

Love and Cells: an infertility memoir

By

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Abstract

In *Love and Cells: an infertility memoir*, Hayley Riviere reveals she always had a gut-instinct that she'd have difficulty getting pregnant, despite doctors reassuring her otherwise. Once married, she discovers she had been right all along, and a battery of tests reveals her diagnosis of Poly Cystic Ovarian Syndrome, or PCOS, one of the most common types of female infertility. Despite PCOS affecting ten percent of all women, Riviere feels isolated from the people around her, especially after her husband tests normal for reproductive capabilities. In turn, this causes her to wrestle with her identity as a "fully functioning" woman. This memoir invites the reader into exam-room scenes of invasive procedures, and unleashes wit in sections of found forms and flash non-fiction, revealing the slap-to-the-face social interactions often unintentionally cause during a fertility struggle. Riviere's portrait is self-deprecating, spans the course of three years, and captures infertility "in the heat of the moment." The author's quest for motherhood and self-love yield palpable lessons of empathy for all readers, regardless of their relationship with parenthood.

Sometimes You Know Yourself Better Than Your Doctors – an introduction

I've always had this (maybe not-so) irrational fear that I wouldn't be able to have a baby because I only get three periods a year. When I went to my first OB/GYN appointment when I was sixteen in 2006, I asked my doctor, and the two others since then, if I would have trouble getting pregnant someday, and the answer was always a very confident "No." But their authority did nothing to dispel my own anxiety.

I can't explain how I knew fertility was going to be an issue for me, but the idea was always in the back of my mind taunting me. When I was a senior in high school, the worst of it would come at night after the rest of my family had gone to bed, and the shadow-filled house was so still it was almost unsettling. I'd lie in bed thinking about my olive-skinned, green-eyed best friend/crush and our future together with our tan, auburn-haired, green-eyed children. It'd be a wonderful picture until I inevitably had the paralyzing thought that no woman, especially a teenager, should ever have. Would he love me if I couldn't give him those tan, auburn-haired, green-eyed children? I knew he was still awake playing World of Warcraft – a game I never did understand – and I called him to find out.

Balancing my Samsung flip-phone on my cheek as I laid on my side with one hand tucked under my pillow, and the other fidgeting with the charger-cord, I recounted my fear of not being able to have kids.

“If whoever you end up with cares if you can have kids or not, then he’s not the guy for you.”

“Yeah?” I wanted to believe his comment was a hint that he liked me as more than as his best friend, and squirmed between my blue, cool, cotton bed sheets.

“Yeah. I mean, I wouldn’t care if I found out my soldiers couldn’t swim.”

I was stunned at his response, much like I am today. His lackadaisical attitude toward having a family was unlike anything I’d encountered before or since, and I didn’t know if I should feel empowered by or disappointed in his response to my darkest secret. If anything, people are usually adamantly for or against having children, but he didn’t care either way. Whereas, I feared I fell into the No Man’s Land of baby-dom – wanting them but being unable to give birth to them.

Now, as a twenty-seven-year-old I understand why his flippant response jarred me when it was intended to comfort me. Neither of us understood that his comment came from a place of privilege. History doesn’t remember the story of a queen divorcing and executing husbands because they couldn’t produce a male heir. Nor does it retell the story of men being condemned as warlocks and shunned from society for not having children. And, Hollywood doesn’t portray narratives of men devastated over another failed pregnancy attempt. The television show *LOST* does remind us, though, that in China, women are told they are the cause for a couple’s infertility, regardless of what the lab

results say. And in the United States, it's the bride, not the groom, who gets asked at the wedding reception when she's going to have kids.

So, despite his best intentions, my best friend/crush didn't make me feel better because he couldn't relate to the implicit social pressure to conceive. But I, too, had approached the situation incorrectly. I thought I wanted him to tell me that he'd love me, that I could have kids, that I was worrying over nothing. But now, I know what seventeen-year-old me was after – I wanted him to acknowledge my fear was valid, and that it was scary, and that maybe things would get worse before they got better, and *then* tell me he loved me just the way I am.

During the summer of 2008, right before I left for college, I went on birth control to have twelve normal monthly cycles a year, instead of the three I had on my own. For six years, I was able to blend in as a typical female, and I felt secure in my womanhood. But suddenly, I was in my mid-20s, married to a man who loved me “just the way I am,” and my husband, Matt, and I were settled in our respective careers. Baby talks and potential time frames and budgets had started, and I realized I didn't know what “just the way I am” meant. I couldn't hide behind my birth control any longer. It was time to see what I was made of.

I.

An Ending and a Beginning

May 16, 2014 begins and ends with an Army man in dress blues playing Taps on a Bugle and two others meticulously and ceremoniously folding and presenting an American flag to the next of kin. Nothing else matters. Nothing else is real.

My husband, Matt, and I make the trip from central Florida to Pekin, Illinois for his grandfather's funeral. His grandfather, Walt, had been in debilitating and rapidly declining health for the previous few years. He had several strokes, which made it extremely difficult for him to speak, needed an oxygen mask, and suffered from dementia. So, it is difficult, but no surprise when Matt receives the call that Walt has passed away.

During the visitation the day before the funeral, I stand next to Matt in the family's receiving line, shaking hands, thanking visitors for coming, and giving them my condolences on their loss. It seems like the honest thing to do; after all, I had only briefly met Walt three times. I had married into the family less than a year before and feel like I can't be seen crying at the funeral of a man I barely knew for fear of looking like a malicious pretender. I have done well – no misty eyes at the visitation and only appropriate tears during the funeral (for there are parts that have a universal melancholy sentiment) – but I am unprepared for a military funeral and have unknowingly walked into one at the graveside service.

As Taps plays beyond the corners of the white tent, the people and chairs around me run together like watercolors, bleeding and merging defining features, silently staining every pore on my cheeks and neck. My mind races through every major war and conflict the United States had been involved in, and my chest feels the weight of every family member who had to endure the same hauntingly peaceful melody while saying goodbye to their heroic loved one.

As the final note of the song trails off, so does the fog in my eyes, and in the open casket lays my dad – salt and faded pepper hair, closed eyes, thin lips arranged in an emotionless straight line, and a black suit. Twin streams pour from my eyes, and my chest rises and falls violently, simultaneously breathing and not breathing – breathing but not gasping. No one notices, not even Matt.

The two Army men on either side of the casket lift the American flag that has been draped over the wood structure, step forward, and fold it. I begin shaking, like hyperventilating but without the lack of oxygen. When the men are done, they present the flag to me but my younger brother takes it instead. I can't compose myself enough to reach out for it. The pastor who finishes the service mentions Walt serving during World War II and using his carpentry skills to repair the local Methodist church, but I see bombs exploding in the jungles of Vietnam and my dad taking pictures of the three-year-olds in his Sunday School class at the Baptist church to make Christmas ornaments to give to their parents.

After the prayer to conclude the service, I turn Matt around and hug him as tight as my arms will hold and cry as hard and as loud as my heart deems necessary. I don't care who notices.

"Did it make you miss your grandfather?"

"Yeah."

I couldn't explain the truth. I didn't know how.

After graduating college in December 2011, I accepted a teaching position at Liberty Technology Magnet High School in my hometown of Jackson, Tennessee to teach English III and one section of English I honors.

Even though the juniors I spent most of my day teaching stressed me out and were behavior nightmares, it was my offense at my freshmen's lack of knowledge and work ethic that gave my life a new trajectory.

I created what I called "The Wall of Shame", which was a series of poster sized post-it notes by my door with assignments and the names of the students who didn't turn them in, to inspire my freshmen to do better, and after Parent-Teacher conferences, one of the freshmen Biology I teachers walked by my door, pointed to the giant yellow post-its and said, "I'm going to take care of that for you tomorrow," and walked away.

"Okay," I said, frozen in my tracks, staring out the door. "But I don't even know your name."

The next morning during the class exchange from first to second block, I had eight freshmen barreling down the hall, almost knocking over seniors twice their size to get into the English hallway. As they slammed on their breaks to turn into my classroom, I could hear them giggling.

“Shhhh!”

“Yeah! Act normal!”

Then they giggled some more as they went straight to their seats.

Well that’s weird, even for them.

As I stood in front of the class as the tardy bell rang, and I told my students to get out their notebooks and copies of *Tuesdays with Morrie*, a small blonde girl on the back row who always tried to appear more innocent than she really was raised her hand.

“Yes, ma’am,” I said calling on her.

“You date Mr. Riviere, don’t you?”

When I find things to be awkward, I have a habit of involuntarily smiling – like when friends get bad news, or my parents get lost on family vacations and argue over directions, or when I hear intimate details of a sorority sister’s sex life and how she “collects” branches of the military – but usually I can hide it, and it never gets me into trouble. But nothing gets past a room of 24 fourteen year olds.

“Oooooo!” They collectively yelled and reached for their phones before I could do anything to stop them.

“No! We’re not dating! I don’t even know his first name!” But my protest was useless. The whole school already had been told.

I spent the next two weeks trying to avoid Matt at all costs; I didn't want to deal with the potential aftermath of the awkward situation my students and I had created. Once, I was re-arranging worksheets in my arms to copy into packets as I walked outside my classroom, when I looked up and saw him coming down the hall to make his own copies. And like a scene out of a sit-com I used my next step to swing a 180-degree pivot, went back into my classroom and stayed there until he left. But just a couple of days later, he walked into the copy room and sat in a metal folding chair opposite of me while I made copies of *Romeo and Juliet*. I was trapped.

Stare at the copier. Move the printed copies to the table. Look busy. Maybe he won't say anything. Please don't say anything...Please don't say anything...

"So, I hear we're dating."

Shit!...wait. That sounded like he was smiling when he said that. Oh thank God.

"Yeah...I heard that, too. They asked me about it, and I said no, but it was awkward, so I smiled, which in their minds confirmed what must be true when a male teacher talks to students about their performance in a female teacher's classroom, you know, 14-year-old logic, and that's all they needed. It spread like wildfire."

"It's alright. I hope your boyfriend didn't mind, though."

Boyfriend? Is he fishing for information? Play it cool.

"No. I don't have a boyfriend. How about your girlfriend?"

"I don't have one."

We both smiled.

A year of dating, a wedding, a cross-country move, two job changes, a year of marriage, and an adorable Maltese puppy named Pip later, we find ourselves sitting in the parking lot of a high-end pet accessory store in St. Petersburg, Florida waiting to meet up with my uncle who had puppy-sat Pip while we were at Walt's funeral. As we were sitting in the car, my eyes began watering underneath my sunglasses, and Matt, who almost always notices when I'm about to cry, asked, "Are you sure you're okay after the funeral? I know you miss your grandfather."

"It isn't my papaw. I know this sounds morbid, but at Walt's funeral, it's like I saw my dad's. He's almost seventy and only ten years away from the age Papaw was when he died, and that's really scary..."

"I totally understand that." Matt reached over and held my hands on the shared armrest between our seats.

"And it worries me for our kids."

"I know."

Matt and I had a similar conversation one afternoon in his classroom when we were dating. He was sitting on a wooden stool behind his podium, and I was sitting in the student desk in front of him.

"Do you want kids?" he asked.

"I do. Actually, if I'm married by then, I'd like to have my first child by the time I'm twenty-five."

Even early on in our relationship, Matt and I were always honest and straightforward with each other, so the directness of my answer didn't surprise or scare him. The lift in his brow and curve of his mouth just asked me to continue.

"My parents were thirty-three and forty-two when they had me, and because they were older, so were my grandparents; and by the time I was ten, the grandparents who were still alive when I was born had passed away. So I figure if I have my kids in my twenties, they'd have longer with their grandparents than I did." My voice began to quiver and trailed off. I diverted my attention from Matt to the shadow growing across the Smartboard on the wall that still showed this last slide in a mitosis PowerPoint. It had to be close to 5:30.

"What about you? Do you want kids?"

"Yeah. I'd really like to have a boy to carry on the family name. Otherwise, it'll end with me."

"I do want to tell you up front that there is a strong possibility I could have trouble having children. I only get three periods a year, which by itself makes things complicated, but I've had this feeling for as long as I can remember that I'm going to have problems getting pregnant, or may not be able to have kids at all. So, if that scares you or isn't okay with you, I completely understand. If you want an out, I've giving you one."

And to my surprise, without any question or hesitation, Matt replied, "I don't want it. I'm all in."

In the car in St. Petersburg, I pause before I continue our conversation. My watery eyes graduate to full-blown tears, which Matt wipes away one at a time with his thumb as they roll down my cheeks.

“Christmases, my sixteenth birthday, high school and college graduations – they were all really hard without my grandparents, you know? My friends would get hugs and flowers from their grandparents and go to their houses for family celebrations. My family did those things, too, but it always felt like something was missing.”

“Yeah. I can understand that.”

“I can’t willingly do that to my own children, especially when it comes to my dad. He’s the sweetest man I know, and he’d make such a great Papa. I want him to be able to have time with his grandchildren, and more than *anything* I want our children to have time with him. I know we wanted to spend our first two years as just the two of us, but with my issues with my periods I’m afraid having children will take too long and...” and I lose all of the composure I have left. The thought of our small children at my dad’s funeral is more than I can bear.

Matt wraps his arms around me and pulls me into his chest across the armrest.

“Our kids have to have more time with my dad; they have to,” I sobbed.

“It’s okay. This really means a lot to you. We can start trying when we get home.”

Sometimes You Know Yourself Better Than Your Doctors – a diagnosis*May – July 2014*

After deciding to try to have a baby, I immediately stopped taking my birth control, despite being in the middle of the month, even though it isn't exactly medically advisable. And having forgotten that when you miss enough birth control pills in a row, a period automatically starts, I got understandably, ridiculously excited when I realized after graduation practice with the seniors at the high school where I teach that I had started my period, thinking it had happened naturally. On my way home, I called Matt and told him all about it, as if it were juicy gossip. He wasn't sure what to say, but he tried to be excited and supportive.

But it wasn't until I didn't get another period in June that I realized why I had gotten one in May, and I didn't waste the recommended six months of trying before making an appointment at the local clinic with an OB/GYN to see what our options were. Thankfully, the clinic didn't turn us away, telling us to try anyway. When I called, the receptionist asked me for the reason of the appointment.

"I have irregular periods, and my husband and I are trying to get pregnant, so we want to know what our options are."

"And how long have you been trying to get pregnant?"

"Just one month, but since I don't have regular periods, there is no way for me to know when I am ovulating, so we don't want to keep going, shooting in the dark."

“Okay. So would you like a morning or afternoon appointment?”

My first appointment is in the middle of July and starts off with a pap smear and pelvic exam. The procedure is no different from any other previous exam, but this is the first time my OB/GYN is a man, which surprisingly doesn't bother me at all, but, maybe it is because he is more Mickey Rooney than Bradley Cooper. The whole procedure is like a caricature of an annual exam, all the sensory experiences heightened and exaggerated from nerves – the plastic speculum and lubricating gel seem colder than usual as it is slid into me and opened; the pressure of taking a biopsy seems more prominent; and the exam as a whole, seems like an eternity.

After the pelvic exam, I am sent down the hall to a closet-sized phlebotomy center just big enough to house two chairs for patients, for a series of blood tests. I have no idea what each of the six vials covered in labels with my name on them will be tested for, but they come in all different heights and widths. I am perplexed thinking about all the different things that could possibly be tested with my blood that would require me to give so much. I sit in the chair with my left arm out-stretched as the phlebotomist eases the needle into my arm and alternates the glass containers, filling each one to their rubber tips. I watch in dazed amazement as the deep red squirts and flows into each glass container, and I momentarily forgetting about everything else.

Before I leave, the OB's nurse gives me a small, round, glass container and a lab order for a semen analysis for Matt. “It's good to find out up front if there is a problem there, too, so we can fix everything at once.”

As I walk out the front automatic doors to the clinic, everything feels so surreal. My gut-instinct of my irregular periods being a fertility issue hasn't been either confirmed or dismissed, and that is disappointing, and yet I feel a twinge of hope as I put on my sunglasses to walk to my car. A path has been outlined, and I have taken the first step.

Two days later, as I sit in the waiting room for my weekly appointment to get allergy shots, my OB's nurse calls to give me my lab results.

"Your androgen and estrogen levels, which are your sex hormones, are flipped, preventing you from ovulating, which is an indicator of Poly Cystic Ovarian Syndrome, which explains why you are unable to have a period."

I *finally* have a name for what is wrong. I *knew* I haven't been paranoid about having issues getting pregnant. A smile creeps across my face. My childhood fear of having fertility problems is actually validated.

"Dr. Jennings will be calling you in a prescription for Prometrium, which is progesterone hormone pills, to induce a period and Clomid, which will make you ovulate, for you to take days three – seven of your cycle. Have timed relations days ten - fourteen, and when you begin the Clomid on day three, call to schedule your blood work and a pregnancy test to see if you ovulated. You'll also be taking Metformin 500 mg to regulate your insulin levels once daily. Do you have any questions?"

All traces of my smile disappear and my head begins spinning.

“I’m sorry. Could you repeat that?” I began digging through my purse for a pen and a piece of paper.

“De. Jennings will be...Clomid...relations days ten through...pregnancy test...” I find paper and a pen. “You’ll also be taking Metformin to regulate your insulin levels once daily.” I wrote the last part down.

“I’m sorry. Could you say that one more time? I’ve almost got it all.”

And she rattles it off one final time. When I finally get it all straightened out, she tells me that Matt’s semen analysis came back normal.

My heart sinks. I hadn’t even thought about how it would feel to officially carry the burden of having reproductive issues alone. But here it is. And it is an immediately heavy and isolating feeling. When my name is called to go back to get my allergy shots, I struggle to find the strength to get out of my chair.

But at least I have answers.

The Age of Instant Information

July 17, 2014

Tonight, as I am lying in bed waiting for Matt to get home from his 4 p.m. - midnight shift at the microbiology lab where he works, I start looking up PCOS on my phone. I had never heard of it before this afternoon, and even struggle remembering what the letters stand for.

The first source I click on, a website sponsored by Boston Children's Hospital, starts off its description of PCOS as a hormone imbalance that can lead to serious health problems such as diabetes and heart disease. I pause there for a moment in my reading. The mention of diabetes catches my attention because my Papaw died from diabetic complications, and my dad has it now. The article goes on to say that women with PCOS have a hard time regulating their insulin levels and that doctors prescribe women with PCOS Metformin as a preventative measure to keep them from developing diabetes.

So if that is the case, I can't help but wonder why the nurse hadn't explained more of this to me on the phone. And does the potential for developing diabetes mean I need to change my diet? I'm overweight, but am I okay as I am right now? The article also explains that in young women with PCOS, high levels of insulin can cause the ovaries to make extra androgen and testosterone, which can cause extra body hair, acne, and few or irregular periods. I guess that's what the doctor meant by "extra hair" during my first OB/GYN appointment when I was 16. I didn't know that hair on your fingers and toes

wasn't normal. I have to shave that when I'm shaving my legs, but thankfully I missed out on the acne part. There's no way I could cover that up.

And then in the next sentence, it says that PCOS is the most common type of infertility in women, affecting ten percent of all women in the United States – and to give a point of reference, twelve percent of women in the U.S. have breast cancer. It's almost as if I am being told, "This thing can lead to things that can kill you, but don't worry, you're not the only one." But I've never known of anyone who had this – had a syndrome causing them to not get pregnant. Or, do I, and no one ever talked about it? For someone who has thousands of women across the country struggling with the same medical problem, I feel completely and utterly alone; if I want to talk about what I'm going through or how I'm feeling. I know I can always talk to Matt and my best friends Mary Kate and Rebecca, but I'll have no one who can empathize.

I find a different website that talks about the treatment for PCOS, so I sit up on my side of the bed so I can really pay attention. The website mentions taking Clomid, and Letrozole (ovulation medicines), HCG (human growth hormone) shots, Intrauterine Insemination (IUI), and In Vitro Fertilization (IVF) as methods of becoming pregnant when diagnosed with PCOS. I start slowly tracing my thumb around the home button of my iPhone, alternating directions each time around.

It also gives the odds of conceiving with each of these options, and depending on which option you're working with, there is a thirty-sixty percent chance of getting pregnant after three cycles worth of attempts, where as a women without infertility issues has a twenty-five percent chance of getting pregnant each cycle. Even without doing any math, I know the chances of getting pregnant aren't great, and my chest starts feeling

heavy, and my thumb struggles to complete its next orbit. If getting pregnant is going to be this hard, is it even worth it? I hadn't anticipated a struggle when I made the first OB/GYN appointment; I figured I'd get a prescription to start a period and the rest would come easily.

And I am just about ready to click the home button and lay back down when the word *Miscarriages* catches my eye at the bottom of the screen. The website states women under the age of thirty-five without infertility issues have a fifteen percent chance of miscarrying, but then I see the letters PCOS paired with forty-five - fifty percent, and the numbers slap me in the face. I start crying from the pain.

I know now that my body is broken.

My syndrome makes me less of a woman because it is and will continue to fight against its biological purpose.

I am broken and no one else knows what that feels like.

I fall onto my side, curl up in a ball from my body heaving with each sob.

I've let Matt and our parents down.

Expectation, Obligation, Itemization

To not incur the wrath of Social Darwinism, be a good girl and ...

