's birth and background information with the pediatrician. Any copies of medical reports or other related information should be provided to the baby's doctor.

Your pediatrician will educate you on the visits needed for well baby care. He or she will tell you about the required immunizations and most likely will provide you with an immunization booklet to keep track of your child's shots. The immunization record is important information to have as your child grows. Day cares and schools will require this information and Adoption STAR will require that you submit proof of immunization during the post-placement period.

You should feel comfortable with your pediatrician and feel empowered to ask questions. If for some reason you are uncomfortable with your pediatric practice, we would encourage you to interview other doctors that will best meet your family's needs.



## Parent survival

Every new parent feels stress. Do not feel guilty about that. Even though you waited and wanted this baby so much, your life changes completely. Most new parents have ups and downs. You may feel happy, proud and excited one day and then sad, lonely or overwhelmed the next. While biological mothers may experience "post-partum blues or depression," adoptive parents may also experience "after-baby blues." The emotional roller coaster of adoption may have taken its toll on you. Your home may be flooded with well meaning family members and friends, you may feel sleep deprived and you may not have had the immediate bonding experience you fantasized about. You may wonder if you made the right decision to adopt, you may wonder if you are doing things

"right," your house may be cluttered with baby supplies and gifts and dishes in the sink! All of this is normal.

If you feel you or your significant other is not coping well with these changes and new feelings, please contact Adoption STAR, your post-placement adoption worker and your adoption support group for help.

### ***Some parent survival tips***

Parents need to remember to find time for them too. So take a walk in the sunshine for a few minutes! Read a good (non-adoption or baby) book! Call or get together with your best friend. You and your significant other can take turns watching the baby in the evening while one of you takes a drive around the block, a walk in the mall, or out for some dessert -- just to get a break from routine baby care.

In two parent homes, many new parents report that caring for a baby together made them feel closer to each other. Other times though relationships are put to the test. Especially during night-time feedings! While you most likely have heard this before, it is still important to find time when the two of you can be alone. Find someone you can trust to care for the baby even if it is for a short time. Time alone with each other can simply consist of taking a walk together, setting up a time just to talk, or making a date with each other. Don't forget to give each other praise in your new roles as parents.

Also learn to live with a little clutter. Eating off paper plates for a month never hurt anyone! Realize that projects now need to be done in increments and may not be done as quickly as you were used to or hoped for.

## **Discipline**

It is important to realize that babies NEVER need to be disciplined or punished. If they are overly fussy or cry often then they need attention. As your child passes the age of one year you will begin to need to become consistent and clear about household rules and safety. But during the baby period, discipline is not necessary.

## **Safety**

Some parents don't worry about safety until their babies are older. However, accidents can happen at any age. Here are some tips:

- Never leave young children or animals alone with your new baby.
- Be sure that your baby's nose is not covered and always free to breathe.
- Never leave pillows, toys, balloons, string, or plastic bags in your baby's crib.
- Never leave your baby alone on a table, bed or counter top. Not even for a second! Even if your baby has not rolled over yet, keep in mind that the first time your baby rolls over may be just the time you left him or her alone.





- Have all the supplies you need in order to change or bathe your baby at reach so that you are not tempted to leave the baby's side.
- If you bathe or shower with your baby, be extra careful as a baby's body will become very slippery. Take extra care in getting out of a tub or shower while holding the baby.
- Keep the phone number for poison control and other emergency numbers handy.
- Never shake or hit your baby.
- When using a babysitter, make sure you trust the person you leave the baby with. Be sure the sitter knows where to reach you. Review safety rules with your babysitter.
- When the baby is crawling or sitting up remember to keep pins, buttons, beads and other small or sharp objects out of your baby's reach.
- Keep cleaning supplies, medicines and plants out of your baby's reach.
- Cover electrical outlets, protect sharp corners of tables, take out of reach all the things that can be broken or hurt the baby, put latches on cabinets and windows, unplug irons, beware of toilet lids being opened by toddlers and add gates to stairs.
- Use high chairs that securely strap young children in.

The above just touches upon safety issues. It is up to you to make sure your home is a safe and healthy home for your baby. Research safety early on and consider all the spaces in your home that will need to be made safer.

## Playing

You are your baby's first and most important teacher. Your baby's brain is constantly growing and developing. Interact as much as possible with your baby, by talking to your baby, singing to your baby, making noises, holding fingers out for your baby to grab, reading to your baby and showing your baby pictures and colors and introducing different textures.