I. Conception and Birth

- A. Develop at the appropriate rate in your mother's womb
- B. Pose in the correct angles during your sonogram photos (gotta give Mom good material to show off to her friends)
- C. Arrive at the anticipated due date
- D. Grow to be in acceptable percentiles for your age

II. Early Childhood

- A. Take naps
- B. Eat vegetables
- C. Behave for the babysitter
- D. Use your imagination when playing (but not with toy guns or action figures or anything blue)
- E. Share
- F. Create pretty pictures to go on the fridge
- G. Learn the alphabet and numbers 1-10
- H. Write your name

- I. Learn social skills

III. *Elementary School*

- A. Make good grades
- B. Don't get your behavior card pulled
- C. Take naps, when applicable (kindergarten and first grade)
- D. Pass state standardized tests to be promoted
- E. Make girl friends and play house with dolls
- F. Spend the night at a friend's house without calling your parents to pick you up at 1 am

IV. *Middle School*

- A. Get in honors classes
- B. Make good grades
- C. Get boyfriend(s)
- D. Join clubs
- E. Bury your pet goldfish in the backyard and give a eulogy
- F. Go through puberty
- G. Ignore hormone shifts – they aren't an excuse
- H. Don't talk about your body maturing – it isn't polite
- I. Don't get pregnant
- J. Get a reputation for being a snob because you don't rebel and aren't angst-y like everyone else

V. High School

- A. Get in honors, Advanced Placement, and Dual Enrollment classes
- B. Pass all college entrance and course tests to earn college credit – if you aren't ahead, you're behind
- C. Pass state, class, and graduation requirement tests
- D. Get a part-time job
- E. Feel left out because your friends don't call you to hang out on the weekends
- F. Get new boyfriend(s)
- G. Don't get pregnant
- H. Join more clubs
- I. Hold offices in clubs
- J. Step down from being Speech Club president because you can't go to competitions after your knee surgery, but the vice president can – it's only fair
- K. Get accepted into a good college or university with enough scholarship money to cover tuition, room, and board

VI. College

- A. Choose a major and stick with it (to avoid looking clueless and being an embarrassment)
- B. Join new clubs
- C. Join a sorority – or if you have relatives who were in one, join theirs
- D. Hold offices in your clubs and sorority

- E. Dorm roommate moves off campus with another friend – suck it up and tolerate the “psycho” roommate
- F. Get a serious – future husband – boyfriend
- G. Make good grades
- H. Get editorship on the college newspaper staff
- I. Get a prestigious internship
- J. College newspaper publishes article about student deaths that enrages half of the campus – security emails a warning to the newspaper staff, “It’s best if you don’t go to your office until Monday.”
- K. Graduate early – on-time at the absolute latest
- L. Get multiple full-time job offers
- M. Accept the best paying job (which is not the dream job)

VII. *Adult Life – 20s*

- A. Get married – to someone who is perfect for you but isn’t at all the good ’ole Southern Boy you thought you’d end up with
- B. Move to another state with no job secured
- C. Rent an apartment that leaks *only* when it rains but the maintenance guy says the washing machine isn’t hooked up correctly – “Your machine, your problem.”
- D. Set out to buy a house in a historic neighborhood, but build a new one because the sellers back out
- E. Have a baby
- F. Baby develops colic for three solid months

G. Take care of your family despite running on an average of 3 hours of sleep a night

VIII. 30s

- A. Have second baby
- B. Between an infant and a toddler, get sleep where ever you can
- C. Go back to work
- D. While you're at work, miss your children so much you can't stand it (or if not, pretend), otherwise you're a bad mother
- E. Enroll your children in elementary school, and cry as they walk into their classrooms on their own for the first time
- F. Leave your kids with their grandparents as often as possible for date nights with your husband to keep the flame burning

IX. 40s

- A. Find a new job that allows you to go on school field trips on 2 weeks' notice
- B. Spend Saturday mornings at club soccer tournaments and church league basketball games
- C. Master the art of open communication with teenagers so you can have an open and honest conversation – but they think it's awkward and refuse to listen
- D. Take your children with you to do philanthropy work so they learn to be compassionate towards all people – no matter race, education, or socioeconomic status – and support those actions in your everyday life – but they would rather watch videos about it on Facebook

- E. Still kiss your children goodnight and say “I love you” often
- F. Give your children the room to be independent and figure out their own opinions
- G. Ground your children for sneaking out their bedroom window to meet their boyfriend/girlfriend
- H. Tell your children how proud you are of them, even when they fail
- I. Still allow grandparents to spoil your children

X. 50s

- A. Take children on college tours
- B. Attend high school graduation along with grandparents, aunts, uncles, and cousins
- C. Move children into college dorms
- D. Find new hobbies with your husband to avoid empty-nest syndrome induced divorce – but it’s difficult because you don’t have similar interests anymore
- E. Attend college graduations with grandparents, aunts, uncles and cousins
- F. Help plan children’s wedding festivities to varying degrees (depending whether it is your son or daughter) – and spend more than you had saved...there goes early retirement!
- G. Go to doctors’ visits with your parents to make sure you both are on top of all their medicated conditions and medications
- H. Begin taking on a more full-time supervisory role in your parents’ daily care
- I. Celebrate with your children when they become pregnant
- J. Attend the birth of your grandchildren

XI. 60s

- A. Plan and execute your parents' funerals
- B. Babysit and dote on your grandchildren
- C. Ignore your children's wishes when it comes to spoiling your grandchildren
- D. Retire from your career job
- E. File for Medicare and social security, but it's running out, and you didn't plan for that
- F. Get a part-time job to make some spending money
- G. Volunteer more to take up some of your free time when your grandchildren go to elementary school
- H. Attend every grandchild's sports game, recital, and school play – even if it means missing the Vols play during football season
- I. Go on the cross-country vacations with your husband that you couldn't afford when you were young

XII. 70s-90s

- A. Downsize your house now that you aren't a full-time babysitter, you're too old to go up and down all those stairs
- B. Attend grandchildren's high school/college graduations and weddings
- C. Be conscious of your spending so that you can leave an inheritance for your children and grandchildren
- D. Mourn the loss of friends and family members your age

- E. Go to yours and your husband's doctors' appointments, and become experts at it
- F. Relish the time you have with your family – children, grandchildren, great-grandchildren

II.

Qualifications of Motherhood

I must confess, I do not currently have, nor have I ever had baby fever, but I'm afraid that by the time biology gets my hormones in check (if it ever does), it'll be too late. My chances of getting pregnant while my dad has the chance to be an active grandparent will have drastically decreased, and the chances of getting pregnant take a nosedive when you hit thirty-years-old. Don't get me wrong, I want a family of my own, but when I was single in my early twenties, other women were getting baby fever and posting Facebook videos of babies dancing and pinning baby outfits on Pinterest. I, instead, had *puppy* fever and researched dog breeds that would best fit my apartment lifestyle and then rated them by how cute they were based on Google searches. But now that I have Matt and Pip, that constant, physical burning in my heart of truly needing a puppy of my own to love has vanished into pup-snuggles and play time in the floor.

I imagine baby fever is something like that, increasing every time you see a baby eating dry cereal in a highchair on a TV commercial, or a toddler in suspenders and khaki pants running down the hallway at church on Mother's Day. I pray for peace for women feeling that type of daily pain wanting their own biological child.

But I do go through spells of feeling maternal. When we're in the throes of OB/GYN visits and ovulation medicines, I have daydreams of what my house would be

like with a young child and later early teenager in it. Talking to her about her day, taking her on excursions around Florida, exposing her to so many of life's wonders and mysteries and helping her find her place in it all. It's a lovely and heartwarming idea. But when we go through spells of long periods of waiting to find out our next steps, I find myself complacent in my current life, happy with it being just Matt, Pip, and me, and I wonder if I have any business trying to be a mom since I am happy with my current life. Shouldn't a mom be someone who can't imagine her life without children in it?

I have no doubt, though, that Matt should be a dad; I knew it early on in our relationship. We were at his parents' house, back when we were dating, and his parents' dog, Palmer, was barking incessantly – supposedly it's a nervous habit from when he was at a puppy mill. Without any fuss, Matt gingerly picked up the long-haired dachshund, cradled him in his arms, kissed him, and stroked his back. Palmer was instantly calmed, and Matt kept holding him and talking like nothing ever happened. That's when I knew I wanted to marry Matt. His kind, loving soul reminded me of my dad and how my dad would hold me as I cried when I was stressed or my mom and I got into blow-out fights. Those moments of simple love from my dad clearly define what a father should be, and I wanted to be around Matt and his love forever. I wanted our child to fit in his arms as perfectly and receive his quiet, easy love like Palmer did.

Having a husband, children, a dog, and a house were always part of the vision I had for my life, and even though I wanted to be married and have my first child by twenty-five, the time frame was more like wishful thinking than an actual plan. (My younger brother may be partially to blame for my "wishful thinking." He told me when we were in college that he didn't think I'd ever get married, that my personality wasn't

suited for finding someone to love me, though he never would explain what he meant. But usually he'd say things like that when we were in a fight and he was trying to punch and claw his way to a petty victory, so I tried not to let his comments affect my outlook on my future.) I've always been a person who plans as much as I can, but I also realize I can only plan so much before "life happens."

I went to college and majored in journalism, but instead of being a newspaper layout editor, I teach high school English. I wanted to stay in Chattanooga after I graduated, but I accepted a job back home in Jackson. I didn't expect to meet anyone worth marrying in Jackson, but I met and married Matt there (but in all fairness, he is from the Midwest, so it's kinda like I was right about that one). I never dreamed I would move to Florida and continue to teach English, but here I am, making more money as a teacher than I ever would in journalism.

Over the past five years, my life has turned out the opposite of what I wanted, and I'm better for it. And since moving to Florida, and liking it enough to put down roots and build a house, I have realized that all I really want out of life is a job that interests me, and family and friends who love and support me. But lately, it seems like every day on Facebook, another friend, old or new, is giving birth or finding out they're pregnant. While I am excited for them and all their happiness and good fortune, I find myself feeling bitter — I'm jealous that they have had a maternal drive that has finally been realized. That they are able to project confidence in their new role as mothers, and I question if I will ever have that same maternal instinct. And yet, I find myself drawn to them and not being able to look away. It's a love-hate relationship I have with these people from the other side of cyberspace.

A Web of Genes

One night while visiting Clay and Susan, my parents-in-law, the conversation turned to the topic of family history and when their families came to the United States. Susan went into Clay's home office and retrieved a red folder filled with typewritten pages faceted by silver brads of Clay and Matt's Riviere ancestors and anecdotes of the family's immigration journey.

For hours, we sat on the white carpeted floor of the living room and poured over the words transitioning distant relatives from Les Salles-du-Gardon, France to Saint Pierre – a French owned island off the coast of Canada – in the (probably) early 1870s, and eventually settling in Roanoke, Illinois on January 28, 1889. When we reached the page of direct descendants that listed Clay and his siblings, I was both overwhelmed and filled with inspired-awe of the power of knowing where your family comes from.

“I know my family has been here long enough that I am a direct descendant of someone who fought in the American Revolution, but I don't know anything like this.”

Clay blinked his eyes and jerked his head forward as he exhaled loudly, a typical expression of his to indicate surprise. “But that in its own right is beyond impressive.”

“I know. And I’m not trying to down play how cool I think it is to be related to someone who fought in the Revolution, but he is where what I know about my family ends. I have a few guesses, but I don’t know for sure where my ancestors come from.”

Matt chuckled to himself. “Going back that far, you probably popped out of the ground in the colonies!”

And for a while, I half thought he might be right. I created an account on a genealogy website and focused on just direct lines trying to find anyone who came to the United States from somewhere else. For the several family lines I found leads on, I went back to 1700 before hitting a dead end, and people were still being born in either Virginia or North Carolina. So I gave up.

Recently, I decided to try again, and I’ve had much better luck. Although I haven’t done anything differently, I’ve, theoretically, now found four immigrants in my family history.

On my maternal side I have:

1. Izrael Moore – born in 1712 in Armagh, Northern Ireland. Izrael came to the United States to receive a land grant in South Carolina.
2. Robert Depriest – born in 1669 in Nimes, Gard, Languedoc-Roussillon, France
3. Michael William Davidson – born in 1665 England

Paternal side:

1. Joseph Bridger – born in 1627 in Dursley, Gloucestershire, England. He was a Royalist who came to the United States to escape persecution from Oliver Cromwell.

In finding these ancestors who were born in other countries and taking my other family lines as far as I can go for now, I wanted to include the siblings of my great(s) grandparents. I didn't realize at the time how painstaking of a task it would be, even in just beginning with my parents' maternal lines.

Maternal:

Nancy Andrews – b. abt 1799

Hugh Barnett (1820-?), *Mary Ann* (1823-1897), William Andrew (1825-?), John A, (1826-?), James R and Pleasant W (1827)

Mary Ann Depriest

Nancy Elizabeth (1842-1865), Artemesa Jane (1843-1844), James Garrett Dallas (1844-1861), Sara Bird (1848-1926), Emiline Hart (1850-1913), *Nona Atlantic* (1852-1932), Virginia Parlee (1854-1930)

Nona Atlantic Davidson

Mary Ellen (1874-1946), James Aquilla (1875-1971), William Harvey Dallas (1875-1947), Sarah Jones (1886-1941), Dury Ann (1882-1956), Sadie Atlantic (1889-1939), Charles Vesper (1891-1971)

Mary Ellen Spencer

Ulric (1889-?), *Nona McFerrin (1899-1991)*, Rudolph Moore (1901-?), Eric (1905-?), Iva (1910-?)

Nona McFerrin Moore

Mary K (1922-1930), John C (1926-1963), *Rose Nell (1927-1989)*

Rose Nell Sledd

David Wayne (1951-present), Paul Leon (1954-present), *Cynthia Nell (1956-present)*

Cynthia Nell Lowe

Hayley Nell Martin (1990-present) and Clayton Randall Martin (1992-present)

Paternal:

Rachael Ross – born 1804

Martha (1822-?), William Riley (1825-1872), Louisa (1827-1828), Rachel Kiziah (1829-1900), *Mary Caroline (1831-1912)*, John W (1833-1893), Harvey (1836-1893), Evaline (1839-1850), Edward Augustus (1841-1941)

Mary Caroline Pierce

John Malcomb (1859-1935), Christopher C (1861-?), Martha Jane (1863-?), William Christopher (1865-1944), Nancy Ann (1868-1950), *Rachel Parlee (1870-1962)*
Delia A (1872-?)

Rachel Parlee McKenzie

Jesse Lee (1896-1968), *Annie Estelle* (1902-1939), Ruby E (1905-?)

Annie Estelle Allen

James Homer (1924-2009), *Ruby Wilma* (1926-1997), Vernie Genola (1928-1984), Verlie Geneva (1930-2015), Robert Earl (1932-2008), Franklin Chester (1934-1997), Shirley Francis (1937-present)

Ruby Wilma Bridges

James Randall (1947-present) and Richard Bruce (1951-present)

James Randall Martin

Hayley Nell Martin (1990-present) and Clayton Randall Martin (1992-present)

Looking over this information and the other pieces genealogy website users have found on my distant relatives, it becomes clear I come from a long line of very fertile women, which leaves me to wrestle with the facts I spent the past year and a half gathering. All of the reading I did about PCOS after first being diagnosed told me I inherited the syndrome. When I told my mom about my diagnosis through the Bluetooth of my car on my way home from school the day after the nurse called me, she asked the typical “What is it?”, “How does it affect you?”, “How do you treat it?” questions. And as I sat down on the couch with Pip in my one-bedroom apartment she asked,

“What caused it?”

“From what I’ve been able to read so far, it’s genetic.”

Silence hung in the air.

“Oh. So I gave it to you?”

“Mom, it’s not the flu.”

“Uh-huh.”

“It probably is some recessive gene you and Daddy both have somewhere that met up just the right way in me. It’s nobody’s fault.” (Though, now looking through my limited genealogical research on my extended family, I have yet to find a woman in my tree who got married and did not have children, which discounts my recessive gene theory.)

“Okay,” she said in a curt tone I knew all too well. It was the same one she’d used whenever her feelings had been hurt and she’d shut down, and growing up, I had been on the receiving end of that tone more than anyone in my family. Most of my childhood memories of my mom involve her being in bed, sick – either with migraines or breast cancer – her reading in the “front room,” or us being in a fight.

Matt was present for more than one of our knock-down, drag-out fights that left my mom shut-down in the living room and me crying in my bedroom, and each time, when the dust settled, he gently suggested that I had provoked the intensity of the argument. “You’re just so...similar,” he once told me. “You’re both stubborn and refuse to be wrong. You just need to learn to let some things go.” And eventually, I did learn.

“It’s not your fault,” I reassured her.

“Okay...How was school today?”

At the time, I had been upset that she changed the subject entirely. I was still processing everything the nurse had told me over the phone and that I had read. I wanted to talk it through with my mom, but now looking at the litany of names, dates, children, and siblings on my family tree, I understand her guilt and confusion. My PCOS research was blaming my infertility on her DNA, but the actual fertility proof in the family tree didn't line up like it said it should.

As I pour over what I have pieced together as my family tree, I wonder if there was a different way I could have genetically inherited PCOS, and I find a July 31, 2009 article that tells of a study presented to the twenty-fifth annual meeting of the European Society of Human Reproduction and Embryology in Amsterdam. The research found evidence that if a mother or father has a chronic disease at the time of conception, unfavorable conditions are created in the womb during pregnancy, which is associated with the development of PCOS. Unfortunately for my qualitative research – but great for my mom – my mom had a textbook pregnancy with no diseases, chronic or otherwise, and neither did my dad.

Another study conducted by Professor Michael Davies, which was presented at the same conference, suggested that mothers who have daughters with PCOS are 1.6 times more likely to develop high blood pressure in later life. My mom did develop high blood pressure, but it was in her mid to late thirties, not later life. So there is a potential connection to this study for my family, although it is not a clear-cut one.

I'm sure there is something to be said for the relationship between PCOS and DNA, but science isn't strong enough to definitively prove it yet.

Ills of Medication

August 4-8, 2014

Two weeks after I finished my first prescription of Prometrium, I finally got my period and was able to start taking my prescription for Clomid, to induce ovulation. I was excited about getting the ball rolling, but my excitement ended up getting sidelined. After only taking Clomid for two days, I am feeling sick.

There hasn't been a slow progression of symptoms like when you think you're coming down with a cold, but then your sneezing and postnasal drip takes a nasty turn for the worse and erupts into full-blown flu. No. This is like going to bed as healthy and germ-free as Vitamin C and waking up in the morning with a flu-strep combo; only the violent pain isn't in my throat, it is in my lower abdomen, and my nausea doesn't come in waves, it is constant. But on the bright side, I don't have the chills.

Doing the simplest things wears me out. I come home exhausted after going to the grocery store around the block for macaroni and cheese and pass out on the couch before making supper. Every time after these impromptu naps, I wake up curled up in a ball holding my stomach because I have severe cramps, and I feel like a character in Stephen King's *Dreamcatcher*, having an alien rip its way out from inside me, one deep, angry claw mark at a time.

I try stretching my legs out to see if stretching the muscles in my stomach would help, but it only makes the pain sharper, and I quickly recoil my legs, even though it doesn't do anything to ease the existing pain, no matter how tightly I pull them into my chest. So, I don't dare to move again until absolutely necessary. I wonder if I have a stomach virus, but I can't think of anyone I've been around who's been sick lately. When Matt comes home at night when I have the death cramps, he rubs the muscles in my stomach back and forth until I fall asleep.

At least whatever this is isn't happening during the school year. There's no way I could go and teach like this.

Making Timing Count
August 9-13, 2014

Every day, I call when I pass the McDonald's near our apartment, so Matt has enough time to catch Pip and put him in his crate, undress, and get in between the sheets before I get home and my turn starts. I sling my oversized purse that I use as a school bag on the chair next to the bar, and start taking off my clothes, one article at a time, as I walk down the hallway connecting the kitchen and bedroom – shoes, then blouse, unzip my skirt, and finish the rest beside the bed. It is the most blasé strip tease in the history of strip teases.

Growing up, I got half of “the talk” from my friends at school, and the other half from movies and TV shows. It didn’t take long to know there was a difference between making love and having sex, even though characters in 1980s Brat Pack movies severely confuse the two. And when I started having my own intimate encounters, I understood exactly how huge of a difference there actually is. But there is one type of physical rendezvous no one warns you about – timed relations.

As part of our regiment to get pregnant, we are to have “timed relations” on days ten – fourteen of my cycle. We weren’t given any specifics other than that – no every other day vs every day, no indication of position, or how long to lie still after it was over. So we did our own research, which was as inconclusive as not being told what to do. Everyone seems to have an opinion, but no one agrees. But we know one thing for sure,

we are going to try to make a baby every day of my window. We don't want to take a chance on missing my ovulation window (what we didn't know at the time was it takes forty-eight hours for a man to fully replenish his semen, so sex every day wasn't as efficient as we had hoped), and me end of up having to go through another month of Clomid and racking up more doctor bills. But our work schedules are making timed relations even more uninteresting and impersonal than scheduled sex already is. Matt works second shift at his lab, and I teach high school a few towns over, so there is, at best, a 20-minute span between me coming home and Matt leaving. There is no time for romance.

Kisses are given to speed up the inciting moment, not as foreplay. And the subsequent thrusts are hard and fast – not out of passion in the heat of the moment. But the sheer awkwardness this type of sexual encounter creates is enough to cause even hard and fast thrusts, to not get the job done. So when the clock is inevitability looked at and we realize there is roughly ten minutes left before Matt has to walk out the door, it is time to give some special attention to the reinforcements – my boobs. Not Matt giving attention to them. Me giving attention to them. Which, depending on how close to the finish line we are, can be as simple as a non-committal grab, to a full on grab and lick – neither of which, nor anything on the spectrum in between, does anything for me, but you do what you have to do to get the sperm, no matter how ridiculous you feel.

And once the semen comes, Matt grabs the pillow from his side of the bed and shoves it under my hips before running to the bathroom to clean himself up as much as possible. I set the timer on my phone for fifteen minutes for me to lie still to give the donated sample the best possible chance to swim up through my cervix. But even as

impersonal and robotic as our routine became, it never gets any easier for Matt to have sex and leave.

“You’re going to be late for work.”

“I know,” he’d say as he sits on the edge of the bed to put his shoes on. “But I feel bad. I want to stay and lay next to you like we do when we’re not trying to get pregnant.”

He rubs his hand over my lower abdomen and kisses it. “For good luck.”

I laugh. “I love you.”

“I love you, too. Have a good night.”

“You, too.”

Even though this exchange becomes as routine as the sex, somehow it seems to add a spark of sincerity to the previous 20-minute spectacle.

But even Matt’s desire to linger in bed with me isn’t enough to make any of the rest of the week more love-centered and allow us to truly be in the moment. In fact, it gets worse. Nothing changes, but it becomes less and less enjoyable to the point I hesitate walking out of my classroom in the afternoons, standing in front of the door with my fingertips on the light switches, staring at the ceiling, asking, “Do I really have to go home?” Not even the idea of a happy, healthy, bouncing baby can make the thought of sex enticing. And by the time the weekend rolls around when we actually have the time to make love like a relatively newly-wed couple should, we are so burnt out that there is nothing left in us to give to rally and give it the ole’ college try.

Facebook Newsfeed*September 2014*

Pregnant: Brooke, 9-2-14. Comment, “Oh my GOODNESS!!! Yay!! Sooo happy for you guys that’s gonna be one good lookin baby!”

Happy Spouse, Peaceful House
October 2015

Matt's family is from the Czech, Bulgaria, Romania region. There are still distant cousins there. Matt's mom took Czech in high school, and we eat pierogis at family dinners. Matt called his grandmother *Bubbie* – which is Bohemian, from the *old country*. So, when I start looking for a Plan B, if things don't work out, it makes more sense for us to adopt from Bulgaria than some other random country like Burkina Faso, right? Sitting on the couch, I swipe through pictures of Bulgarian Roma children, waiting to be adopted. In every picture, each eye twinkles with cautious hope. Each smile gleams with coy excitement. Each unsure stance reminds me of my own. Perhaps we are destined to comfort and love each other – to be each other's second chance at a family. I send Matt screen shots of the youngest elementary school-aged children on the Waiting Children list. But Matt tells me to stop. He doesn't want school-aged Bulgarians. Matt wants our baby.

Facebook Newsfeed
October 2014

Gender Reveal: Brooke, 10-20-14. Comment, “My dream was wrong, but a boy is great! YAY!”

Birth: Brittney 10-30-14. Comment, “Congrats he is so precious <3”

Paper or Cotton?*November 14, 2014*

I'm not sure if it's comforting or annoying that my appointments with my OB/GYN have been uneventful and almost identical. The only difference is sometimes I'm told to completely undress, and others I'm told to undress from the waist down. It all depends on the type of exam Dr. Jennings plans on conducting. If I'm told to completely undress, it's a pelvic and breast exam; if I'm told to undress from the waist down, it's just a pelvic exam. The nurse who takes me back to my exam room is new, or at least I've never seen her before. She's young. She's maybe 5'4 – not much shorter than me – and has bob-length dark brown hair, which creates a harsh contrast against her fair skin. After turning down the two familiar hallways of Dr. Jennings's corner of the second floor of the clinic, she opens my exam room door to let me in.

“Undress from the waist down, and I will be back in a few minutes to check on you,” she says.

“Okay.”

I wore a dress to work today, so I just take off my sandals and fold and hide my underwear in my purse on the bench behind the cream-colored privacy curtain before draping the paper blanket over my lap. I don't know why I hide my underwear. It's not like the nurse or Dr. Jennings have never seen a patient's underwear before or would even notice them laying out in the corner. They're not dirty or a scandalous black, lacy

thong; they're white, covered in purple polka dots with a cheeky cut. They're cute. When the nurse comes in to take my temperature and blood pressure, her fresh-out-of-college face contorts as she gives me and my black cotton dress a once over.

"Aren't you going to undress?" she asks.

"I thought since you said to undress from the waist down that I just had to take my underwear off since I was wearing a dress."

"Most people fully undress..."

I slide off the exam table and plant my bare feet on the icy tile floor.

"...but you don't have to."

I keep walking toward the bathroom door that adjoins my exam room. Each step feels like I'm getting a small electrical shock from the cold of the white tile, even though the room itself is a comfortable temperature.

"Oh no. You've already made me feel awkward. I'm changing,"

When I come out of the bathroom, I'm wearing a sleeveless, white paper robe that opens in the front, and the nurse is gone. Almost as soon as I sit back on the exam table and recover my lap with the paper blanket, there is a knock on the door, and Dr. Jennings comes in with my chart. He places it on the counter next to the sink and starts reading over it. He's going to ask me if he's ordered a semen analysis on Matt, for the fourth month in a row.

Wait for it... Wait for it...

"Have we done a semen analysis on your husband yet?"

There it is! I laugh out loud. I can't help it.

"Have I asked you that before?"

“Yeah. You ask me every month. He’s had one, and it was normal”

I can even see the note he wrote and circled on my chart last month. Of course, I don’t know for sure the note is talking about the semen analysis, but he definitely wrote and circled it immediately asking me about Matt’s semen analysis last month.

“Okay. Has anything changed since last month?”

“No, sir. Everything’s the same.”

“Okay, well, let me get my nurse so I can do your exam.”

When he returns, Usual Nurse, who is in her early sixties and has salt and pepper hair, is with him. When my feet are in the stirrups of the exam table, Dr. Jennings sits on his stool, rolls over to me on the table and inserts a speculum to proceed with a regular pap smear exam. At the end, he stands up and leans over me as he uses his fingers to feel inside my uterus as he presses down on my stomach.

“Why did they have you undress?”

“I had only taken my underwear off since I was wearing a dress, but the first nurse said to undress completely.”

“That’s odd. She knew you were only having a pelvic exam today.”

Schrodinger's baby

In 1935, Erwin Schrodinger, an Austrian physicist, came up with a rather colorful explanation, or as Schrodinger called it, a thought experiment, for a quantum mechanics theory known as quantum superposition, which is where particles exist in multiple forms at once.

In the thought experiment, a cat, a vial of poison, and a radioactive source that has a fifty percent chance of emitting radiation are placed in a sealed box. If a monitor inside the box detects any radiation, the vial is shattered, which releases the poison, and kills the cat. But until the box is opened, the cat is simultaneously dead *and* alive. It isn't until someone looks in the box and sees the cat, that the cat becomes dead *or* alive, which begs the question of when quantum superposition ends and reality becomes one path or the other.

So it is with trying to get pregnant. Each month, I take my medicine to start my period, I take my medicine to ovulate, I have timed relations, and I wait. Each day I feel more and more maternal, entertaining the idea I am carrying my own creation of love and cells. But until I get either a positive or negative pregnancy test result, I am simultaneously pregnant and not pregnant. I hope, and I feel every muscle contraction my body makes, and I just know that it has to be true. And I start pinning baby food recipes on Pinterest, and I stop in stores to point out the cute baby clothes to my husband, and I imagine what my baby will look like during the first sonogram.

But when I get a call from my doctor, and he says my pregnancy test came back negative, my maternal feelings come to a screeching halt. Thirty seconds before, I had a chance; there was hope. But the test was opened, and my baby isn't a baby – just a dream deferred.

So, for me, I wasn't pregnant the moment the test was read, but for my doctor, I wasn't pregnant the moment I didn't ovulate.

Facebook Newsfeed
November 2014

Gender Reveal: Paige, 11-15-14. Posted a video of her and her husband opening a giant box and blue balloons floating to the ceiling.

135 Likes.

III.

Eagerly Receiving Next Month's Instructions from My OB/GYN
December 2014

“There's nothing left I can do for you.”

Money Matters
December 2014

When I was in eighth grade, my gifted education program went on a field trip to hometown historical landmarks as a capstone for our unit on Jackson, Tennessee history. We wound along the peacefully shady paths of Riverside Cemetery as actors recalled important moments in their deceased historical figures' lives, visited all the metallic painted landmark signs downtown – including where Davy Crockett delivered a stump speech – and toured Britton Lane Battlefield after stopping for lunch at the mall.

That day the tangy and sweet smells of the Chinese buffet drew my best friend and me in, directing our path to its counter in a series of straight lines, zigging and zagging in and out of consumers. As we peered closely through the glass at our many chicken and beef entree options, I noticed menu above our head and saw the eight dollars per pound sign. I reached into the tan crocheted purse I was too young to actually need and pulled out the tri-folded ten-dollar bill my mom had given me that morning before getting out of the car in the school's carpool line. I got nervous.

“So I have ten dollars. Do you think it'll be enough?” I unfolded and refolded the bill and pressed it into my right palm, hiding it, protecting it. My friend pulled out the twenty dollars her mom gave her.

“I think so.”

“It’s eight dollars a pound. I may not have enough.” I had no clue how much food a pound of rice and chicken actually was. “If I don’t have enough, could you let me use some of your change?”

“You’ll be fine.” She stepped up to order.

“But if I’m not?” I fidgeted with the short edge of the worn bill, parallel with my clinched fingertips, my blood draining from my hands, rushing to my cheeks.

“Yeah. Sure.”

That afternoon my mom asked for her change, and I proudly handed her back \$1.19.

Unfortunately, this was not a true moment of triumph for me. My money anxiety followed me across the state to Chattanooga when I went to college. I refused to ever check my checking account balance because it only dwindled throughout the semester (even though I worked for the university’s newspaper, and it essentially was a full-time job, I was only paid about three-hundred dollars a month), which caused me real anxiety.

On the rare occasion I did log on to see how much was left, I would get nervous as the website loaded, my forehead would sweat, the back of my neck would flash cold, and I’d begin to feel light headed. All the while, I used my left hand to cover the screen of my laptop until I mustered up enough courage to look, convincing myself that the balance would going to be either less than \$500 or negative, depending on how late it was in the semester.

It's going to be negative.

I'm going to have to ask Dad for money.

It's going to be negative, but it'll be okay.

After he yells at me, he'll transfer some money and save me, but it'll still be awful to ask.

It's going to be negative.

Usually, when I moved my hand down, my body collapsed in relief that I had more money available to me than I had tricked myself into believing.

But since getting married, I have assigned Matt the responsibility of tracking the checking account, and I haven't looked at it once. Even though we both have full-time jobs and have money coming in twice a month, I can't get past my old anxiety. My stomach turns flips, and I get the same flash of cold on the back of my neck when Matt opens the SunTrust app on his phone to check and see how much spending money we have after bills.

So thankfully, the checking account isn't immediately affected when Matt and I sit down on the couch across from our Christmas tree to discuss how much money we are willing to spend in trying to have a baby with the help of a Reproductive Endocrinologist – a doctor who specializes in helping couples with infertility, or other reproductive issues, have a baby.

Although we haven't had our consultation appointment to find out exact dollar figures yet, we have a ballpark figure of nine-hundred dollars per insemination attempt. One month before we sat down to have our dollars and cents conversation, I had wandered into the ninth-grade English teacher's room after receiving a voicemail telling me that my blood test showed that I was not pregnant, and I had not ovulated for the fifth month in a row. I sat in one of the student desks that faced her as she graded slips of grammar bellwork at a small table in the front of her classroom.

"Have you figured out how to get your kids to write an informative essay yet because I gave the tenth graders one today, and they smacked, hard, into brick walls."

"These freshmen still can't grasp the concept of writing a complete sentence and finding text evidence, bless'em. They tank every essay I give them." She held up a bellwork slip. "These cherubs don't even know what a noun is." The slip was covered in red marker.

The 2014-2015 school year was affectionately dubbed the year of brick walls and driving the "struggle bus" by my group of friends at work. Florida made "the shift" to Common Core which made our students jump a year and a half ahead in content complexity, despite being more than a year behind in content knowledge retention and reading level, and in the classroom, teachers were at their wits end as early as September trying to help students adjust to their new educational expectations across all content areas. In dragging our students – frequently kicking and screaming – up to par, we ran head-on into brick walls, or gaps in our students' knowledge that we didn't anticipate existing, which caused us to backtrack and take longer teaching a concept than our

curriculum maps allowed. But most teachers at least had the luxury of having taught their classes in the pre-Common Core era. I, however, was new to my set of classes. In my previous years of teaching, I taught eleventh grade English, but this year, the year of “the shift,” I was teaching tenth, which in Florida, along with being one of the most awkward years in high school, comes with a reading test that all students must pass to graduate, and my students frequently struggled. The school year was a long and bumpy ride, hence the aforementioned struggle bus.

“Today was supposed to be my informal evaluation. We had spent two weeks analyzing these texts in class, and today they were going to write about it. It should have been so easy! But when I gave them the informative prompt,” I propped my head up by pressing my fingers into my scalp to ease my building tension, “all hell broke loose! They couldn’t figure out what to write! And the principal who came to evaluate me was so startled with disbelief that she just turned around and walked out with eyes as big as silver dollars.”

“They couldn’t figure out what to write because informative prompts aren’t worded as a question?”

“Yes! Because there was no damn question mark!” My head collapsed into my arms on the cool, smooth surface of the plastic desktop. I rested there for a moment, working up the strength to sit back up. “I need you to work miracles before I get your kids next year.” My voice was muffled by my arms and the desk.

“Not a chance in hell.”

I sat up and whined, “Really?”

“You’ve got the Golden Group,” she explained. “They’re the smartest and best behaved grade of kids to come through this school in a long time, and I’ve got the worst. So. Good luck.”

“I can’t handle that kind of stress. Getting these kids to pass their test will be one of those miracles that I don’t think Jesus performs twice.”

I sat there for a few seconds, watching her grade more bellwork slips with swift strokes of her red marker and found myself fighting the urge to tell her about trying to get pregnant, and failing. And then, without any control or conscious thought, I word vomited my pregnancy struggles of the past five months. I have no idea what I even said to her. All I know is that I said it, all the while telling myself to shut up but not taking my own advice. Her facial expression did not change as she finished grading her final bellwork slip and looked up.

“I know exactly what you’re going through. To get our Baby Girl we went to an infertility doctor after trying for years on our own.” My heart and muscles melted, and I was overcome with peace. I found someone who understood. “We used IUI, which is essentially the turkey baster method. It’s super expensive, about nine-hundred dollars a pop, and we spent about eighteen grand total, but Baby Girl is totally worth it.”

“...Wow.” It was all I could think to say.

“It’ll challenge your marriage more than anything else, but if you can make it through it, you’ll have a much stronger relationship. At the time, I thought infertility was a struggle for her because it was unexpected. I felt confident we would fare better because I saw mine coming.

“If you and your husband decide to move on to a specialist,” she continued, “let me know, and I’ll give you the contact info for mine. I loved her!”

As I watch the white lights twinkle and dance off the red, green, and gold spherical ornaments on the Christmas tree, I try to formulate the question my nerves find least objectionable, but I can’t think of one, so I jump in, head first.

“How much do you think we should spend with the reproductive endocrinologist?” I ask Matt. Surprisingly, asking the question doesn’t cause any adverse physical reactions.

Matt looks up from the *Dark Summoner* game he is playing on his phone.

“How much did your school friend say it cost?” His response seems distant. His game still clearly holds his attention.

“Nine hundred dollars an attempt.”

“And how many times did she try?”

“I’m not sure, but she said she spent eighteen-thousand dollars by the time it was all over.”

Matt looks down at phone one last time before locking it and then turns to face me on the couch.

“Clearly we don’t have eighteen-grand to spend,” I continue, “so what will be our limit?”

“So, we’ll definitely have to spend a few thousand to make it worth our while, but probably not much more than that.”

“Agreed. Do we have that much in the savings account, or will we have to take some money out of your investments?”

“I’m okay with pulling money from stocks, but I’d rather use the money in the savings account first.”

“How much is in the savings account?”

“Look it up and find out.” His demeanor remains unchanged from when he turned to face me on the couch – calm and emotionless, like a client at a bank and he is the broker who controls whether I will receive a loan.

I become paralyzed with fear, and my vision plays tricks on me, creating false distance between me and him, zooming out like an overly dramatic use of camera angles in a teenage movie.

“Why don’t you look it up? I’m asking you about budgets. You look it up.”

“If you want to know, then you have to look it up.”

Matt unlocks his phone and opens a new app. I readjust myself on the couch so I can peer on to his screen as I move, and see the orange login screen of SunTrust.

“What is the balance of the savings account?”

Silence hangs in the air, and I see an unfamiliar mischievous gleam in Matt’s eyes. I brace myself. I’m unsure of what he is about to say, but I have a feeling it will be as ominous as the storm clouds that are rolling in, covering the stars that are visible above our patio across from my position on the couch.

“You have two choices,” he begins slowly. “You can either have a baby and foreclose on the house, or you can have the house and not have a baby.”

“What the hell does the house have anything to do with this?”

“Those are your two choices.”

“I don’t understand why I have to choose anything. We don’t need money for the down payment to the house, so that can’t be it.”

“Foreclose on the house, have a baby, or have our dream house and not have a baby.”

“Why would we spend so much money on trying to have a baby that we couldn’t afford our mortgage? That makes no sense. The whole point of me asking you how much we will spend on having a baby is to avoid something like that happening.” My hands and arms take on a life of their own. They flail in front of me, wildly interpreting my anger and aggravation. “And this isn’t my dream house, it’s yours.”

It’s true. During the three months we had looked at houses with our relator, I desperately wanted a 1920s bungalow, full of its original architectural character. We had even put an offer on one that had been overpriced for its neighborhood, but the owners refused to budge on their price, wanting to recoup the money they spent remodeling the home. Unfortunately, they had spent more on the remodel than the value of the home could carry, and we had to walk away from the house.

It was Matt who had wanted to build a new home, but in our initial search parameter, our budget couldn’t afford that either. Eventually, two towns over, I found a subdivision and a floor plan that we both liked. Realizing building a home was the best financial option and desperately wanting out of our one bedroom apartment, I agreed to stop our house hunt and sign the papers to start building. At the time, we both had been so happy to start a new phase in our lives. Now, I’m not so sure.

“House. Or baby?”

“What the fuck?!” I turn around so that my body is perpendicular to his on the couch. My anger has reached the point that I can’t stand looking at him any longer. As I stare at the black tv screen in front of me, I recall the words the ninth-grade English teacher had told me.

“It’ll challenge your marriage more than anything else, but if you can make it through it, you’ll have a much stronger relationship.”

“Look. I told you when we were dating that having a baby was going to be an issue, and I told you if that was going to be a problem for you, I was giving you an out. You didn’t take it then, but if you want to take it now, I won’t hold it against you.” I’ve always made a conscious effort to not threaten ending our relationship when we disagree, whether dating or married, but I can’t help but wonder if parting ways now will be best. “Do you want a divorce?”

Matt turns his head and stares at the Christmas tree. He says nothing.

So this is what she meant. This is how we end.

I really didn’t see this coming.

Realizing Matt has taken his ultimatum too far, he lets out a long, slow melancholy sigh.

“No. I don’t want a divorce.”

“Then what do you want?” I ask quietly. I look over at him, studying his eyes, hoping my husband has returned, replacing the alternate version of him I had been dealing with for the past ten minutes.

“Really, I just wanted to see which one was more important to you.”

“But clearly the ultimatum you gave me made me really upset. Why didn’t you just ask me point blank which one was more important?”

“I wanted to make sure that it was a one-hundred-percent truthful answer, and not what you thought I wanted to hear.”

“And I would have given you one, had you asked me like a normal person.”

We both turn in towards the center of the couch, facing each other once again.

“Earlier, you said we’d spend a few thousand dollars,” I continue, climbing to sit a few inches closer to him. “A few meaning three? Should we say we’ll try three times and budget for that? Three thousand dollars?”

“Yeah, that sounds good.” He closes the gap between us until our knees are touching.

“We can always revisit and adjust our budget later if we need to.” I lean my head toward his.

“Deal,” he says resting his forehead against mine.

Facebook Newsfeed
December 2014

Pregnant: Lauren, 12-21-14. Posts picture of 9-week ultrasound, “Chloe pointed out we’re having a baby duck, not a human baby...Can’t wait to meet our little duck”

First Impressions*January 6, 2015*

After waiting an hour in the lobby to be redundantly and intimidatingly grilled by our thin, harsh-nosed, curly-haired reproductive endocrinologist over the same sixteen pages of questions we had to complete and upload prior to our appointment, Dr. Goodman smiles and says “I have a good feeling about this. We’ll get you a baby.” As we leave her office for me to have some bloodwork done, we are finally, fully engaged and hopeful. We are entertained by the sperm menorah on the wall in the phlebotomy lab. By the sperm lapel pin on the phlebotomist’s name tag. By the office staff members fighting over toy-sized, bean-filled sperm.

The Reproductive Assistance Center

I. Diagnostic Procedures

A.	Lab/Hormone Assays	
1.	Follicle Stimulating Hormone (FSH).....	90.00
2.	Blood Pregnancy – Quantitative BhCG	90.00
3.	Progesterone	90.00
4.	Hemoglobin	28.00
5.	Urine Pregnancy	40.00
B.	Endometrial Biopsy.....	330.00
C.	Saline Infusion Sonogram	695.00
D.	Hysterosalpingogram (HSG or Dye Test) in office	760.00
E.	Sonograms (Ultrasounds)	
1.	Trans. Vaginal or Trans. Abdominal Ultrasound	350.00
2.	Antral Follicle Count	150.00
3.	Ovulation Induction, Oral Medications	150.00
4.	Ovulation Induction, Injectable Medications	210.00
5.	Intrauterine Pregnancy (IUP)	350.00

II. Therapeutic Procedures

A.	Intrauterine Insemination	
1.	Intrauterine Insemination (IUI) with Husband/Partner Sperm	360.00
2.	Intrauterine Insemination (IUI) with swim up	450.00
3.	Intracervical Insemination (ICI) with Husband/Partner Sperm.....	280.00
4.	*Therapeutic Donor Insemination (TDI) with IUI ready specimen	200.00
5.	*Therapeutic Donor Insemination (TDI) with ICI ready specimen	360.00
	Does not include the cost of donor sperm specimen and associated shipping costs	
B.	Injections	
1.	Progesterone in oil per 50mg	35.00
2.	MMR Vaccine	72.00
3.	Gardasil Vaccine (each)	185.00
4.	Injection/Vaccine Administration	35.00
5.	Injection Training Class (not covered by insurance)	60.00

Fees quoted are subject to change and apply to serviced performed and The Reproductive Assistance Center only. It may be necessary to utilize an independent laboratory for additional testing. You may be responsible for additional charges that may be billed to you by the testing laboratory.

The Reproductive Assistance Center

Patient Name: _____ Account #: _____ Date Verified: _____

BENEITS FOR INFERTILITY CONSULTS AND DIAGNOSTIC TESTING:

1. Are there any exclusions or limitations for infertility benefits on my insurance policy? Yes No
 - If yes, see below: _____
2. What is the lifetime max for Infertility benefits: \$ _____ How much has been met? \$ _____
3. Do I have an Individual Deductible or Family Deductible?
 - If yes, how much is my deductible? \$ _____ How much of my deductible has been met? \$ _____
4. Do I have an Individual Out of Pocket Maximum or Family Out of Pocket Maximum?
 - If yes, how much is my Out of Pocket? \$ _____ How much has been met? \$ _____
5. Does my copay and deductible go toward my out of pocket Maximum? Yes No
6. Are **Office Visits** with a specialist billed with diagnosis of **628.9, Infertility Unspecified** covered? Yes No
 - If yes, is an authorization required? Yes No
 - What benefit applies: Copay \$ _____ Coinsurance _____% Deductible (see above)
7. Is **Laboratory Testing** with diagnosis **628.9, Infertility Unspecified** covered? Yes No
8. Are **Abdominal** or **Vaginal ultrasounds**, procedures 76856, 76830, covered when billed with **256.1, Ovarian Hyperstimulation**? Yes No
 - If yes, is authorization required? Yes No
 - What benefit applies: Copay \$ _____ Coinsurance _____% Deductible (see above)
9. Are **Antral Follicle Count ultrasounds**, procedure 76857, covered when billed with diagnosis **628.9, Infertility Unspecified**?
 - If yes, is authorization required? Yes No
 - What benefit applies: Copay \$ _____ Coinsurance _____% Deductible (see above)
10. Are **Endometrium Biopsies**, procedure 58100, covered when billed with diagnosis code **628.9 Infertility Unspecified**? Yes No
 - If yes, is authorization required? Yes No
 - What benefit applies: Copay \$ _____ Coinsurance _____% Deductible (see above)
11. Does my insurance cover **HSG's**, procedure 58100, 74740, Q9967, billed with **V26.21, Fertility Testing**?
 - If yes, is authorization required? Yes No
 - What benefit applies TO 58340: Copay \$ _____ Coinsurance _____% Deductible (see above)
 - What benefit applies TO 74740: Copay \$ _____ Coinsurance _____% Deductible (see above)
 - What benefit applies TO Q9967: Copay \$ _____ Coinsurance _____% Deductible (see above)
12. Does my insurance cover **Saline Infusion Sonograms**, procedures 58340, 76831, billed with diagnosis code **628.9, Infertility Unspecified**?
 - If yes, is authorization required? Yes No
 - What benefit applies TO 58340: Copay \$ _____ Coinsurance _____% Deductible (see above)
 - What benefit applies TO 76831: Copay \$ _____ Coinsurance _____% Deductible (see above)

BENEFITS FOR INFERTILITY TREATMENT:

1. Is **Artificial Insemination** (AI), procedure(s), 58322, 58323? Yes No
 - If yes, how many cycles are covered under my policy? _____ How many cycles have been used? _____
 - If yes, is authorization required? Yes No
 - What benefit applies: Copay \$_____ Coinsurance _____% Deductible (see page 1)
2. Is **In Vitro Fertilization** (IVF), procedure(s), 58970, 58974, covered? Yes No
 - If yes, how many cycles are covered under my policy? _____ How many cycles have been used? _____
 - If yes, is authorization required? Yes No
 - What benefit applies: Copay \$_____ Coinsurance _____% Deductible (see page 1)
3. Is **ultrasound monitoring**, procedure 76857 for **Timed Relations** covered when billed with diagnosis code **628.9, Infertility Unspecified**? Yes No
 - If yes, is authorization required? Yes No
 - What benefit applies: Copay \$_____ Coinsurance _____% Deductible (see page 1)
4. Is **ultrasound monitoring**, procedure(s) 76857, 76830 for **Artificial Insemination (AI) or In Vitro Fertilization (IVF)**, covered when billed with diagnosis code **V26.81, Monitoring for Infertility Treatment**? Yes No
 - If yes, is authorization required? Yes No
 - What benefit applies: Copay \$_____ Coinsurance _____% Deductible (see page 1)
5. Will my insurance cover **ultrasounds once I am pregnant**, procedure code 76817, billed with following diagnosis codes: **V23.0, Pregnancy with history of infertility/High Risk** Yes No
 - **632, Miscarriage** Yes No
 - If yes, is authorization required? Yes No
 - What benefit applies: Copay \$_____ Coinsurance _____% Deductible (see page 1)

GYN BENEFITS:

1. **How many Well Woman Exams are covered by Year?** _____
2. What are my benefits for a **Sick Office Visit** with a specialist? Copay \$_____ Coinsurance _____% Deductible (see page 1)
3. Are **Venipunctures**, procedure 36415, considered to be inclusive when billed with laboratory testing? Yes No
 - If yes, is authorization required? Yes No
 - What benefit applies: Copay \$_____ Coinsurance _____% Deductible (see page 1)
4. Are **Transvaginal ultrasounds**, procedure code 76856, covered? Yes No
 - If yes, is authorization required? Yes No
 - What benefit applies: Copay \$_____ Coinsurance _____% Deductible (see page 1)
5. Will my insurance cover **Endometrium Biopsies**, procedure code 58100? Yes No
 - If yes, is authorization required? Yes No
 - What benefit applies: Copay \$_____ Coinsurance _____% Deductible (see page 1)
6. Will my insurance cover **Saline Infusion Sonogram** (SIS's), procedure codes: 58340, 76831? Yes No
 - If yes, is authorization required? Yes No
 - What benefit applies TO 58340: Copay \$_____ Coinsurance _____% Deductible (see page 1)
 - What benefit applies TO 76831: Copay \$_____ Coinsurance _____% Deductible (see page 1)

The information listed above is based on the benefits given to us by the customer service department at your insurance company. It is important to understand that this information is not a guarantee of benefits. Your insurance company remains your responsibility.