Games help your baby to learn. Games teach babies to move their arms and legs, make sounds, think, feel safe and good about themselves, and to get along with people and bond with the person taking care of them.

Remember that interacting with your baby tells them how much you love them and makes you feel good too. You cannot hug and kiss your baby too often. Remember, babies cannot be spoiled.

## Sibling relationships

How you introduce the newest family member to your other child(ren) can help develop a good relationship between them in the future. Many young children who become siblings suddenly act like babies again. If your child asks for a bottle or sucks a thumb, try to be patient. This is typical behavior. Babies don't get jealous, but your toddler, preschooler, grade-schooler, or teenager may be jealous of a new baby even if they don't admit it.

Remember when you return home with the new baby to immediately immerse yourself with your other children. Give your other child(ren) hugs and kisses and share the baby with them. Bring the older child(ren) a small gift “from the baby.” Make them feel important and useful. Remember to find time to read, play and snuggle with them individually. During the first days and weeks, continually reinforce how much you love them and the new baby.

There are lots of things you can do to help your older child(ren) get along with the baby. They can talk to you about the new baby and you can tell your child(ren) what babies like and need. If your older child is adopted also, re-telling him his special adoption story and the new baby's adoption story is a good way to share time together. Let your child(ren) see and touch the baby. They can help read a story to the new baby. Older children can help with the baby's care. Even toddlers can get you diapers or find toys. An older child can help you change diapers or feed the baby. Also, ask visitors to pay attention to older children as well as the baby. Having a supply of wrapped gifts to give the older child when friends bring baby gifts for the baby may be helpful too.

While you are praising your older child(ren) for their help with the new baby, you must not forget to set boundaries and rules about interacting with the baby. One important rule should be that no child is permitted to hold or pick up the baby without mom (or dad's) permission. Children need to understand that new babies do not “play” and are not so much fun in the early weeks and months and that sometime in the future, their new sibling will be able to interact more with them.

If you feel your older child(ren) are having trouble getting used to the new baby, discuss this with your pediatrician, post-placement adoption worker, and adoption support group. They may have some good suggestions on how to deal with an older child's feelings about a new baby.

## Sharing the news

Once you take your baby home, whether due to this match or a future one, you may feel like shouting from the rooftops that you just adopted and that you have a new baby in the house. Or you may wish to hide out with your baby for awhile. There are many ways to announce the arrival of your child.



Families have used adoption poetry, photos, etc. to create a one-of-a-kind adoption and birth announcement.

The Internet is often a good resource for adoption cards, adoption announcements, and adoption related gifts. The Internet also is a great way to send instant updates of baby's progress to family and friends. You may set up your own web page or utilize email to send photos.

# Resources

As you know, Adoption STAR has many books on adoption and parenthood. Hopefully you have already started building your adoption and parenting library, including children's books on adoption. Here are some online resources to look into:

## *Internet Resources for Parents*

Adoption STAR

<http://adoptionstar.com>

Adoption STAR Calendar of Events

<http://adoptionstar.com/participate/calendar-of-events/>

Adoption STAR Blog

<http://adoptionstar.com/articles/>

Adoption STAR Facebook

<http://www.facebook.com/Adoptstar>

Adoption STAR Twitter

<http://twitter.com/adoptionstar>

Adoption STAR Adoptive Family Support Group

<http://adoptionstar.com/sofia/>



Adoption STAR Adoptive Parent Online Support Group

<http://groups.yahoo.com/group/adoptionstar/>

Adoption STAR Adoptive Parent Parenting Online Group

<http://groups.yahoo.com/group/adoptionstarparents/>

American Academy of Pediatrics

<http://www.aap.org>

KidsHealth.org (website about children's health and development)

<http://www.kidshealth.org>

Tapestry Books (largest online adoption book resource)

<http://www.tapestrybooks.com/>



## Looking Ahead

We hope you enjoyed this book and found it helpful. Very soon you may have questions about toddlers -- about preschoolers -- about school-age children -- about teenagers! And you will need help and support along the way.

If you have learned anything from this booklet and from your association with Adoption STAR we hope it is that you realize that education and support are paramount with any adoption and parenting plan.

We hope you will empower yourself to ask questions, talk about concerns and challenges without being intimidated. There is always something new to learn as a parent.

***Enjoy this awesome and wonderful time ~ your journey  
to becoming an adoptive parent!***