Conflicting Interests. We Wait for July.*February 16, 2015*

After my original consultation appointment with Dr. Goodman, I have dye painfully injected into my fallopian tubes to test for blockage, and saline subtly inserted into my uterus to check for thickening of the endometrium and polyps. And then I wait a month for another consultation to get my results.

HSG dye test – Normal.

Saline Infusion Sonogram test – Normal.

Egg count – Normal.

Egg quality – Better than Normal.

“Based on the pain you described from when you were on birth control, I think you may have a little endometriosis. I want to schedule a hysteroscopy surgery. When works best for you?”

The time is quickly approaching where my students will take their state-made, graduation-requirement, standardized tests at school, and I can’t bring myself to miss an entire week of school while I recover from a surgery. So, the alive trump the non-existent.

Facebook Newsfeed
April 2015

Birth: Paige, 4-23-15. 304 Likes.

Facebook Newsfeed*June 2015*

Pregnant: Kindra, 6-25-15. Post picture of husband kissing her cheek as she holds an ultrasound photo, “ETA: 12/6/15”

IV.

En Español*July 6, 2015*

Today was my second wedding anniversary and tomorrow is my pre-op appointment, and I am lying in bed, thinking about meeting the new neighbors last Tuesday.

Matt was bringing the green bulky recycling and trash cans into the garage when I poked my head out the door asking him to look for the paint lid key. I had stared at the stark white walls of our new house for six months and couldn't take another second of it. He told me he'd look for it, but I needed to come meet our neighbors. "The wife came over and started talking, but she only speaks Spanish and I told her you speak Spanish." I reminded him that I know enough to be dangerous when talking with a small toddler. But he said it didn't matter, that we needed to be friendly, so we walked onto the driveway, and the woman who looked more like a shadow in the hot glaring sun, started walking towards us from her yard, and we met in the middle of the sidewalk between our two houses. We exchanged *Holas*.

"Me llamo N(?)" Her name was one I didn't recognize and being unprepared for a conversation in Spanish, it didn't stick.

"My name is Hayley. He is Matt." I forgot the word for husband, and the only word I could think of was boyfriend. I figured we'd get weird looks if she noticed our wedding rings and I called him my *novio*.

"Hablas español?"

“Yes, but just a little.”

“No hablo ingles.”

“Ah. I can read better than speak Spanish.”

“Ah. Tienes bebes?”

“No. We don’t have any babies.”

“No tenemos babes.” I am not sure if she doesn’t have any babies that will visit them or if they never had children.

“Oh.”

She said something in Spanish that I didn’t really understand, so I smiled nervously and apologetically and shrugged my shoulders. She reworded her comment, but I didn’t understand any better. I half laughed, forced a smile, and apologized. Realizing we’d reached the limit of our conversation, N waved for her husband to stop mowing the grass and come over. “He speak little English.” The man introduced himself as Alberto. Though the conversation was the piecemealed together, we all parted ways after agreeing that we’d be around to help if the other needed.

As awkward as it was, speaking with the Spanish couple was nice. But tonight, instead of sleeping and reflecting on my first two years of marriage, or being anxious about my pre-op appointment, my brain won’t stop thinking of sentences in Spanish. Other answers I could have given. Questions I could have asked. Random things I could say to them later when they’re sitting on their porch. Words I need to look up to say in common neighborly exchanges.

After three semesters of Honors Spanish in high school and four semesters of Spanish in college, why is this the best I can do? Why wasn't I taught Spanish in elementary school? Why don't "they" do it now? Because it isn't a STEM/math and science class. Because it isn't a trendy learning strategy with trendy graphic organizers. Because it doesn't nicely fit into the reading power hour small group sessions. Because it wouldn't be on the reading standardized test. But never mind that most every industrialized country that ranks higher in education than the U.S. requires its students to be fluent in at least one language other than their primary language. Never mind that to be competitive in the global economy you need to be bilingual. Never mind that it takes more than a few semesters to become fluent. Never mind learning a country's language teaches you about its culture. Never mind learning about other cultures leads to understanding people. Never mind that understanding people leads to acceptance. Isn't that all any of us wants?

Sometimes You Know Yourself Better than Your Nurse: pre and post op.

July 10, 2015

This morning I wake up at 4 am to take my second shower with antibacterial soap in twelve hours. My pre-op instructions were to take a shower with antibacterial soap the night before and the morning of the surgery. I think it is overkill, but I do it – Better to be safe than sorry. Doctor's orders. Blah blah.

After finding comfy clothes that are socially acceptable, Matt and I make the drive to Tampa for the 7:30 am but get there at 6 am procedure. Once I am settled in my bed in Same Day Surgery pre-op, my pre-op nurse pulls back the khaki curtain that creates two of the “walls” in my “room,” introduces herself and goes over my paperwork.

“And what is the reason for your visit today?”

“To look for and get rid of any endometriosis.”

She then reads the technical wording of the reason I am there from the paperwork on the table at the foot of the bed.

“Are you allergic to anything?”

“Percocet.”

“Do you have any metal implants?”

“No.”

“Do you have any loose or false teeth?”

“No.”

“Have you eaten since midnight?”

“No.”

She checks off the appropriate boxes and signs her name on the paper. The pre-op nurse then she put my IV in my wrist, which hurts like a bitch every second of every minute. Apparently, the veins in my hand aren't straight enough to support an IV, which is why she opts for my wrist. Then the revolving door of medical personnel begins, and I meet my nurse anesthetist, anesthesiologist, and “the nurse in the room”, who all ask me the exact same questions After the second person asks me why I am there, I start telling them to read the paperwork on the table, that it is all correct. I don't see the point in telling them “in my own words” just to have it read back to me. It just seems more efficient. Besides, I'm too tired for all of this.

I get sent back into surgery at almost exactly 7:30 am, and when I wake up in the post-op recovery room, I meet my post-op nurse. She's large, with large, blonde hair, maybe. Her scrubs are purple. I can tell that without my glasses. I wake up extremely groggy, but I know for certain that I need to pee.

“I need to pee,” I say as I roll my head to the right to face Jerk Nurse sitting next to me.

“No you don't.”

“Yes, I do. Can I go to the bathroom now?”

“No. You had a catheter during surgery. You don't need to pee.”

I close my eyes, still very sleepy from the medicine, which probably doesn't help strengthen my case any.

“I understand. But I have to pee.”

“Fine. Do you want a bed pan?”

A bed pan? Hell no. That’s fucking embarrassing.

Besides. How would that even work?

And I sure as hell am not having someone else wipe me when I’m done.

“No.”

What a jerk.

By this point, I have been awake just long enough to feel the effects of the surgery, and start crying because my uterine insides were hurting so badly – and I do not usually cry when in pain. Thankfully, Jerk Nurse calls across the room for some more pain meds, and I drift back to sleep. But when I wake up again, I still have to pee. And she still tells me I don’t, and around and around we go again.

“Can I have my glasses?”

“No.”

“Why not? Can I please have my glasses?”

“You don’t need them.”

“Yes I do. Please give me my glasses.”

“Why do you think you need them?”

“Because I can’t see without them.”

“Fine.”

And finally she goes and gets my glasses out of my bag of clothes from Matt. I stay awake long enough for her to return with them and put them on.

Jerk Nurse finally wheels me back down the nondescript hallway into the pre-op room where Matt is allowed to visit me while I drink some juice and eat some crackers. As she stops me in front of my faded khaki curtain partitioned room, Jerk Nurse asks if I still want to go to the bathroom, and I say yes. She lets down the side rail of the bed, and before she can even help me, I get down, and stumble my way into the bathroom. Walking to the bathroom is harder to do under the influence of anesthesia in a hospital than alcohol in a crowded fraternity house. Once I get to the door, I swing it open, using my entire body weight, and pull it closed behind me as I walk in. I walk alongside the wall, placing one hand against it with each step I take. It is exhausting, like walking through quicksand, but there is a toilet at the end of my marathon, and I'm motivated. Once I get to my destination, I begin to pee.

Sure showed her. But then the door swings open, and Jerk Nurse is in the doorway.

"If you need any help, pull the rope," and she points to the rope next to the metal toilet paper holder.

If I wasn't so drugged, and I didn't have to pee so badly, I would be so pissed right now. She didn't even knock. Rude. I knew I should have locked the door.

I turn and see where she pointed. I don't know if I actually move as slow as it feels, but I see the red rope and concentrate extra hard to read the sign, "HELP" and the alarm system the rope activates.

When I get back to my curtained section I sip my apple juice and take a bite of one of the crackers I've been given to eat. It is limp and tasteless against my tongue, and I ask Matt to try it.

“You’re right. They’re not any good.”

“I’m glad it’s not just me.”

He smiles.

“You know, Dr. Goodman came and talked to me while you were in post-op.”

“Yeah? What’d she say?”

“She said the surgery went fine. She said she found and removed a little endometriosis, a cyst, and a polyp.”

“That’s not a lot, but at least it’s something.”

“What do you mean?”

I sip some more of my juice.

“I’m glad she found something to make the surgery, and the pain, and the money worth our while. I’d feel awful that we spent all this much money if she hadn’t found anything.”

When Jerk Nurse comes back to check on me, she asks how I am doing, and I tell her about the stale crackers. But instead of being hospitable and accommodating, she defensively rambles about how the crackers aren’t stale.

“We just got them in yesterday. There’s no way they’re stale.”

“The rest may not be, but these are. Matt even tried one.”

“Yeah, they are pretty soft,” Matt adds.

Jerk Nurse flings open the cabinet doors above the sink in my area and pulls down a new pack of crackers, pinches open the package, pulls out a saltine and takes a bite. I can hear the crunch of her cracker across the room.

“They’re not stale,” she quips.

“I heard the crunch of your cracker, but mine are stale.”

She huffs and puffs and mumbles under her breath. “Fine. You don’t have to eat the crackers.”

“Good. Because I don’t want to.” Really, I would have eaten them if she would have offered me a new package instead. But it’s too late for that now.

“Fine. I’m going to get a wheelchair to take you to the front door.” She turns and looks at Matt. “Go get the car and meet us outside.”

Facebook Newsfeed*July 2015*

Birth: Lauren 7-11-15. Post, “Our sweet Mason arrived this morning at 6:06 am July 12 (guam time)

v.

Waiting Game

August 1, 2015

When I was four years old, I begged my parents relentlessly for a dog – suppertime, bedtime, driving around town. One night while my dad was running my bath water, I undressed myself and gallivanted throughout the house until I found my mom wiping off the oblong wooden dinner table in the kitchen. Between my free-spirited giggles, I once again asked for a dog, but instead of acknowledging my plea, my mom lectured me on appropriate behaviors for young ladies. I sat on the laminate floor leaning against the dishwasher with my arms wrapped around my knees, further pressing them against my chest, repeating automated “yes ma’ams,” feeling like Eve after eating from the Tree of Knowledge, ashamed of both my actions and body.

But waiting for a positive on an ovulation sonogram is a very different set of tactical operations. You don’t keep asking your doctor to allow you to ovulate while running around the waiting room stark naked (not unless you want to get arrested and/or committed). Although, at this point, I have stripped for enough tests and procedures that I wouldn’t be phased in the slightest for strangers without a medical license to see me strut my curves, and I’m sure the women waiting in the lobby chairs at The Reproductive Assistance Center would peer over the outdated magazines from the coffee tables and nod understandingly. There are only so many times I can submit to a trans-vaginal

sonogram, have my stomach mashed on, and be told my follicles aren't long enough before I snap.

If my follicles aren't long enough and my uterine lining isn't thick enough, I'm not ovulating, and if I'm not ovulating, then I can't have the insemination procedure, and my ovulation medicine dosage will have to be changed, and I will start all over again next month.

That means one more month of not replacing my worn-out work clothes because hopefully I'll replace them with maternity clothes in a month or two. And it means another month of explaining to my non-coffee drinker husband that even though the larger bottle of coffee creamer would be the better buy, I want the smaller bottle just in case – I don't want to be wasteful. And then I have to explain why having the larger bottle might be wasteful. That when I'm pregnant I'm not supposed to drink caffeine, which is the sole purpose of my morning thermos-full.

I pass on buying the large bottle of my favorite peach Moscato that's on sale.

I recruit another teacher to be graduating class co-sponsor with me so there will be someone to go on the school's annual Grad Bash trip to Universal Studios in case I'm too far along in mid-May to go because I wouldn't be allowed to ride any of the fun rides and because of the stress of keeping track of fifty-plus seniors until 4 am.

I accept my principal's offer to be English Department Chair, not to pad my resume, not for the prestige (especially for being twenty-five years old), but for the extra thousand dollars I can put towards our baby fund.

I save the rebate from Lowes to buy paint for the nursery once we know the baby's gender.

I go ahead and buy the \$136 HCG shot I'll need when you do ovulate even though the money really isn't in the budget this month because I'm afraid the discount card will expire before I actually need it.

And, based on my previous experiences, this year I will have one current student and two former students who haven't graduated yet get pregnant. On accident. But a stitch in time saves nine, and good things come to those who wait.

Miscommunication – part one*August 13, 2015 (am)*

This month was supposed to be our first attempt at Intrauterine Insemination, so I took a new medication, Letrozole, to make me ovulate, in addition to my regular regimen of progesterone to induce a period and Metformin to regulate my blood sugar. During my first sonogram appointment, my follicles, which should have been nineteen mm if I was ovulating, measured ten mm. As I sat on the table covered in white wax butcher paper with only a white paper blanket draped over my bare legs, the nurse suggested I make another appointment for two days later. "...In case you ovulate later in 'the window.'"

This morning as Matt drives us to Tampa for the second sonogram appointment, I adjust the lap band of my seat belt, tugging to give myself more slack. It is too constricting against the dull groans of my abdomen muscles. But I am too excited to complain or pop an Ibuprofen. I read last night that cramps can be a side effect of ovulation, and I want to bask in all of my body's maternal process. I haven't dared to tell Matt; I don't want to ruin the surprise for him, or jinx myself. So, we ride in silence, listening to our favorite morning radio talk show, Johnny's House, out of Orlando.

We are called back into the sonogram room after waiting in the lobby for an hour. The nurse tells me to undress from the waist down, and she will return in a moment. I take my seat on the familiar waxy table and slowly smooth out the crinkles in

the white paper blanket over my lap when the nurse knocks, re-enters the room, and dims the lights.

“Go ahead and lay down,” the nurse instructs. I do as I am told until she says something that isn’t right.

“After your sono, you’ll go and get your blood drawn.”

“My blood drawn?” My elbows prop me up on the table as I look over my feet in the stirrups. “I’m here for a sono to see if I’m ovulating. I’m not supposed to have any bloodwork.”

The nurse grabs the patient file from the back counter and as she brings it closer to the light, I know it was too thick to be mine. My heart exhales out of grief and guilt that the woman the file belongs to has such a hard time getting pregnant, and here it is in the room with me as I am about to get the green light to make my IUI appointment.

“Are you Sarah?” the nurse asks.

“No. My name is Hayley.”

“Okay. This chart is for Sarah. Let me go get your chart.”

When the door closed behind her, I look at Matt, propped up against the wall in the corner.

“Did you hear anyone call Sarah?”

“No.”

“Okay. Me neither.”

The nurse returned a few minutes later with my chart and being my sonogram. She clicks her manicured nails against the plastic keys on the sonogram machine and moves the wand inside me to my far right, and then presses it against something

unpleasant on my left. The nurse removes the wand from my insides and returns the lights to normal brightness in the room.

“You’re definitely not ready,” she says as I sit up. “Your follicles are only seven mm. Get dressed and I’ll come back, and we’ll discuss where to go from here.”

I sit on the table, blankly staring at Matt for a couple of seconds after she closes the door before I slide each foot down to the floor, individually. I put my shorts back on and walk over to where Matt has quietly been watching the whole episode in the corner, out of the nurse’s way.

“I was so sure today was the day. I had cramps this morning and everything.” I stare at the floor.

“It’s okay. The nurse will probably change your medicine, and we’ll try again next month.”

Pull me into your chest. Hug me. Hold me. What are you feeling?

“It’ll all work out.”

When the nurse comes back, she says Dr. Goodman will look over my chart, change the dose of the Letrozole, and we’ll try again in September.

On the way home, Matt asks me if I am okay.

“Yes.”

“Are you sure? I don’t want any texts while I am on my lunch break at work about you finding kids to adopt.”

“You don’t get to tell me what I can and can’t do to make myself feel better.”

And with that, we ride with only the faint sound of the radio playing until we stop at McDonald’s for breakfast.

As the car is put into park in a parking spot in the front of the building, I turn to face Matt across the arm rest and cup holders.

“Are you disappointed I didn’t ovulate this month?”

“No.”

“You don’t feel sad or disappointed that I won’t get pregnant this month?”

“Well. Yes. But I didn’t want you to think that I blamed you for it not working out.”

“When we get bad news, or when things like this don’t work out, I need you to tell me how you feel. When you don’t, I feel completely alone. Don’t try to cheer me up like you did at the doctor’s office. It just feels like you’re dismissing what I’m feeling, like my emotions aren’t valid. Which only makes me feel even more alone.”

“I never thought about it like that. I never thought trying to cheer you up could back fire, but I understand what you’re saying.”

“Do you really? Because this isn’t the first time we’ve talked about this.”

“Yes. It does. So, what would you like me to do instead of cheering you up?”

“Be disappointed with me. Grieve with me, hold me, and support me. But don’t be as disappointed *as me*. And I am completely aware that what I’m asking you to do is impossible, but that’s all I’ve got.”

Text Message Conversation with Mary Kate and Rebecca
August 13, 2015

Hayley

I had my sonogram, and instead of my follicles
getting bigger showing that I ovulated, they shrank.

Rebecca

So is that good?

Hayley

No. It means that I don't have a chance this month
and will have to change my ovulation medicine
and try again next month.

Mary Kate

I'm sorry Hay. What will be the next course
of action and is there any way we can support
you in that?

Hayley

In a couple of weeks I'll start my medicine to induce a period and then increase my ovulation medicine dosage to see if that will work. As far as support, empathy rather than sympathy would be appreciated :)

Mary Kate

You got it

Miscommunication – part two*August 13, 2015 (pm)*

When I was leaving my Sunday School class one fall morning when I was three-years-old, my teacher helped me zip up my jacket as my parents were in the hallway picking up the drawing and Bible verse worksheet I had done in class. Being the friendly toddler that I was, I was busy talking to my friends, not paying attention to the rapidly approaching zipper clinching the molars of my jacket. I mindlessly moved my hand into its path and shirked out of a mixture of more surprise than pain when I was bitten. And like any hurt and frightened toddler, I cried. Even though my panicked teacher couldn't find any broken skin when she examined my hand, she offered me the stereotypical boo-boo fixer of a Band Aid, but I didn't want any part of it. My parents came over and told my teacher to give me a wet paper towel instead. Confused but desperate to calm me down, she did as they said, and, as my parents claim when telling this story, I was "healed" within seconds of putting the wet paper towel on my hand.

Sometimes simple, silly things save you from going over the edge. Sometimes, they're what shoves you, making you fall face-first off the cliff, smacking every jagged rock on your way down.

I have stayed up late tonight writing lesson plans at the kitchen table and am still at the computer when Matt gets home from work, exhausted at 3 a.m., which has become

pretty typical since his lab acquired a new client. But today, he has been up for almost twenty-four hours since we both had to get up at five a.m. to make it to our fertility clinic appointment. Tonight, even his gait seems to struggle as he sleepily waltzes to the bedroom.

Taking a break from my Word document templates and Learning Maps, I pull up my social media website and begin scrolling through my newsfeed. Within seconds, I come across a post from an animals' rights activist group of a golden retriever on his birthday. His two front paws that he hadn't quite grown into are resting on a dining room table, which helps him sit up and watch over the burning candles on his birthday cake. His owners, who presumably put his pink and green polka-dot birthday party hat on him hoover in the background ready to blow out the flames for him, as he stands there with his mouth open, smiling. On the outskirts of the image in a bold, imposing font, I am reminded "He's in your life for a moment, but you are his whole world," as I hear the jangle of Pip's dog tags hit the floor as he lays down beside me.

I scoop up my seven-pound ball of white fluff, and hold on tight as I give him kisses behind his ears and tell him I love him over and over. And as I am holding him cradled in my arms next to my chest, the phrase from the post loops through my head...

"...in your life for a moment...you are his whole world."

...and I feel guilty for all the love I have taken from him but haven't returned. I hope he knows that while I had to attend meetings and go to work, they are not more important than me chasing him around the living room or giving him "puppy snuggles" on the couch. And I kiss him some more, as guilt leaks from my eyes.

“...in your life for a moment...*he* is *your* whole world.”

Crying and sniffing, I carry Pip into the bedroom where Matt has just gotten to sleep, and I present our dog to him.

“You need to hug your puppy.”

“Huh?” Matt wipes his hands over his eyes.

“Hug your puppy.”

Hearing my shaking voice, Matt does what I ask without complaint.

“What’s wrong?” He puts Pip down on the bed.

I tell him about the Golden Retriever. “Pip is all we have. Parents aren’t supposed to bury their children.”

“But we knew Pip wouldn’t live forever, but he’s a puppy; that’s a long time from now.”

“No. He is our baby. What if we don’t have another one and he dies?” I grab a tissue off the nightstand and trace its edges with my fingers before blowing my tear-filled nose.

“Then we’ll just get another puppy.”

“No. You can’t replace your child. Pip is more like a kid to us because we don’t have a real baby. What if we can’t have our own baby and Pip dies? We won’t have anyone left. Parents aren’t supposed to bury their children.”

As I cry even harder, Matt leans over and puts his arm around me, and I put my head on his chest and tug at his shirt as my emotions became uncontrollable. We sit there on the bed until my crying runs its course.

“Why are you this upset? We haven’t even tried to get pregnant yet.”

I sit up. “Yes we have. We tried this month, and it didn’t work because I didn’t ovulate, and now we have to do this all over again next month.”

“So even though we haven’t tried the IUI yet...”

“Yeah.” I walk to the bathroom doorway and turn the light on and lean against the doorframe. “I feel this way every month we actively try to get pregnant and it doesn’t work.” I folded my arms. “Every time it doesn’t work, it’s a baby we’ve lost.”

Matt looks at Pip and then back at me. “I’m sorry you’re upset,” he finally offers.

“You really don’t get it, do you? I know it’s been almost ten months since we’ve had this conversation, but I felt this way every time Dr. Jennings’s office called and told me I wasn’t pregnant and didn’t ovulate. You watched me cry on our bed and told me the same thing, ‘But we haven’t even tried yet.’”

“Yeah. I vaguely remember.”

“It pisses me off. Why are we still having the same conversation?” But what makes me more upset, the thing I don’t consciously think of, is that neither one of us has recognized that “we” haven’t tried – I have tried. Sure, when we were still going to Dr. Jennings’s office, we had timed relations and attempted to get pregnant, but the sex wasn’t the variable in the science experiment, my ovulation medication was. I tried the medicine. I didn’t ovulate. And now with Dr. Goodman, I tried the new medicine. I didn’t ovulate. Today, for the seventh attempt in a row, my body has missed an opportunity to love and develop a life of our creating, to carry on the Riviere name, to bring my dad’s first grandchild into the world. Even though no one is putting those pressures on me, I put

them on myself. I want to give the people I love those things. But my body keeps letting me down.

Matt leaves Pip on the bed and talks to me. He rests his palms against my elbows.

“I’ll try to remember for next time. It’s been a while, but I’ll work on it.”

Facebook Newsfeed
August 2015

Pregnant: Jessica, 8-14-15. Post, “And then there were 2”

Gender Reveal: Jessica 8-15-15. Post, “Snuggling with baby brother”

To Help a Mockingbird
September 2, 2015

I am half way home from work when I see a Hispanic boy who can't be any older than six-years-old standing at the end of a driveway in a school-issued blue polo with white embroidery, still wearing his yellow and red cartoon-inspired backpack. As I approach him, he begins waving, his arm stretched out over his head. After I pass him, I watch him from my rearview mirror and see him drop his arm and head, and kick at the ground.

He wasn't waving. He was trying to flag me down.

I slam on the brakes and turn into the gravel entrance to someone's pasture and throw my SUV into reverse.

Someone is going to call the police on me. Someone is going to think I'm trying to kidnap him.

I drive back toward the driveway where the boy is, pull off to the side of the road across from him, and pull the keys from the ignition.

What am I going to do with him once I find out what's wrong?

I can't take him anywhere to get help.

People will think for sure I'm doing something wrong if I take him somewhere to get help.

The boy must have started walking towards me when I pulled over because he is already in the middle of the road by the time I get out of the car. As I take a step towards him, I see something moving in my peripheral vision. Cars are coming; I take his hand and quickly bring him towards my car, and ask him what is wrong. But he is sniffing and crying so hard as he tries to talk that I can't tell if he is speaking English or Spanish, let alone figure out what has happened.

Did he say "bully"? I don't see anyone else around. He must have said something else.

"It's okay. Take a breath, sweetie. What's wrong?"

I am still holding his hand. But this time I can't even guess at any of the words.

Maybe he got off the bus at the wrong stop?

"Hablas ingles?" He nods his head.

At least I know which language to listen for.

"Where do you live?"

He points in the direction I had initially come from and continues to speak through his panic-driven sobs, but I still can't even pretend to understand what he is saying. Then, a black truck pulls up beside us with its windows rolled down. A Hispanic man in his late 20s is inside.

"What's wrong?"

"I don't know. I can't understand him."

The man asks the boy, in Spanish, if his mom has a phone number he can call. The boy nods, but when the man asks him what the number was, the boy just stands in the middle of the road and stares at him. And about this time, the neighbor who lives in

the house next to where the boy had flagged me down meanders to the wall of bushes that line the edge of his property. The neighbor reminds me of Robert Ewell, complete with dusty overalls, a floppy workman's hat, and a superior, sour disposition. The man in the truck calls out to him.

"Hey, does this kid live here?" He points to the house on the other side of the neighbor's bushes.

"Yeah."

"Okay. Then can you watch him until his parents get home?"

The neighbor answers in a gruff tone and stolid face, "I don't know him that well."

There is no shrugging of his shoulders, change of vocal inflection, or any other body language that might indicate subconscious compassion for the boy's situation. Then, he turns his head, making eye contact with me through the rolled down windows of the truck.

"I don't know him that well." And with that, he walks back to where he and his friends had been working on something mechanical in the yard.

The man in the truck turns and looks at me. And there the three of us hold for a moment, the man and me in the middle of a county road under the relentless Central Florida sun with a crying child that neither of us can understand, while I hold his tiny hand.

At least we know he lives here.

But instead breathing a sigh of relief, the man and I are thrown into survival mode, feeling an immediate, unspoken sense of urgency.

The man reverses his truck and parks it behind my SUV as I begin looking through the boy's backpack. I find his agenda and flip through every page twice, praying to find a phone number. Nothing. The man looks through the other papers in the backpack with no luck either. All the while, the boy is whining, though noticeably more calm, as if he finally realizes we were doing our best to help him.

As I reach to put his agenda back, the boy sees a red car come around the bend in the road and come towards us. He takes a few running steps before I pull him back to me. But once I see the car pull into his driveway, I hold him still long enough to zip his backpack up before letting him go to run to and hug his mom as she gets out of the car.

Walden's Grove*September 8, 2015*

"I went to the woods because I wished to live deliberately, to front only the essential facts of life, and see if I could not learn what it had to teach..." –Henry David Thoreau

On my way home from a "routine pregnancy test" to confirm that I am not pregnant, even though I'm on my period, I drive down a dirt road lined for miles with newly pruned orange groves. The temperature is a brisk 85 degrees outside, and the air has a palpable placidity. Fall has officially arrived in the Land of Eternal Summer that is Central Florida. And as the red dirt particles float to the ground, my eyes are drawn to the vibrant greens and light hearted blues that surround me, and I rediscover the appreciation I have for living in my small town that is tucked away from the hustle and bustle of The Attractions.

After a dinner of a fresh, homemade turkey-burger patty with bell peppers and onions, I spend my evening on the couch reading *Wild* by Cheryl Strayed and drinking a glass of White Zinfandel. Since Matt works tonight, Pip keeps me company by curling up against my lap, and I am lulled by the deep purring of distant thunder and pattering of rain droplets against our screened in porch.

As I stroke Pip's silky, white hair and breathe in the sweet apple scent from the candle burning on the coffee table, my heart is truly content. Even if only for tonight.

Text Message Conversation with Mary Kate and Rebecca
September 22, 2015

Hayley

So I start my new dose of ovulation medicine tonight.

Mary Kate

Uh oh. Is this the stuff that makes you sick

[Clomid] or is this an all new medication

[Letrozole] all together

Hayley

New medicine. But last month's dose didn't work,

So I have a higher dose this month. It makes me nervous.

Mary Kate

Do they warn you about any potential side

effects or anything before they give you

this powerful stuff?

Hayley

Supposedly it doesn't have the same effects, but they
also didn't warn me about the first one. Sooo

Mary Kate

Gracious. Here's hoping this one doesn't
make you sick!

Sep 30, 2015, 9:23 PM

Hayley

I go for an ultra sound tomorrow to see if I'm
ovulating

Mary Kate

Fingers crossed and prayers up. What are
the possible scenarios coming out of this
ultrasound?

Hayley

I'm ovulating and I go back Friday or Saturday for
the insemination OR I'm not ovulating and go back
Saturday for another ultrasound to double check. If
I'm still not ovulating then we will have to abandon
the plan and do something else next month. If I am

ovulating during the second ultrasound then it is the same as the first possibility.

Mary Kate

Cheese and crackers. I am in awe of you – going through all this hell so strong. Has this medicine made you sick/caused any other symptoms?

Hayley

Not really. Which is great. So maybe, hopefully it'll work this time!

Mary Kate

Yes! I am joining you in hoping fully! What time is your appointment?

Hayley

2:30

Mary Kate

Got it, I'll be praying during that time especially.

Rebecca

Ahhh Hayley I will be thinking of you tomorrow

during that time!!!

Fingers are fo sho crossed!!!

VI.

The Spirit of Entrepreneurship

September 27, 2015

The summer after first grade, my brother and I had a lemonade stand with four other kids our age on our street. We spent hours coloring our “Lemonade Stand” and “25 cents” signs, mixing our lemonade, and pillaging the bathrooms in our houses for paper Dixie cups. When we were ready, we moved one of the other kid’s white and yellow Playhouse plastic table and chairs to the end of their driveway, and we set up shop at 3:30 pm, which in hindsight was poor timing on our part. Being young children, we were unaware how hot it would be sitting in the sun waiting for thirsty customers to flock to us. Instead, the cool liquid was too enticing for us to resist, and we spent the afternoon running back and forth to our houses to retrieve quarters to buy our disintegrating paper cups filled with warming juice. That day, on our tucked away, quiet street, we were our only customers.

As I’ve gotten older, I’ve frequently thought back to that afternoon as a reminder of how hard it must be to own and run your own business in the real world, and consequently, supporting local businesses, especially local farmers, is a passion Matt and I share.

When Matt and I lived in our apartment, we found the city's farmer's market that took up three blocks, and visited it religiously every Saturday morning. Our routine was always the same, we'd make breakfast, and while eating at our small, round kitchen table, we'd make a grocery list of the bread, vegetables, and meats we wanted to get at the farmer's market, and then we'd get Pip dressed, complete with a t-shirt and leash (yes, we were those people), and we'd make the trip as a family.

First, we walked up and down the street, checking out the produce at all of the booths to determine where we needed to buy the items on our list and who had the best deals. Then, I would carry Pip as we walked into the downtown boutique storefronts, admiring the antiques, artwork and blown glass, and clothing – occasionally buying a gift for a friend or item to decorate our home – all the while getting compliments on how “cute” and “well-behaved” Pip was as he seemed to admire everything with us. And before we left, we purchased the produce we originally came for.

In our current town, there isn't a farmer's market, but there is a fruit and vegetable stand on the right hand side of the road on your way into town in a red lean-to shack, and we enjoy their produce, and the shopping experience, just as much. Matt and I both always feel a sense of pride and an unparalleled feeling of being healthy when we support local businesses and farmers, so we forgo the cheaper prices at bigger stores as often as we can in our efforts to support “the little guy.”

I must admit, though, that I am not always enthusiastic about being bombarded with status updates on social media from my friends selling products as a side business for extra cash. Most of the time, I feel like the products (skin care, makeup, nail stickers, and weight loss wraps to name a few) are no different than the miracle products

advertised on late night infomercials, and I ignore them. However, lately, I have been seeing a new weight loss pill promoted as a way to “cure symptoms of PCOS,” which has frustrated me infinitely because these women who are promoting and selling this product are all using the same pre-fab lines, testimonials, and graphics; they have no personal experience with PCOS or know what it really is like to live with it.

I have been polite and have kept my opinions to myself, as antagonizing an in-person friend’s business is impolite, but now I find my fingers clicking on one of the statuses without my consent. They type, asking, “If the pills aide PCOS the way that you are claiming, why aren’t doctors prescribing it?” My fingers click post. And I’m not upset about it.

“It helps women lose weight, which helps them get pregnant,” comments a friend of my friend who originally posted one of the advertisements.

“PCOS is an autoimmune disorder and our products help fight those disorders,” replies my friend.

And another woman gives a personal testimony. “I take and also sell the diet pills. I’ve always been a heavier woman and was diagnosed with PCOS. When I started taking the diet pills, my blood sugar was more balanced, I lost weight, and this past month I got my first positive ovulation test since being married!”

As I read these comments, my heart breaks for these women who truly believe losing weight is the magic bullet answer to their infertility problems. After a year and a half of doctor visits for infertility, no one has ever told me I need to lose weight to be able to get pregnant, despite being overweight for my 5’5 height, which is probably because there is actually a large range of BMI before a woman will stop responding to ovulation

medication (a BMI that is suitable for ovulation can be as low as twenty-two and as high as forty, according to my reproductive endocrinologist). I am unsure, however, about PCOS being an autoimmune disease. In my hours of previous research, I have never come across an article declaring PCOS to fall under the autoimmune classification, so I do what any self-respecting at-home researcher does and I ask Google, again.

After reading through each link of the first three pages of hits varying from medical journals to personal blogs, I am able to discern that science is not yet certain how to classify PCOS, but it is documented that many women with PCOS also have Hashimoto's Autoimmune Thyroiditis, which is a separate autoimmune disease that is the number one cause of hypothyroidism. I wonder if the women who sell these products directed toward women with PCOS have done their own research, independent from what their company sends them. But I already know the answer because the science and documentation made available by the vast expanse of the internet stands in stark contrast to the messages they're perpetuating.

And then I can't help but wonder about all the women with PCOS who will read these same diet pill advertisements marketed toward them and their syndrome. Will they be strong enough to listen to or consult with their doctor before leaping to the conclusion that their weight is their problem? And if weight is their problem, how many will have the patience to lose the weight in a healthy and medically monitored process? How much money will the women and subsequently companies selling these pills make from the fear and desperation of women struggling to get pregnant? Who at the corporate level thought it was humane to target these women in the name of making a dollar? How did we, as a society, stoop so low as to not only body-shame women on their looks but to body-shame

women when they are already ashamed of their body on the inside for not fulfilling its “biological purpose” that other companies constantly remind them of in their advertisements? These women, these targeted consumers struggling with infertility, will end up paying in more ways than one, and that is one small business I cannot support.

Facebook Newsfeed
September 2015

Pregnant: Rachel, 9-6-15. Posts a picture of her and her husband in NYC with a “I [heart] NYC onesie, “Picked up a little souvenir for our newest addition coming April 2016!” *307 Likes.*

Pregnant: Rebekah, 9-29-15. Post, “Baby is 5 weeks 5 days along. The heartbeat was 138 and baby is due May 26”

Text Message Conversation with Mary Kate and Rebecca
October 1, 2015

Mary Kate

Good luck, love

Hayley

picture of sonogram screen

I'm ovulating! That black spot in the center

Is my follicle! :D

It has to be 19-24 mm to be considered

ovulatory, and mine is 22 mm

Mary Kate

OMG

CONTRATULATIONS

HAY THAT IS SO WONDERFUL!!!

Trying not to cry happy tears over here. Now,

go make babies wiff ya husband!

Rebecca

Ahhhhh yaaaaay!!!!!!

So exciting!!!

Mary Kate

Okay, the water works have started. I have chills and I'm boohooing. Lawd Jesus, I'm a #hotmess. Praise God! This is when that whole warp speed super power would fo sho come in handy!

Hayley

I'm beyond excited right now! This is literally the first time in 17 months that something has worked right.

So Saturday at 10:45 I go for IUI

Mary Kate

Okay now remind me what a IUI is. OMG IS IT INSEMINATION?!

Hayley

Yup!

Mary Kate

Like, the damn thing is hap-pen-OMG

Ing not omg

Hayley

Intrauterine Insemination

Mary Kate

Clearly I use that too much

And how long to wait til you know if it worked??

Hayley

That I don't know.

Usually you have to wait until your missed period

to take a pregnancy test, but since I won't have a

missed period, the rules are different. I'd imagine

2-3 weeks

Rebecca

Oh man. It's all happening. So. Crazy.

Mary Kate

omg omg omg HOW ARE YOU FEELING
RIGHT NOW?!?

Hayley

Beyond excited! I called and told Matt, and I named
my follicle Folli haha

Mary Kate

HOORAY!! Love the name ;)

Hayley

Matt said I was ridiculous and hard core laughed,
but I feel like if we give everything a name, it will
feel loved and cooperate haha

Mary Kate

I like the way you think!

Rebecca

OMG I read “name” and thought you were
already talking about babe names hah

Hayley

We already have baby names. We've had them
for a year haha

Mary Kate

Ohhh I love baby names! I understand if you
don't want to talk about them now. I'm sure
you and Matt picked pretty ones!

Hayley

I don't mind sharing.

Rebecca

Share!

Hayley

Everly Nell

Jackson Franklin

Jax*

It autocorrected haha

Rebecca

Omg I love the name Everly!

Hayley

Thank you!

Mary Kate

Ooohhh I love them both!!!

Will you call him Jax?

Hayley

Yes

Maybe, hopefully we'll get to use one of them in a
couple of months

Mary Kate

Fingers crossed and prayers continued

Hayley

Thank you!!!

And thank y'all for being so excited! I called and
told Matt, and he's excited, but I think he's trying
to not show it in case the IUI doesn't work this month.
It's his way of trying to make me feel better if that
happens.

Kinda like so he won't seem as disappointed and it
won't look like he blames me for it not working.

It's weird, but try as I might, I can't change it.

So it was really nice to have someone be as excited
as me!

Mary Kate

Oh, are you kidding?! We had no other choice!

Hahaha but that's a very sweet place he's coming

from it sounds like. I'm happy to join you in

excitement! Like I said, no way I couldn't haha

IUI – first attempt
October 3, 2015

When we arrive at The Reproductive Assistance Center for a 9:15 a.m. appointment for Matt to donate his semen for our first IUI attempt, we are given paperwork to look over. When we are called back to sign the papers that give the clinic consent to perform our procedures, we are taken into the room where Matt will have his *alone time*. It is a large bathroom with carpet, a black leather chair in the corner that looks like a cross between an office and living room chair, and an accompanying matching ottoman covered in magazines for his viewing pleasure.

Back in the lobby, I watch House Hunters on the clinic's TV for almost twenty minutes before I realize how long Matt has been gone.

How much trouble can you get into when you're giving yourself a hand job?

Is he not going to be able to orgasm?

We're not going to be able to have the IUI this month.

After all the waiting for the stars to align.

Starting to feel defeated and hopeless as I squirm in my seat, I constantly keep changing the leg I have bent under me. But just I am about to find out which home the woman on House Hunters chooses, Matt walks into the lobby. And we leave.

Matt's upright posture and dark wavy hair held high as we walk to the car doesn't resemble that of someone who has squandered the hopes of his wife, so I know I don't need to ask how it went. Instead, I ask him what took so long, and over breakfast in a green booth at Perkins, he gives me his account of getting cock-blocked by almost-intruders.

"Every time I got close, someone would close a door down the hall. It sounded like someone was opening the door to *my* room!"

I can't help but laugh. "Really?"

"Yeah. Or someone would walk by, and I'd be afraid they were going to come in."

My giggling continues. "A little paranoid, weren't you?"

"It made me nervous and took me out of the moment. Or. Someone on the other side of the wall would walk next to the metal cabinet where you leave the specimen for the lab, and the metal door would swing and make noise."

"Really? Now you're just making things up," as I almost fall over and lay in the seat of the booth from laughing so hard.

"It felt like I was in my parents' house about to get caught! I felt like I was sixteen again."

When we arrive back at the clinic, we are taken back to an exam room to sign more paperwork about the procedure.

“Hayley and Matt, sign here saying that the labels on the semen sample belong to you,” the nurse told us. And after we had signed, the nurse added, “And Matt if you’ll sign here stating that you give consent for Hayley to have the IUI.”

He has to give consent for me?! Oh. Hell. No.

“I’m sorry, what do you mean he has to give consent? You’re injecting his sample into me, and I didn’t have to give my consent for him to give his sample. What’s the difference?”

The nurse’s facial expression and body language does not change.

How can this inequality of treatment not phase her?

“It’s just the way we do things.”

“That’s not right.”

Matt caught my line of vision, “Do you still want me to sign?” He’s always supportive of my feminist stances. When we signed our contract to buy our house, it was his idea for me to sign as the “buyer” and him as the “spouse,” and he always asks why I don’t sign on the “client” line instead of marking out “spouse” and writing “co-client” on the form for our accountant to do our taxes. I signed the house contract as the spouse, and I like making the quiet protest of “co-client.” Even though I am fully committed to the cause of equal treatment for both genders, something in me is tied to more traditional values, and I can’t fully shake its shackles.

“Yeah,” I answer. “But I still don’t like it.”

After all the signatures are in place, the nurse reads off the statistics about Matt’s sperm. “Okay. So eighty percent are moving in the right direction, and mobility is at seventy-six percent, both of which are above the percentages the clinic looks for when

prepping the semen for IUI. But, the overall sperm count was 250,000 below what is preferred, but it's still a viable amount.” Matt smirks and mumbles behind me, blaming the shortage on the last door-opening scare when he was having his orgasm and spilled a little.

As I wait on the table for the nurse to come back in, undressed from the waist down and covered by the all too familiar white paper blanket, I feel no different than I did two days earlier when I was waiting for my sonogram. After seventeen months of procedures, exams, sonograms, and let downs, my preemptive emotions have become as sterile as the speculum and catheter that will be used to inseminate me.

When the nurse comes in, Matt stands by my shoulders, and I look up into Matt's eyes. They look green today, which is especially attractive with his tan skin and dark, scruffy beard. I hold his hand as she inserts the cool, plastic speculum in me as a way to say *Here we go*. If we can't be creating a baby the traditional way, I at least want us to be touching and share the loving and special moment the best we can. But to be able to see my cervix well enough to thread the catheter through, the nurse pushes the speculum in deeper and opens it wider – or so it feels – than I have ever experienced, and I squeeze Matt's hand in pain. The sharp, constant pain and pressure only get worse as the catheter is inserted and the semen is released into my uterus.

There is no love radiating through my hand at that moment – just the strong desire to get the foreign, plastic objects out.

But after everything is over and I am lying still on the exam table with my knees bent for five minutes as instructed, I can feel the sperm being in a new, safer place higher

up in my uterus where they actually have a chance at meeting an egg. For the first time, my uterus feels full and maternal.

So this is what motherhood feels like.

Calm.

Happy.

Safe.

When the timer on Matt's phone goes off, I ask Matt to set it for another five minutes. For good measure.

Compulsions*October 6, 2015*

Off and on all week, but especially today, I have been receiving twinges of hope from Biology and Mother Nature.

During my second period English II Pre-AP class, I sit in a desk in the back of my classroom watching as my students identify, explain, and defend their inferences of their short story's setting by using cited text evidence. And without warning, I feel a gentle contraction of muscle movement in my uterus. Nothing major. Just enough to pique my interest and borrow my attention. And to remind me a baby may be developing at this exact moment.

At lunch, I can only stomach corn chips and queso from Tijuana Flats. As I look around the lunch table in the library's workroom where the English and Reading departments eat every day, the looks and smells of pineapple chicken frozen dinners and deli subs that usually seem so appealing initiate turmoil in my stomach, causing my whole body to flash with heat. Causing me to lose my appetite.

As I lean over to answer a student's question during my sixth period English II class, the position of my breasts shift slightly forward in my bra. With each movement, a wave of aching ripples across my chest that does not fully subside when I return to a normal, upright position.

And even though I know the symptoms of early pregnancy by heart, tonight I google it anyway. Sure enough, my experiences, coupled with my need for a three-hour nap when I get home this afternoon, perfectly fit the symptoms of pregnancy. But my grin fades when I read that these symptoms are usually experienced three weeks after conceptions – not three days.

As I lay on the couch in the living room watching The Big Bang Theory reruns, I keep feeling intermittent cramps, nausea, and breast tenderness. I remember that I have one pregnancy test in the bathroom cabinet – a left over from what feels like an eternity ago.

I could take that pregnancy test and see if I'm pregnant.

But the nurse said to wait two weeks. It isn't time yet.

But two weeks is such a long time from now.

Your hormone levels won't be strong enough yet to give a positive reading even if you actually are pregnant.

But the symptoms are so strong. Maybe the hormone levels change faster with an IUI.

That's not what WebMD said.

True.

It'd just be a waste of a test.

Okay. I'll wait.

So I go to the bathroom and take the test. After putting the cap back on the stick, I sit it on the edge of the plastic pre-fab tub, and I sit on the floor next to the tub. I stared at it.

There's no way it can actually be positive.

Can it?

The nurse said two weeks.

This is ridiculous.

The reading is supposed to take two minutes, but it comes within seconds. Either it is a bad test because it has sat around for a year, or I did it wrong. But either way, I watch the pregnant/not pregnant screen for the full two minutes – just in case. But nothing changes.

“Not Pregnant.”

Surprisingly, instead of feeling disappointment or failure, I feel peace and relief. It isn't time to take the pregnancy test yet, and I have the result doctors, at home pregnancy test companies, and the internet said I would if I took it this soon. I guess I just needed to see it for myself to be a little more patient in waiting.

But now that the compulsion of taking the pregnancy test is over, I need a vacation; a stay-cation; a new, fun project; something to keep my mind off these new sensations going on in my body because grading essays and talking about literary elements in class isn't going to cut it. With each moment of unfamiliar twinges, my heart fills with more and more hope and excitement that on October 17 I'll get my first positive pregnancy test.

And hope is terrifying.

A Week of Double Checks – home pregnancy tests
October 17-19, 2015

As a teacher, I tell my students to double check their work before they turn it in, especially if they finish too quickly. But by the time they reach me in the tenth grade, they have perfected their “I already did” answer and corresponding poker face, which renders me powerless to do much of anything other than sigh and accept the poorly completed assignment. My only assumption for this repeated scenario is that double checking means there is the possibility that they are wrong, that they aren’t perfect, and 10th graders have yet to realize they are mere mortals, that their shortcuts and cheat codes will catch up to them.

They don’t see a mistake as an inevitable part of life because they are “grown” and mistakes happen to other people. But those of us who *are* “grown” and have felt the grave ramifications of mistakes embrace double checks as if someone’s future depends on it, and it often does: doctors double check lab results before deciding on a diagnosis and course of treatment; teachers double check answers, grades, accommodations, and behavior charts before recommending a student be retained; microbiologists double check samples and lab results before telling a company to recall its food; and even Santa checks his list twice before delivering toys to nice children.

So when my first home pregnancy test shows a very faint, but still visible vertical blue line indicating a positive result, I am dead set on double-checking. If people are fallible, then so are the products they create, and I don't want to shout the good news from the rooftops just to turn around and take it back later because of mistake.

While standing in the bathroom at 4:45 a.m., I decide to go to Walmart to get another pregnancy test, so I change into real clothes from my pajamas and put on my engagement and wedding rings because I feel it is important that anyone who sees me carrying the box of tests in the store knows everything about my potential baby is legitimate. After all, anything that happens between the hours of 2-5 a.m. has an air of scandal around it.

As I stand in front of the shelves, I am mesmerized – not at the choices themselves, but at the different quantities in each package. I know I want a digital test, but do I want a single test, a two-pack, or a three-pack – five is just overkill. I end up buying the three pack because I'll have extras if I ever need any, and a bottle of water, which I chug on the way home so I'll have to go to the bathroom when I get there.

The beauty of a digital test is that there are words that show in the screen that tell you, without a doubt, if you are "Pregnant" or "Not Pregnant." So when I get home and take my first digital test, I look forward to a "Pregnant" result and waking Matt up to celebrate. But after peeing on the stick and waiting the two mandated minutes, the screen reads "Not Pregnant." I am disappointed, but not entirely surprised; I have read online that your hormones are most concentrated when you first wake up in the morning, and I had already peed when I took the first test, so I chalk the result up to bad timing and decided to try again Sunday morning and go back to bed.

All day, Mary Kate and Rebecca and a couple co-workers text me asking how the test went, and offering their own experiences, but the most interesting came from a co-worker who had the exact same pregnancy test discrepancy as me. She said that after doing some research on Google, she and her husband found out that if you pop the digital test open and look at the actual test strip, you see a more accurate answer. So as Matt is getting out of the shower, I am standing over the bathroom counter performing surgery with a pair of scissors.

I explain to him why I am opening the mini-computer as I wiggle the metal blade of the scissors back and forth where the top and bottom of the test meets on the sides. And as the top of the test goes flying towards the mirror, two blue lines are exposed on the strip, and we both stand staring, restored with more hope and excitement than either of us want to admit out loud.

Our excitement is two-fold. The obvious is that we are excited that we are (potentially) pregnant – and on the first IUI attempt. But the second is a more selfish reason. For months, we have planned to go to Tennessee and Illinois to see our family for Thanksgiving, and if the positive pregnancy test is truly positive, we would be able to surprise everyone and tell them in person. And with each step closer to a definitive positive, the more telling our family we're pregnant over Thanksgiving becomes equally as exciting and important as the pregnancy itself.

I have read articles online about women who wanted to wait until their first trimester was over to tell their family they were pregnant to potentially avoid having to tell everyone they had a miscarriage, but that logic has never made sense to me. I believe it is important to your mental health to have a network of support and to be able to

discuss your emotions in a positive and safe environment (My sixth grade science teacher, Mrs. Couples, even taught us that it was scientifically proven that women live longer because they let out their emotions. Men internalize theirs, and it causes a strain on their heart.).

So, if I indeed get a positive pregnancy test, I want to be able to share that excitement, and if, God forbid, I miscarry, I want a network of people who love me to be there to support me. And who better to share the good news with first than our family at a time that is meant to reflect on things and people you are most thankful for.

So when I wake up at 4:30 a.m. Sunday morning needing to pee, I go into the bathroom armed with a plastic solo cup, a digital pregnancy test, and a standard pregnancy test. I pee into the plastic cup, drug-test style; dip both tests into the cup at the same time and count to twenty seconds as directed by the instructions inside each respective box; lay them flat on the floor; and wait for two minutes. During the whole waiting period, I stare down at them, watching each of them doing their calculations from my seat on the toilet, and at the end of it all, the two results stare back at me – digital test, Pregnant; standard test, a black horizontal line, Not Pregnant.

Of course they are.

I am more annoyed than disappointed, and somehow, I am not surprised. I just rinse out the cup, throw it away and went back to bed. I plan on telling Matt when we both woke up later in the morning. There is no need to wake him up for bad news that we can't do anything about. But moving the bed sheets from where he has wrapped himself in them wakes him up any way.

“How’d it go?”

“The digital one said pregnant, and the other one said not pregnant.”

“I’m sorry. So do you do it again tomorrow?”

“Yeah. I have one more of each left, so, I’ll do it one more time.”

The rest of the day goes by pretty quickly instead of drudging on and on as I anticipate. Whether it's rational or not, I can only contribute it to the fact that taking the tests in the wee hours of the morning feels more like a bad joke in a dream than my reality. So it doesn't matter because it is all going to work out Monday morning.

And at 5 a.m. Monday morning I complete Home Pregnancy Test: Round three in exactly the same manner as the day before, and get the same results – digital, pregnant; standard, not pregnant.

At this point, all I can do is laugh.

I mean, this can't be real. No one's going to believe me.

“So what do we do now?”

“I’ll call the fertility clinic in Tampa when they open and tell them what’s going on. They’ll order a blood pregnancy test, and we’ll get a definitive answer.”

A Week of Double Checks – blood pregnancy tests
October 20-23, 2015

Luckily today, Monday, is a teacher workday, which means there are no students on campus, so I am able to make an appointment for a blood pregnancy test for this morning. When I call the fertility clinic in Tampa for the orders to be sent over to the lab, the nurse giggles, “Well, yeah, ya do need a blood test, don’tcha? If you go early enough, you can get the test results this afternoon.”

When I finally get called back for my turn at the clinic, a middle-aged man checks my ID and type of test. For the most part, I sit in the chair in silence as the phlebotomist preps my arm.

When he starts drawing my blood, he asks, “Are you hoping for a positive or negative result?”

At first, the question seems odd. We’re complete strangers, and that’s a really personal question. Not that I mind. But what if I was hoping for a negative? That could have gotten really awkward really fast.

“I’m hoping that it comes back positive.”

The man finishes bandaging my puncture site. “Then good luck!”

When I get home, I run to Matt and hug him.

“The man at the lab said my results won’t be in until tomorrow. The clinic didn’t give the right orders for me to be able to find out today. I’m so nervous.”

“I know. Me, too,” he said into my ear.

His voice sounds concerned, but when I lean back to look into his eyes, his face remains unchanged. Where were those all-telling crinkles around his eyes? The ones that I can read like a book? They are absent. He looks as if we were talking about the weather.

“Please take tomorrow off. I don’t want to be home by myself if it’s bad news.”

“I can’t. It’s too short of notice to take off, and the vice president of the company is visiting this week.”

That explains his lack of facial expressions.

I just hold him tighter, fighting back tears. Tears won’t change anything. I am going to have to face this on my own.

Even though the clinic said they’d call me when my results were in, I call them at 9 am the next day during my planning period. In preparation, I chose a desk in the middle of my classroom to optimize cell phone reception since my class is in a metal portable instead of in the main building. I also turn out the lights to give the impression that I’m not in the room in case someone comes looking for me. I am hoping for the best but preparing for the worst. I want time to fall apart and cry in the corner of my bathroom if need be. After a series of transfers, I finally make it to a nurse who can give me the lab results.

“The test did come back positive.” Her voice resonated with caution.

“Okay.”

“But it is a faint positive. We like to see the numbers around one-hundred. Yours is eleven.”

“So what does that mean?”

“You’ll need to take another blood pregnancy test tomorrow because the numbers can change overnight. So either the numbers will double and you’ll continue with the pregnancy; the numbers will drop and you’ll miscarry; or the numbers will stay the same and we’ll know there is a cyst giving a false positive.”

“What are the chances it’s a cyst?”

“It’s possible, but very unlikely. I’ll send in the orders for the test today. Do you have any other questions?”

I had a million questions and none at the same time. As I sat in the student desk and stared at my phone, I was fully aware of the numbness that I felt. I picked up the phone to call Matt to tell him. I don’t know what else to say, so we have the exact same conversation I had with the nurse. Matt asks my same questions, and I give the nurse’s same answers. Both of us in shock that we have to wait yet again to find out a definitive Yes or No.

As the day wears on, my friends at work try to preemptively pep me up by pointing out the fact that even if I do miscarry, “At least you’ll know that it’s possible for you to get pregnant.” Or, “You’re young. You’ve got plenty of time.” I almost snap. I know they mean well, and I know that none of them have experienced this before, but I don’t want to be pepped up, and I don’t want sympathy. I want someone to be realistic with me, someone who will laugh at life’s cruel joke with me. And yet, there is no one to be found.

I go back for blood pregnancy test number two on Wednesday. The original plan was to let them call me with the results on Thursday afternoon, but nature has its own plans. When I go to the bathroom after first waking up Thursday morning, I notice a little bit of blood on the toilet paper. I put a liner in my underwear and monitor the bleeding until my planning period at 8:45 a.m., and I call the clinic. This time, I am too anxious to sit down, so I pace up and down the same row of desks, stepping in every other tile on the floor. When the nurse finally answers, she is very curt in her response that the clinic has not received my lab results yet.

“Well, I called to ask because I was told that I may miscarry, and I started bleeding this morning, so I didn’t know if you could tell from the lab results or if I needed to come in for an ultrasound...”

“There’s no way for us to know without the lab results, and you’re so early in the pregnancy that there’s nothing we can do for you any way.”

“Okay. So do you know when you’ll get the lab results?”

“No. And today is the company’s quarterly meeting and all our offices will close for it, so if you don’t hear from someone before this afternoon, it’ll be tomorrow before you’ll find out.”

What I want to do is bless the nurse up one side and down the other for being so insensitive, but my respectful upbringing won’t let me. I am in shock that a nurse can be so curt when a patient could be miscarrying. How does that struggle, that loss, not affect you? But even more importantly, how hard is it to get some damned lab results? In college, my roommates and I used to joke that our lives would make for great reality TV

because of all the random shit that would happen on a daily basis, but even Hollywood's best writers couldn't come up with a quarterly meeting on the day of a miscarriage.

After my phone conversation, I wander into the classroom of the same friend who told me to pop open the digital pregnancy test. She told me that she bled so heavily after she found out she was pregnant with her son that she went to the ER. It turned out to just be heavy, late implantation bleeding. So I hold out hope that our chances at a baby aren't over yet.

When I go back to my classroom from lunch at 11:45 a.m., I give my students something to work on while I call the clinic in an attempt to get my results before the office closes. The receptionist explains that the office is already closed and all the nurses are gone. My heart feels like it weighs fifty pounds.

"I'm currently in limbo between implantation bleeding and a miscarriage. Are you sure there is no one there who can check on my lab results?"

The receptionist seemed sympathetic to my situation, but assured me there was no one available who could help. I am in limbo until Friday, and my bleeding is getting heavier by the hour, and all I want to do is go home. But I can't. I have a parent conference after school with my principal. In addition to teaching, I am the sponsor of the Class of 2016, which means I place class shirt orders, help plan prom (when the students are juniors), organize Grad Bash at Universal Studios (when the students are seniors), and offer my classroom as a meeting place when the class officers meet with the rest of the class to vote on. This parent conference in particular has been called because a few parents have decided I am not doing my sponsorship correctly, that their children are missing out on the "senior experience." In the meeting, I explain the students don't need

more class meetings to vote on things like class color, flower, t-shirt, and song because they have already done it. But the parents don't want to be wrong, and lay into me anyway while the principal beside me is zoned out, thinking about something else.

By supertime I am convinced I am in the middle of a miscarriage – there is just no way a baby has something left to be attached to with the amount of blood I have lost and continue to lose. When Matt texts me when he is on his supper break at work, I express my concerns about going to school in the morning because I'm afraid I'll my frustrations out on my students.

“Today during sixth period, a special needs student kept asking me simple question after simple question as I was telling the class how to bubble in their personal information on their PSAT documents, and I yelled at him to sit down be quiet. I've never yelled at him before, and because of his disability, he couldn't help his behavior. I'm truly concerned that if I go tomorrow, I'll say or do something worse.”

I have already made up my mind that I'm going to take the day off, but I want Matt to validate my decision. It's as if he says I need to stay home, I'll feel less guilty about leaving my students right before their test. Luckily, he agrees that staying home is in my best interest. I log in my absence for the next day, find an assignment for my kids to do, and force myself to at least eat a couple of bites for supper, even though all I really want to do was go to bed. The next morning, I wake up to a phone call at 10 a.m. from the fertility clinic.

“Hello. May I speak with Hayley?”

“Speaking.”

“Hi. I am calling to give you your lab results.” I sit up and put on my glasses as if it would help me focus more. “It appears that the number is now negative, so that means that the pregnancy is no longer viable, but yesterday’s records indicate you may have already suspected that.” Her tone was soothing and nurturing.

“Yes ma’am. So I am miscarrying?”

“Yes.”

Technically, what I am experiencing is a chemical pregnancy, which means that an egg had been fertilized by a sperm, forming a zygote, but an embryo hadn’t formed yet. I was at week 4 of pregnancy, or 2 weeks post-conception, which is the stage where the zygote, fertilized egg, should have implanted into my uterine lining. Maybe it did, but it didn’t stay long enough to turn into an embryo, which is when organs like the brain, spinal cord, and heart begin to form. So technically, I didn’t lose a *baby*; I lost the *possibility* of a baby, but to me, there is no difference – scientifically, morally, or emotionally.

“Just out of curiosity, what time did my lab results come in?”

As the nurse looked, I explained that I was wondering if they came before the offices closed.

“I just feel like if the nurse knew I was potentially miscarrying that I at least should have been contacted and told the results weren’t in, just so I didn’t feel afraid *and* forgotten about. Afraid is enough.” The nurse agreed that returning my phone calls and giving me updates should have been handled differently, and that she would speak with the nurse I spoke with about it.

“But I also will leave a note for your doctor to decide if she wants you to use this period as another attempt for IUI or if she wants you to take the month off. Someone will call you this afternoon with the answer.”

By this time Matt had woken up, and I recounted the conversation to him.

“So they confirmed the miscarriage? So what now?”

“We wait.”

At lunch, I still am not hungry, so I just push noodles in the macaroni salad around my plate. I try to pick up a noodle with a prong of the fork. It slips away, scooting further to the left-hand side of the dish. While playing this weird game of tag with my lunch, I recognize that I feel numb and am not even completing thoughts – they change or fade away entirely before I finish my internal sentence, which worries me, especially when I cannot snap myself back into my normal personality.

The only time I feel any type of emotion is when I think of telling my mom that I miscarried. Matt and I decided to not tell our parents we did an IUI because we wanted to be able to surprise them with the good news that we were pregnant. There are so few “normal” joys of trying to get pregnant through artificial insemination that we clung onto the idea of surprising our parents that we were pregnant and being able to post the same screaming, hugging, crying videos everyone else does on social media. So, not only does my mom not know I am miscarrying, but she doesn’t even know I tried to get pregnant, which makes not telling her a decision I’m now regretting. Just thinking of telling her everything makes my eyes swell with tears, but they go away as quickly as they come.

I decide the only way I'm going to be able to begin grieving is to tell my mom everything, say it out loud, and let the tears fall where they may. I go into the guest bedroom, shut the door and sit on the bed.

"Hello?"

"Hey, Mom."

"Hey. Aren't you at school?"

"No, I took the day off. Do you have a minute? I have something important I need to tell you."

I know what I'm doing is selfish. My mom is at work at the dentist office where she's a receptionist and on Fridays bills insurance companies, and I'm about to condense all the plunges of the rollercoaster I've been on over the past two weeks into two minutes for her. I continue anyway. I need to.

"Yeah, just a minute. Go ahead."

"So, Matt and I did our first IUI two weeks ago." I say, staring at the lavender and deep purple circles on the bed spread.

"Yeah?" I already hear the excitement in her voice.

"Yeah. And last weekend," I look up at the ceiling to keep the tears building up in my eyes from falling. "I took six different pregnancy tests, two each day, and every time one said pregnant, and the other said not pregnant."

"Uh-huh!" More excitement. More building.

"So I had to go take a blood pregnancy test and it came back inconclusive, so I had to take another one..." My voice starts trembling, and my hand is shaking holding the phone.

“Just tell me already! Are you pregnant?!” I can tell she is about to burst with joy. And I start crying.

“No. I’m bleeding.” It’s all I can get out. I cover my mouth to stifle the sound of my gasping for air in her ear.

“Aw, I’m sorry.” She doesn’t seem upset. “I bled with you, too. It’ll be okay.”

“No, Mom, I’m *bleeding*.” I physically can’t say anything else. I’m crying too hard. I can’t form more complex thoughts with more accurate vocabulary. “There’s so much blood.”

“I know. It’ll be okay. I have to go back to work. I’ll call you later, okay?”

“Okay.” I whisper.

I calm myself down and walk out into the living room when I hear Matt in the master bathroom shower, and not knowing what to do next, I go lay down on our bed. It doesn’t take long for the tears to come back. When Matt comes out of the bathroom and sees me, he sits on the bed with me and holds me as cry, inconsolably.

I’m thankful that I went ahead and took today off because if I were at school right now, I would be in the class where I yelled at a student for no real reason. Right now, I’m not passing out graded papers. I’m not introducing the next essay topic and sources. I’m not calling on students to answer questions about what things they should be thinking about when beginning a writing prompt. I’m not telling a shy special needs student that she looks sassy today, making her smile. I’m not at school improving students’ lives, I’m at home. I’m at home, but I’m not doing loads of laundry. I’m not washing dishes. I’m not vacuuming the floor. I’m not mowing the lawn. I’m at home, but I’m not improving the appearance of the house. I’m in the in-between. For hours.

When I finally compose myself, I tell Matt I still want to go to the away game my school is playing tonight. It takes two and a half hours to get there, and I'm dying to be anywhere but the house. As I start looking for an outfit to wear, I can't bring myself to look professional for the football game. I'm bleeding and bloated and tired. I put on black yoga pants, a yellow tank top (school colors) and a gray jacket.

"Do I look okay?" I ask as I walk into the bedroom?

Matt looks up and smiles. "You look fine."

He doesn't tell me that my eyes are puffy and my skin is splotchy. And for that, I am grateful.

About half way to the game, I ask Matt to pull off the highway at a "country store" gas station so I can run to the bathroom. When I come out, he's on the car's Bluetooth talking to my mom.

"Here she is, Cindy." Matt gets out of the car and goes in the store to go to the bathroom.

"Hey, Momma."

"Hey, Sweetie. Matt said you're on the way to a football game? How are you feeling?"

"Yeah. I needed to get out of the house. I'm okay for now."

"He told me what happened today. I didn't realize when you called earlier that you were miscarrying. I would have talked longer if I had realized. You just said you were bleeding."

"I thought you'd get the idea with the whole bleeding and crying."

"No. I completely missed that. I'm sorry. Well, at least you're doing a little better

now.”

“Yeah. It’s nice to go to the game and not have to think about it for a while. Well, Matt’s walking back to the car, and we’re planning on getting supper here in a few minutes, so I’ll let you go.”

“Okay.”

“Thanks for calling back to check on me.”

“Of course. I’ll talk to you later. Tell Matt to give you a hug from me.”

We get home around midnight and go straight to bed, and something in me stirs and brings a second wave of emotions. I turn to Matt and ask, “Why are you so calm about this? Are you upset?”

“Of course I am.”

“Then why don’t you *show* it?”

“Because I don’t want to make you more sad.”

“But I need to see you be sad. Otherwise, it feels like I’m the only one.”

“Okay.” Matt sits on the bed, facing me, and wipes away the tears on my face.

“When I went to WalMart last night on my way home from work to get my phone case, I walked through the little boy’s clothing section as a short cut, and there was a monitor playing a commercial about being a parent. And I just stood there watching it. My eyes started watering, and all I could think was ‘Maybe next time.’”

“That’s so sad!”

“I know. But the important thing, is that I felt it. I just don’t always show it around you.”

A Tale of Two Cysts*October 26, 2015*

The sonogram during my miscarriage shows I have two 20mm cysts. Side by side. Yin and Yang. My body has created a cusp. It is the epoch of death, it is the epoch of life. One more millimeter and the decision would have been made for me. I could try for another IUI, but I'm not ready.

Facebook Newsfeed
October 2015

Pregnant: Kelci, 10-10-15. Posts, “Devin and I are so excited to announce there is another [one of us] cheering on the Vols today! Baby coming April 2016!” *550 Likes.*

Pregnant: Summer, 10-13-15. Posts, “Tiny Bean. 8 weeks 5 days. Due May 19th.”

VII.

In the name of the Father, the Son, and the Holy Spirit

Sometimes I envision driving three hours by myself to go to the United States's first Catholic church – the Cathedral Basilica of St. Augustine, built in 1565 – to pray for a baby.

As I enter the basilica I begin down a tile floor, resembling a medieval game-board with alternating gold x's and black o's, alternating blue and red starbursts. It's a high stakes game, this game of religion. If you make it across, you win piety and eternal life. If you lose, you risk shame and eternal damnation. But I'm not here to play the game. I do not know the all the house rules; but I know enough.

Walking underneath the papal-red pitched ceiling and exposed, gold-ornamented wooden crossbeams, I stay on the outside aisle between the wall and left column of pews. I try to focus on God. I try to not disturb the tourists or Catholics as I make my way to the nave honoring St. Joseph. I pay no attention to the four decorative panels of scenes depicting Joseph's life. Instead, I light a small, white candle; perform the sign of the cross; and kneel before the altar. I bow my head, close my eyes, and fold my hands in my lap. I do not pray because I don't know what *to* pray. Personal, Protestant prayers don't feel right in a cathedral. I only know the first the first line of "Hail Mary," and the Lord's Prayer doesn't thematically fit. So, I observe a moment of silence before moving to a pew.

In my Southern Baptist church growing up, we sang the hymn “Nothing but the Blood of Jesus,” a four-stanza song stating that only Jesus can take away your sin and bring you peace. But sitting in the pew of the basilica and looking at the seemingly two story gold and marble altar in the front and elaborate stained glass on the walls, I can’t help but feel as if God would more earnestly hear my prayers if the history and influence of the Catholic church were on my side.

When we were dating, Matt walked me from his parents’ house to my car, and as couples in love have a tendency to do, we talked for hours under the light of the moon and the stars. I was sitting sideways in the driver’s seat of my ’99 green Honda Accord with my feet on the door frame, and Matt was leaning against the open driver’s side door. Eventually, the discussion between a non-practicing Catholic and non-service-attending Southern Baptist turned to religion and raising a family.

Matt said attending church wasn’t important to him, but he thought it was important for his kids to go to church, so he’d go for them. “It’s where you learn about morals,” he said. Despite not attending church on a regular basis at that point in my life, I had more of a conviction about regular church attendance and said I’d want the whole family to go, no matter how old my kids were. “So what church would you want to take ours to,” Matt asked. I remembered someone once telling me the blend between Catholic and Baptist was Methodist, and suggested we could attend the Methodist Church. Not only did Matt agree that meeting in the middle was the sensible thing to do, but we even went to a Methodist service together the following Sunday, where we witnessed the baptism of two babies.

When we first moved to Florida, we went to a Methodist church, but after attending only a few times, Matt's work schedule at his lab changed, and going to Sunday morning services (which Matt still calls mass) became too difficult. We do, however, make it a point to go to midnight mass on Christmas Eve. It's not an ideal dedication, but it's better than nothing.

As the great-granddaughter of a Southern Baptist preacher who grew up in church every Sunday morning and Wednesday night, faith is something I carry with me. It's deep in my DNA. I can't shake it. Although, I suppose if I were more devout in my faith, I could sing the beautiful hymnal words of "It Is Well with My Soul" and mean it. But is anyone so strong that they can experience utter heartbreak and believe, "It is well with my soul?" Or are only the saints that strong?

Facebook Newsfeed
December 2015

Pregnant: Taylor, 12-1-15. Posts “Rice Rice Baby” parody video. *405 Likes.*

Pregnant: Sarah Joy, 12-1-15. Posts, “The stockings are hanging from the mantle, as Christmas in Memphis draws ever near. With anticipation we are waiting, for in June, aby will be here!”

Birth: Kindra, 12-6-15. Comment, “He doesn’t have red hair...I was kinda hoping...But he’s beautiful!”

Gender Reveal: Summer, 12-11-15. Posts, “Girls girls girls.”

Gender Reveal: Rebekah, 12-13-15. Posts video of blue confetti flying out of a confetti popper.

Pregnant: Mary Beth, 12-19-15. Posts, “Santa left us something special under the tree, but it says we can’t open until JULY 1, 2016!”

Gender Reveal: Rachel, 12-19-15. Posts, “Looks like I’m going to be outnumbered”

Pregnant: Alexandra, 12-26-15. *360 Likes.*

Identity Theft

January 6, 2016

Beginning when I was four or five years old though the end of elementary school, I had this reoccurring idea that I wasn't actually living my life, that I was part of my own memory replaying as my adult-self sat in "my" bedroom (which always looked like my parents' bedroom) on the edge of "my" bed (which was my parents' bed) wearing the same navy dress with large deep blue and burgundy patterned flowers with lace across the chest that my mom wore in my parents' 1989 church directory picture (a week before she found out she was pregnant with me) with my hair teased to high heaven and fall colored lipstick and blush. I'd look down to the off-white carpet floor where my little girl and boy sat and tell them the story of my life, the three of us would laugh at the funny memories, and I'd issue them warnings from life lessons when I made a mistake.

In middle school, I envisioned my life in terms of me walking down the metal-blue locker lined "eighth grade hallway" (a name that was left over from a grade-level segregated classroom configuration before I went to school there) clutching a green binder across my chest that stood out against the cream sweater I was wearing and my long, straightened auburn hair. When I was getting along with my friends and making good grades, the scene would consist of me laughing and talking with my friends, a bounce in each step I took, and always concluding with the perfect hair flip over my left shoulder. But as I would get wrapped up in middle school's "end of the world" drama or I made a bad grade or several, the scene would alter to reflect how badly I thought my

identity as the all-American honor student was falling apart. At times, I would stumble and quickly regain my balance before anyone noticed, and at others, I'd trip, my binder flying down the hall with papers flying everywhere, and I'd land flat on my face against the gray and green speckled white tile floor.

I was always thankful for having a general idea of who I perceived myself to be – always aiming to be an honors student who loved God and people and with a syrupy sweet Southern accent and equally sweet Southern manners – and how that image (whether I maintained it or not) would affect my vague plans of getting into a good college and making myself a life worth sharing with a family. But most of my students today are not as self-aware, and through teaching literature, I try to expose them to texts than can help them be more introspective. So, I am teaching them the poem “Child of the Americas” by Aurora Morales.

On the first day of reading the poem, different students volunteer to read each stanza, and they count how many different cultures they think are represented in the poem. I draw a squiggly-lined outline of the seven continents and put different colored dots on each new location they named. What I enjoy so much about this poem is that it brings in the idea of multi-generational movement so that the reader gets a sense of the author's ancestral background and sees how that influences her modern-day identity.

“Morales says she is ‘a U.S. Puerto Rican Jew / a product of the ghettos of New York [she] has never known.’ How is this possible?” I ask my students as I walk away from my poorly drawn world map as to give them a hint that we have already gone over the answer.

“She was born in New York,” a student calls out from the back.

“No, it says she’s never known the ghettos of New York, so how could she be from there?” I respond.

“Some one in her family is from there, you idiot,” another student calls out, refusing to miss an opportunity to make herself look smart while still being “one of the guys”.

“Right, so what does that mean for the Puerto Rican and Jewish parts of her?”

“People from all of those cultures came together to make her,” the same student answers.

And we do this for the rest of the stanzas, explaining which of these cultures are more familiar to her, and which are the cultures and locations of her ancestors until the bell rings, dismissing class, pausing our conversation until we meet again the next day.

On the second day, I put the focus on the author’s personal identity, shifting away from the geographical discussion of the day before.

“So which parts of the American culture does Morales consider most important to her?” I ask and am met with blank stares. “If you don’t know, go back and re-read the poem.”

After several minutes of waiting, a student finally answers, “The tongue of my consciousness?”

“Close. What is the tongue of her consciousness?”

“English.”

“Right. She calls it her ‘tool’, her ‘craft’. So if she calls it her ‘tool’ and ‘craft’, what does she probably do in English?”

“Write!” a newly inspired voice blurts to my right.

“Exactly. And this poem would be a good example of that. So what about her Spanish culture? What is most important to her from that culture?” This time I see more heads readily return to the text and trained eyes scanning for answers.

“Food!” one student calls out.

“Speaking Spanish!” yells another.

“Poetry,” questions a third.

“All of those are right. Let’s look at that stanza together. Follow along as I read it out loud:

‘I am Caribeña, island grown. Spanish is in my flesh,

Ripples from my tongue, lodge in my hips:

the language of garlic and mangoes,

the singing of poetry, the flying gestures of my hands.

I am of Latinoamerica, rooted in the history of my continent:

I speak from that body.’ ...

As I read, I allow my tongue to flow with the natural rhythms of the words and my voice to accentuate the words *Caribeña* and *flesh*, and the phrases *lodge in my hips*, *garlic and mangoes*. This is my favorite stanza in the poem, and I don’t try to hide it because it can be the most personal to the Hispanic students, who make up almost half of the school’s population.

“...So why are food, Spanish, and poetry so important to Morales? What is she saying here?”

Once again my question is met with silence. “Look at that last line in the stanza for a hint.”

“They’re part of her body?” a student from the front row questions so quietly I can barely hear him.

“Yeah, metaphorically. She’s saying they make her who she is.”

“Yeah it does,” calls out a voice from the middle of the room, “she’s got those Mexican hips!” And the room erupts in laughter. I smile because I like to see my students interacting with the text, even if they joke with it, because at this age, many of them are too afraid of looking dumb to say anything in a serious tone.

“Okay, y’all. Calm down. First of all, is Morales Mexican?”

“No,” they answer as a chorus.

“What is she?”

“Puerto Rican,” a girl responds.

“Right. Now, it is possible that when Morales says that Spanish is lodged in her hips that she is talking about having a physical characteristic, or she could be saying that Spanish is so important to her that it goes as deep as her bones. What do y’all think? Give me some text evidence to support those ideas.”

The students debate among themselves for a few moments, using the text to back their opinions, before I once again corale their attention to give them further instruction.

“Morales is able to use a poem to help her express her identity. I want you to do the same. Your assignment for the last half of class is to be introspective, think about

yourself, and write a poem explaining who you think you are, what you think your identity is.”

After everyone lets out their groans of having to put forth effort to complete an assignment, I receive questions like “What is an identity?”, “What can I write about?”, “How do I start the poem?”, “Do I have to follow the same pattern this poem does?”, “Can I write my version of this poem?”, and I gladly answer each one as I go around the room.

But during the last period of the day, as I am erasing my squiggly world map, a girl from the back row asks, “Mrs. Riviere, what is your identity? I need an example.” And I freeze with my rag that I use as an eraser in my hand. My answer surprises me, and I know I can’t say it out loud, to children.

A woman going through infertility treatments.

There was no other thought.

“A teacher who loves literature and writing and puppies.”

“Oh. Okay. Thanks, Mrs. Riviere.”

Facebook Newsfeed*January 2016*

Gender Reveal: Taylor, 1-4-16. Posts “We Know What It Is” as a “Black and Yellow” parody video.” It’s a Boy!

Gender Reveal: Sarah Joy, 1-17-16. Comment, “Congrats! Boys are so lovey dovey with their mama’s”

Pregnant: Caroline, 1-23-16. Posts, “OH BOY! We’ve got news! We’re having a BABY...and it’s a BOY! We will see him early July.
490 Likes.

Gender Reveal: Alexandra, 1-28-16. Posts, “Thrilled because we are having a baby GIRL!!!!!! *337 Likes.*

Facebook Newsfeed
February 2016

Pregnant: Ashley, 2-6-16. Posts picture of her husband holding their dog and the book

“Tell Your Dog You’re Pregnant”

Pregnant: Hassie, 2-7-16. Posts, “We got a touchdown too! Happy Super Bown Sunday

from [us] and their plus one”

Gender Reveal: Mary Beth, 2-12-16. Posts, “So it looks like I’m going to be a BOY

mom! We can’t wait to meet our perfect little

#AlexanderDean”

IUI - second attempt

March 18, 2016

As I lay exposed with my feet in the St. Patrick's Day sock-covered stirrups for my second IUI attempt, I keep thinking how ironically awful this moment is because the nurse in training can't "find" my cervix.

"I keep hitting a wall," Young Nurse says as she looks to the seasoned, Gray-Haired Nurse for instruction.

Well, it's not like I hide anything up there.

And the last nurse didn't have any problems.

"Try using the other one.." Gray-Haired Nurse turns and points to a heavy, antique looking metal tool, the kind that would leave a tongue-tingling metallic smell on your hands all day, to use with the speculum, "...to open her up wider so you can see the cervix better."

I see it as Young Nurse carries it back to her stool.

Oh God!

Oh no! That looks like something that belongs in shop class, not in my vagina.

I smirk to myself imagining the look Matt would be giving me if he was here for this – his eyes would be wide underneath his lifted eyebrows with his head cocked to the side and his lips puffed out in a "better you than me" expression. But Matt isn't here because he is filling in at his company's lab in Minnetonka, Minnesota.

Before flying out last week, he came to the reproductive clinic to donate his semen, which was then bathed, spun down, and cryogenically frozen, which increases the risk of lowering sperm count and motility rate. However, I was unaware of that until today when I came for my IUI appointment and was read the statistics of Matt's sperm. His sperm became the victim of cryogenically freezing as his count and motility rate were both lower than our previous IUI attempt, but still in the viable range. I was initially upset no one had warned us of this possibility, but at the same time, I know we would have gone down the same nitrogen-iced path anyway so we wouldn't have to miss an IUI attempt this month.

"It could be the start to an awesome riddle," I told my friend as we left dinner last night. "A woman gets pregnant while her husband is out of town on business. Neither one had an affair. How is this possible?"

"That's great!" my friend said. We both laughed until we reached our cars.

But that was last night – last night when there was still hope and excitement. Today, right now, Young Nurse keeps running into the walls of the maze that apparently is my uterus, and I look up to the ceiling, inching closer and closer to the edge of annoyed indifference. And with each misguided stab aimed for my cervix, my deposits of hope dwindle as if the catheter itself is withdrawing small amounts from an ATM supply from my innermost self, swirling the hope around with the thawed sperm in the long cylindrical container.

“You’ll feel when it’s right.” Gray-Haired Nurse’s advice to Young Nurse echoes through my head, but despite the coaching, Young Nurse gives up. Gray-Haired Nurse tries a couple of times and can’t find it either.

Maybe my cervix really is hiding.

I feel myself making my final descent into emotional numbness until my legs shoot out and brace against the stirrups, using the balls of my feet as their anchor. Every muscle in my body is awake and tense as sharp pain surges through me.

“Ahhh!” I half gasp and half groan. I lift my head towards the nurses by my feet, trying to see what happened.

“I think we found it!” Gray-Haired Nurse says. I hear the giggle in her voice.

No shit you found something, but pain doesn’t have to mean good news.

This isn’t right. It was so easy last time.

It didn’t hurt last time, not like this.

“Just a few more seconds...” the nurse’s voice trails off, and I assume she injects the sperm into what she claims is my cervix, although I cannot see or feel it to be certain. As the nurses exit my room, Gray-Haired Nurse stops and pats me on the knee.

“Are you still cramping?”

“Yeah. It hurts a lot.”

“Sometimes it takes a little bit. You can lay here for as long as you like. If you need something, just yell. We won’t be far, and if we haven’t heard you leave in 30 minutes, we’ll come and check on you, okay?”

She gives me a kindhearted smile, but it does nothing to prevent the feeling of indifference from returning as I lay quietly on the exam table, thinking about the pain from this IUI, then thinking of nothing as if sleeping with my eyes open, then of the dulling pain, and again of nothing. I feel like someone who watches scenes from the war-torn Middle East on the nightly news, recognizing how heartbreakingly hopeless the people's situation is, yet feeling no ping of emotion towards them.

This IUI won't work.

You can have post-partum depression after a miscarriage.

March 19, 2016

Laura, a radio personality from Johnny's House out of Orlando, hosts a post-partum depression forum after suffering from it herself. At the forum is a panel of doctors and therapists fielding questions.

In the audience, Suspicions turn into Confirmations. Quivering Voices turn into Southern Baptist *mmm-hms* (complete with head nods). Fears turn into Knowledge. You're not crazy. You are not. Alone.

On the way home in the monotonous, torrential rain on I-4, I stop singing the ballads playing on my early 2000s Pandora station. I stop singing because I can't breathe. I can't breathe because I'm sobbing and hyperventilating. Shaking. *I can't do this. I can't DO this. What did I do? What did I DO? I can't do this again. I can't go through not knowing again. What did I do? I can't lose another baby. I can't do this.*

For hours. The tides rise and fall.

The Second IUI Doesn't Work*March 31, 2016*

I should be disappointed with the failure. I should be annoyed at the wasted money. I'm relieved.

Facebook Newsfeed
March 2016

Pregnant: Karen, 3-1-16. Posts a picture collage of her baby bump; ultrasound; first son; and first son and her long-time boyfriend.

Pregnant: Courtney, 3-22-16. Posts video of telling different family members she's pregnant. *492 Likes.*

Birth: Karen, 3-22-16. Her long-time boyfriend posts, "Can't wait until we can all be home"

Pregnant: Leslie, 3-27-16. Posts a picture of a golden Easter egg hatching with the note "Baby 2 October"

Facebook Newsfeed*April 2016*

Pregnant: Alaina Jo, 4-1-16. Posts picture of Daddy, Mommy, and baby cowboy boots

“Coming soon”

Birth: Rachel, 4-14-16. Her sister posts, “I BECAME AN AUNT YESTERAY!”

Birth: Kelci, 4-21-16. Comment, “Hi baby! I can’t wait to meet your perfect self. Your

mommy and daddy are the best. I love you guys,

congratulations!!!”

Gender Reveal: Hassie, 4-23-16. Posts a video of her and her husband popping a large,

black balloon and them standing under a shower of

pink confetti.

Birth: Hattie, 4-30-16. Posts, “We made this. It’s like the most advanced and painful

form of arts and crafts ever.”

VIII.

**Eagerly Receiving Next Month's Instructions from My Reproductive
Endocrinologist**
May 9, 2016

“Either you try In Vitro, or there is nothing else I can really do for you.” Dr. Goodman’s words dominate the small exam room where she stands matter-of-factly in front of the closed door with me sitting on the exam table and Matt standing next to me. Matt and I stare at her with stunned expressions. That is not what we expected to hear.

“But this was only our second IUI,” I protest. “Shouldn’t there be more attempts before giving up?”

“The problem is, you’re not ovulating regularly, even with the increased dose of the Letrozole. What I’d like to try is having you take Gonadotrophin shots to induce ovulation instead, but there are risks involved.”

The risks are two-fold, physical and monetary. Physically, Gonadotrophin shots can cause hyperstimulation where too many follicles, and consequently eggs, develop at once, and the ovaries swell and release fluid into the abdomen. This puts the woman in a dangerous, sometimes life-threatening, situation. With too many eggs ready to release, no reproductive endocrinologist will perform a IUI or IVF procedure because releasing so many eggs increases the risk of getting pregnant with multiples, and too many babies in the womb is dangerous to the life of the mother and children. This is where the monetary

risk comes in. Going down the road of Gonadotropin shots is expensive enough with the shots themselves costing thousands of dollars. But if the woman releases too many eggs, an egg retrieval surgery is performed, where the developed eggs are surgically retrieved from the uterus, the eggs are cryogenically frozen for later use, and the IUI/IVF cycle is cancelled. The shots, extra procedures, and freezing of eggs increase the cost of already pricey infertility treatments dramatically.

“A round of IUI increases from about \$1,000 to about \$3,000. And a IVF round goes from \$12,000 to \$18,000,” Dr. Goodman informed.

Here is a list of things that cost *less* than *one* round of IVF at \$18,000 a pop:

- an engagement ring
- a brand-new car with all the bells and whistles
- an all-inclusive Italian vacation
- an Associate’s degree (or Bachelor’s degree after scholarships are deducted)
- a tiny house
- a wedding, including the dress and open beer/wine bar
- a pontoon boat
- a racehorse
- a down payment on a mortgage

I look down at the speckled tile floor before working up the courage to respond to Dr. Goodman’s explanations. “I don’t think we’ll be doing In Vitro.” Dr. Goodman nods her

head expectantly. “We said from the beginning that if it came to IVF, we were done. It’s too much cost with for too high a risk.” (One round of IVF carries a 22.4 percent chance of a baby being born.)

“I completely understand,” she responds.

But Matt isn’t ready to give up. “Can we not just take a break and try again in a few months?”

“You can. That is completely your choice, but I don’t recommend it considering the increased cost of a IUI.”

“Is there anything else we can do instead?”

Dr. Goodman looks at me to answer Matt’s question. “You can lose 10 to 20 pounds and then try again. It’d lower your BMI, but it’ll only marginally increase your chances. Do you want to try that instead?”

I say yes to end the consultation appointment.

In the parking lot, Matt tries to be supportive and hugs me.

“It’ll work out. We’ll try again. I promise.”

I stay quiet during the hug and am still quiet as I stare at him through my sunglasses when we let go.

“What?” he asks.

“I’m tired.”

“I understand. This is overwhelming. You can take a nap when we get home and...”

“No. I don’t want try another IUI. I’m tired. I’m tired of being tired and I want to be a normal married couple. I don’t want to think about every muscle movement and ache my body makes. I don’t want to schedule my life around doctor’s appointments.”

“What do you want?”

“Maybe we can look into adoption?” And with that, a classy parking lot brawl begins. Matt’s upset that I’m “giving up,” and I can’t believe he doesn’t remember all the stress trying to get pregnant caused me. And we argue some more. But eventually, the dust settles.

“I just want to feel like me again.” I press my body against his, putting my hand on his chest as he stands against our SUV. “Can we please adopt instead?”

“Give me a week to think about it.”

I give him two days before I start sending him screen shots of beautiful Bulgarian Roma children on MLJ Adoption’s Waiting Children list, which puts Matt in an annoyed mood when he comes home from work.

“I asked you to give me a week,” he gruffs.

“I’m not asking you for an answer. Besides, how can you see their faces and not get excited?” I pull up a picture of another child on my phone. “Look at him in his orange shirt! His name is Gilbert, he’s so cute, he’s 9-years-old, he likes to draw, look at his pictures, they’re so good, and awww! He wants to be a police officer when he grows up!” Matt glances in the direction of my phone as he passes by me on the couch, “Uh-huh.”

But over the two days, something about Gilbert grabs ahold of my heart and I send Matt new pictures of Gilbert. “He needs a forever home! Look at his sweet smile!” And when we’re both at home, I talk about all the “coulds” and “woulds” of what our life would be like Gilbert were in our lives. Finally, on Thursday, four days after our consultation appointment, Matt comes home from work and agrees to adopt Gilbert.

“Really? We can adopt Gilbert?”

“Yes, really.” I run over and kiss Matt.

“Our Gilbert!”

He smiles and kisses me back. “Our Gilbert.”

When I send in an inquiry on adopting Gilbert and receive his preliminary records, I instantly see language that indicates Gilbert has, at best, a learning disability, and take the forms to the head of the special education department at the high school where I teach. He pulls the cumulative file on a student I have and we compare the language of the diagnoses, and I feel more relieved. The student I have in class has high functioning Autism and is a phenomenal artist, much like Gilbert seems to be in the pictures on the adoption website.

What Gilbert’s medical records do not show is his IQ, which would allow me to determine if Gilbert would have a chance of being as successful as my student in an American school system. I petition for his more detailed medical records to be translated in hopes for receiving an IQ score, and I send the forms to a friend from college who now is a school psychologist for a second opinion while we wait.

“My friend said that she thinks Gilbert is on the Autistic spectrum,” I say to Matt as we’re getting ready for bed. “She says that with his ‘poor verbal abilities’ and other social and memory issues that it’s doubtful he’ll really learn to speak English.”

“Well that’s not good,” Matt says as he walks out of our master bathroom.

“No, and it wouldn’t be fair to him. Can you imagine us bringing him here and having to put him in a self-contained classroom at school? And no one in the English as a

Second Language department in the county provides services in Bulgarian. He'd be in school all day and wouldn't know what was going on."

"Well, if we can figure out what his IQ is, we'll go from there. Adopting Gilbert should make his life better, not worse."

"Agreed. If he has an IQ that is closer to average, we'll still adopt him, but if not, we'll have to pray someone with better resources than us will find him."

Gilbert's IQ is 46. Average is 90-100.

Adults Say the Darnedest Things

But they meant well...

- *whispers* Oh...I'm so sorry. (awkwardly changes the subject or walks away)
- You're so young. You've got plenty of time.
- You'll get pregnant when you stop trying.
- Have you thought about adoption?
- My (insert relationship here) got pregnant after she stopped trying.
- Is it you or your husband?
- My (insert relationship here) stopped trying, adopted a baby, and then got pregnant two months later!
- You'll make a great mom someday!
- It'll all work out!

Blame it on the alcohol

- I'll be your surrogate.
- Let me tell my mom about you. She has social worker connections and can get you a baby like that!
- Marriages have ended over more trivial things than that.
- I'll pay for your IVF. What if I paid for your IVF? Would you try?
- I wished I'd had a miscarriage.

Facebook Newsfeed

May 2016

Pregnant: Lindsay, 5-10-16. Posts picture of her and her husband holding “Hop on Pop” and “Are You My Mother?”

Pregnant: Kristen, 5-22-16. Posts, “First comes love...then comes marriage...”
350 Likes.

Birth: Summer, 5-12-16. Posts, “Rylee was born via c section, breech, and with her cord wrapped all the way around her neck. She came out butt first and screaming. Peed on the surgeon and NICU nurse. What a way to enter the world.”

Gender Reveal: Alaina Jo, 5-20-16. Posts, “[W]e are so excited to welcome Isaac Sampson into the world this September! Now, if he would only let momma sleep at night.”

Birth: Rebekah, 5-20-16. Comment, “Been on baby watch all day...SO HAPPY FOR YOU BOTH!”

Birth: Sarah Joy, 5-21-16. Comment, “Congratulations Sarah Joy! God bless the little family!”

Gender Reveal: Courtney, 5-23-16. Posts a picture of a teddy bear wearing a pink and purple skirt, purple button down tank top, purple bow, and black sunglasses.

Gender Reveal: Leslie, 5-23-16. Posts a picture of a blue Mickey Mouse balloon in front of Cinderella's castle.

Gender Reveal: Lindsay, 5-29-16. Posts a picture of her and her husband beside a giant wrapped box with pink and white balloons sticking out.

Birth: Taylor, 5-31-16. Posts, "Get ready for some laughs because Tony and I are officially parents!"

Humble Pie*June 2016*

People kept telling me I'd get pregnant as soon as I stopped trying, and I told them it wasn't possible. I have a medical condition. Then, I stopped trying. And ate humble pie. But what people don't tell you is humble pie tastes like blood.

Facebook Messenger Conversation with Mary Kate
June 6, 2016

I catch Mary Kate up to speed on deciding to adopt, my pregnancy, and miscarriage.

Hayley

It's all so overwhelming.

Mary Kate

I don't doubt that for a second. I truly don't think
I would still be sane if I were to have undergone
all that you have.

Hayley

I won't lie. I was excited when I thought it was
all over and we had decided to adopt.

Mary Kate

Oh I'm sure! All its been is waiting and heartbreak.
I'm sure it was nice to have a direction and a process
to live into with adoption and now you're back to

waiting and hoping and testing.

But we gon' pray like crazy folk that something comes
from this round of waiting.

Hayley

And if adoption doesn't work out, it wasn't
completely my fault.

Mary Kate

Bless you, That weighs on you a lot doesn't it?

Hayley

It truly is the worst part.

Mary Kate

And there's nobody that can "fix" that feeling.

Hayley

I know it isn't actually my fault, but there's no
way you can't help but feel like it is.

Mary Kate

I'm sure. Does Matt try to help you feel like

it's not totally your fault?

Hayley

He does.

He loves me, holds me, consoles me, and even

tells me it's not my fault, but what is most

important is that his tone, glances, and body

language never once contradict what he

does for me.

Mary Kate

Sweet boy. You got yourself a good one

ma'am!

Hayley

I know it!

Patience is a Virtue
June 14, 2016

As Matt and I sit in the exam room waiting to have a post-miscarriage consultation with Dr. Goodman, I can't help but think this is a glorious waste of time and a forty-dollar copay. She's already told us our only real option is IVF, and one fluke isn't going to change that. This consult will take 10 minutes like the rest of them. But when she comes in and perches her slender frame on her rolling stool instead of standing next to the counter, I'm proven wrong.

"What do you want to do moving forward," she asks as she adjusting her gold-rimmed glasses on the bridge of her nose. She opens my chart on her iPad. "If you want to do another IUI, I still recommend you take the shots instead of the Letrozole since you're not ovulating regularly."

"Do I have to take the shot? When I got pregnant, I got pregnant on my own, without any medication."

"You didn't take any, but the medicine can still have affects in your system a month after you stop taking it," she says as she peers at me over her glasses.

"But my last IUI was in March, I got pregnant mid-May, and March was my last period." Dr. Goodman scrunches her face and opens her notes on my chart to confirm my

story. While she looks, I continue. “How did I get pregnant if my last period was in March?”

“You’re right.” She sounds surprised. “Sometimes the medicine stays in your system for a month after you stop taking it.”

“But my last period was in March, and I got pregnant mid-May. That’s longer than a month.”

“Hm. Well, then your ovulation was delayed after your period. I don’t really know.”

I can tell I’m not going to get any specific answers, and I know there’s no real way of knowing, but I just couldn’t leave here today without giving it a shot. So, I ask the other question I’ve been wrestling with.

“And do you know why the nurses had such a hard time finding my cervix during my last IUI?”

“No,” she replies cautiously. “Usually when there is a problem, they leave me a note in the chart. Yours doesn’t have anything. What happened?”

I recount the ordeal to her, and her facial expressions soften.

“I’m sorry that happened. Next time, tell them to make sure and leave me a note. Since they didn’t this time, I’m not really sure what to tell you about what happened.”

Stunned at the purposeful, uninterrupted time I’m getting with our doctor, I look over at Matt who has observantly been standing in the corner. He nods his head in approval and smiles, knowing an unspoken pain in me is being soothed by the attention.

“Would you like to try one more IUI,” she asks.

“How would it be different than the others if I get pregnant? I have a problem with staying pregnant.”

“We can give you progesterone to sustain your hormone levels during the early stages of pregnancy in hopes they won’t drop off and cause you to miscarry.”

“I’d be willing to try that. Is there anything else we can do?”

“I’m going to order two bacterial tests, for you, and a karyotyping test for both of you to see if you have any chromosomal disorders that you’re passing onto the baby, causing your body to abort it,” she says as she glances over at Matt for what seems to be the first time during the whole consultation.

“What kind of infections are you testing for,” I ask. I remember about karyotyping from Biology in high school, so I’m less concerned about that.

“There are two types of bacteria that can live in the vagina that can cause you to miscarry.”

“Are they like an STD? Wouldn’t I know if I had an infection down there?”

“No, they’re not STDs, and with the mycoplasma and ureaplasma infections, you never know you have either of them until you’re tested for it. A nurse will be in in a minute to take swabs to run the tests, and I’ll send over orders for the karyotyping tests to the lab facility your insurance covers. Do you have any other questions?”

“Yeah,” I reply. “We have a trip planned at the end of June when we’d need to be here for the sonograms with the IUI. Could we wait until July to start the cycle?”

“Sure, that’ll be fine.”

Moscato Drunk

June 20, 2016

Today is my twenty-sixth birthday. No baby. No hopes for a baby. No adoption paperwork submitted. Suspended in test-result limbo, waiting on chromosomal karyotyping results. But I hadn't thought about my failed goal of a child by twenty-five until now. After listening to Patricia Smith's reading six months ago, I convinced myself that *having a baby by twenty-five* meant having a baby *before turning twenty-six*. But today there is no extra time to buy. And being back in this theatre, I'm haunted by my former questions.

I'm sitting Moscato-drunkenly in the audience at a reading in historic Falk Theatre. Usually, my historic reverence is overwhelming as my eyes revere the craftsmanship of the wood carving in the stage's frame of repetitive rectangles with their inward spirals. Usually, the pairs of windows on stage left and stage right look Elizabethan, Shakespearean, timeless.

As the reader stands behind a Cherrywood podium, bearing all his weight on his right foot, without ever shifting, he reads his story of an 1800s black man in a soft, bass, monotone voice, accentuating his words of "teef" and "worf," despite being written in grammatical precision on the page.

But tonight, the craftsmanship looks dusty and aged; the windows look plastic and cheap. If windows are eyes into the soul, can these do the same? Do these remember seeing me sitting in this theatre six months ago? Did they understand my bleak expression listening to Patricia Smith reading her latest poem “The Five Stages of Drowning”? If so, what was the color of my soul, my aura? Was it *52 shades of blue* like the river in which two New Jersey fathers drowned their infant daughters, or was it crimson, like sin, like blood? Do these soul-readers have empathy? Did they, too, feel the pressure of the river’s water, pushing against their pains? Did the pressure hold them captive in their seat, too, as the image of Patricia Smith, poised like a muse on a Grecian urn with her arm crooked upright above her head, fingers radiated outward, was etched forever in the glass of their memory, crystal clear? As a bystander, did they, too, beg to breathe between the babies and the breath bubbles and the fish kissing where breath had been? Did they hold their breath in or sustain the babies’ final exhale?

As the baby tumbled down, down into the depths of the thick, tacky entanglement of the water towards the mouth of the river, was it aware enough to wonder why its mother had not intervened? Did it feel abandoned by her? Could it feel?

Oh baby, baby, baby, my baby. How I wish I could have cupped my hands into the bloody, murky water and drawn you out. Perhaps if I had saved you, your daddy and I would be celebrating your birthday today instead of mine. Did you know how much your daddy loved you? Could you feel him kiss you goodnight though my skin? Could you feel the pride that welled inside my body knowing you were growing inside me, that I got to be your Momma? Could you hear the reverberation of our prayers through my bones, asking God to deliver you to us, happy, healthy?

Our prayers went unanswered. And I found out too late. You left too soon. The doctor said there was nothing I could do. I tried to think positively, hoping that if I believed, you would survive. But the current was too great. I knew you were gone. Was it my fault? Did I want you too much? Did I not love you enough? Should I have not had that beer? Should I have taken an extra vitamin?

Your blood and mine, they have melded, mingled, intertwined, and have permanently stained my hands.

To Kill a Zombie, Inject Progesterone in Its Vagina*August 2016*

The progesterone Dr. Goodman prescribed to help maintain my hormone levels in the early stages of pregnancy weren't in the gel capsule like I had anticipated. Instead, it came as vaginal suppositories. After a week of oral ovulation pills and another week of progress monitoring sonograms, my sono tech says I'm close, but I won't ovulate. I say I will and take the suppositories to support a potential pregnancy anyway. Two melty, messy weeks later, I remember my degree is not in medicine, but in journalism.

IX.

Pavlov's Sex
Anytime after 2014

I still don't actively seek sex. I have it. I don't lust for it. During an average month, Matt and I have sex four times. Once a week. Usually Saturday mornings – it's convenient. And Pip even lets us do it before we take him potty. So he watches from the foot of the bed, patiently waiting for his turn to relieve himself.

When Pip was a pup, he couldn't be trusted to wander around on his own, so we got into the habit of putting him on the bed with us when we got romantic. It kept him out of trouble, and he usually didn't bother us. And now when he spends special time with his orange rubber chicken squeak toy, he gathers the green blanket from the couch under himself, places Chicken on the blanket – missionary style, always nose to beak – and goes to town. If we walk by, he pauses, looks at us, and gets back to business. I can't help but think his sexual confidence is our fault.

But unlike Matt and Pip, my orgasms are broken orgasms. They never leave me truly refreshed and wanting more, no matter how many times I call out in pleasure during the heat of the moment. You see. Timed Relations is a real mind-fuck that won't *finish*.

Facebook Newsfeed
August 2016

Gender Reveal: Emily, 8-6-16. Husband posts, “WE ARE HAVING A BABY

GIRL!!!!!!!!!! There goes my bank account haha”

Gender Reveal: Victoria, 8-11-16. Comment, “Girls are the best. I’m a boy, and I have

four girls, so I know.” *243 Likes.*

Pregnant: Chandler, 8-16-16. Posts, “Family of 4 coming soon!!!”

Gender Reveal: Brittany, 8-27-16. Lashes, not Stashes.

Facebook Newsfeed
September 2016

Birth: Alaina Jo, 9-5-16. Posts, “After 30 hours of labor and a broken tailbone (that would be mine!) *531 Likes.*

Gender Reveal: Paige, 9-20-16. *343 Likes.*

Birth: Hassie, 9-22-16. Comment, “YOU MADE A TINY HUMAN!”

Birth: Leslie, 9-30-16. Comment, “Congratulations, glad pregnancy is over for you. You looked hot and uncomfortable Labor Day weekend.”

Facebook Newsfeed
October 2016

Gender Reveal: Chandler, 10-4-16. Wife posts, “Sorry Chandler you’re very out numbered and I feel sorry for you...especially when they’re teenagers!”

Birth: Marquez, 10-11-16. Wife posts, “He’s perfect in every way”

Birth: Courtney, 10-14-16. Posts 64 pictures into the photo album “Harper Still.”

369 Likes.

Birth: Lindsay, 10-21-16. Husband posts, “We now officially have a healthy and beautiful little daughter!” *214 Likes.*

Baby Shower Blues*November 4, 2016*

I have often been mistaken for a student – whether it is because it’s a dress down day at school and I am wearing jeans, or because I carry my school materials in a backpack instead of a large tote bag, or simply because I am at least twenty years younger than most of my co-workers. Usually, it’s flattering. Usually, it’s amusing.

As I’m in the workroom making copies, I’m surrounded by twelfth graders sent by their teachers to make copies. This is nothing out of the ordinary, but I become more conscious of my demeanor when I see Mrs. Prinz, wearing her maroon pants and black V-neck, enter the workroom. I scoop up my phone and my keys; I straighten my back; I survey the room – game face on. I must make sure she knows I’m a teacher because last week she mistook me for a student, even though she and I don’t look to be much different in age. As I walk across the workroom to put my extra copy paper back in my mailbox, I see Mrs. Prinz watching me from the corner of my eye. This becomes even more annoying when I remind myself that she even sent me a thank you note for the baby shower gift I got her last spring.

This past April, the female faculty and staff at school secretly planned a baby shower for Mrs. Prinz, who had just recently been hired and was nearing her due date.

She was hired as a middle school special education teacher, so I had not seen her to have a chance to introduce myself to her, but I still felt obligated to get her a present. So after dinner at Chili's, the night before the shower, Matt drove us to Target to buy a baby girl's outfit and a package of baby wipes.

Picking up the Pampers wipes was simple enough, but the clothing options were overwhelming. As I moved through the new born section I picked up a 0-3 month set that included a pair of frilled pink polka dot shorts and a white shirt with a watermelon stitched on the chest. I held it up, adoring it.

"Isn't this the cutest thing you've ever seen? Look how *tiny* it is!"

"It is cute," Matt smiled and replied dutifully.

But then a green dress, adorned with a monkey wearing a pink bow, paired with bloomers caught my attention. It was for ages 3-6 months.

"Aw! What about this one?! It's precious!"

"Yes, it's cute, too."

I picked it off the rack and added it to the 0-3 month outfit. But I couldn't stop looking, wandering around the baby clothing section. I carefully studied the sandals and tennis shoes that looked more like hats for fingers than shoes for feet. I memorized miniature bathing suits' polyester texture. As I meandered around a square of racks, Matt followed patiently behind me.

"What about this one?" I asked him as I picked up a pair of red pants matched with a cream, long sleeve top – age 6-12 months.

"It's cute, too."

I lined them up, laying them across one of the display racks.

“They’re all so small and perfect. Which one do you think I should get?”

“I don’t know. Which one do you think she would like better?”

I’ve heard that women get so many things preparing them for newborns, but they don’t get anything for the later months. So I didn’t know if I should get the pants and long sleeve top? But the polka dot shorts were just so cute.

“I don’t... know...” The reality of what we were doing began to set in. I tried to think about which one would I want to get as a baby shower gift, which one would I most like to see my daughter wear. But it didn’t help.

“...I really can’t pick.” My voice was no longer excited by the cute, tiny, frilly clothes.

Matt must have noticed the change in my demeanor, but he didn’t comment on it.

“Get all three of them, then,” he offered. His green eyes seemed softer than usual. The creases in his skin that appear when he smiles seemed to say, “I understand.”

As we walked to the gift bag aisle, we started down the baby accessory aisle. My eyes took in each item at once. I was repulsed by the miniature objects. And yet, I longed for it all.

I slowly moved through the aisle, contemplating each item’s purpose, frequency of use, and what it would look like in my house. With my child. I added plastic baby utensils to my stack of clothing in my arms. A couple of steps, and minutes later, I added baby powder. I weighed the benefits of the different brands of baby rash creams, and finally decided the Target brand was as good as the rest of them. I added it to my now overflowing arms. Then Matt moved from the end of the aisle where he had been patiently watching me and picked up a hand-held shopping basket from the end-cap

display. He met me in the middle of the aisle as I was entranced by baby shampoo and presented the red basket to me.

“Here, let me hold those for you,” he said as he started taking the bulky packages and clothing hangers from my arms and placed each one of them in his basket as if they were cartons of eggs.

“Now, which shampoo are you thinking about?” He reached out his arm opposite the basket and wrapped it around my waist, pulling me into him.

I leaned my head on his shoulder and blue cotton t-shirt.

“I don’t know.”

“How about this one?” he said as nodded towards a bottle that said it was a 2-in-1 body wash and shampoo.

“This one?” I pointed to the bottle specifically.

“Yeah.”

“I already have a body wash in the basket.” I paused and surveyed the options.

“What about this one?” I pointed to the Target version of a name brand option.

“That’s just fine.” Matt let go of my waist and placed the shampoo in the cart.

“Are you ready?”

“Yeah. I think so.”

As we approached the car with our two sacks full of purchases, I was embarrassed for getting more than what we came to buy, and I reached for Matt’s hand and stroked his thumb knuckle with my thumb.

“Thank you for letting me buy all of that.”

Matt opened the trunk and placed the bags inside.

“Of course...,” and he closed the door and kissed me on the forehead. “...we’ll get there someday.”

But on the day of the shower, I still felt awkward about my shopping spree as I carried my bag into school, and I felt guilty for being thankful I had to help run after-school-tutoring and couldn’t attend the shower. So, I texted Mary Kate about it as I walked to my car to go home.

“Oh hell no. Definitely don’t feel bad about not being able to go to the shower. And don’t feel bad about being generous. If your grieving takes place in the form of generosity, I think that’s an incredible gift you’re offering to someone else.” Mary Kate’s response was almost instantaneous. And for that, I was grateful.

“But I wasn’t happy doing it. I was sad and feeling sorry for myself. Are you supposed to do good deeds with a happy heart?”

“Can you help how you feel?”

“No.”

“There you go. You ain’t gotta be strong, you ain’t gotta be oozing with happy for this teacher. You do gotta acknowledge your own feelings, tend to them. And give yourself permission to feel them. Because you are human. As are we all.”

Does God drive a mini-van taxi?

January 4, 2017

The fifty or so people I got off the Amtrak train with at Union Station in Tampa have all caught their next rides into the night. And I am left standing under a pale orange street light, watching my Uber driver's car make loops on the map on my phone screen. East on the Crosstown Expressway. Down the off-ramp. West on the Crosstown. Down the off ramp. East on the Crosstown. Down the off-ramp, passing Union Station. One-block turn-around to re-calculate route. East on the Crosstown. *SWEET JESUS! I'm right HERE!* A Middle-Eastern man pulls up a few yards down from me in a white mini-van taxi, and we both pretend the other isn't there. That's what people do in the shadows of the Crosstown, pretend you're not there. And as my Uber driver is missing the turn into Union Station for the third time, Mary Kate sends a group text to our close-knit college-friend group. *Friends, I have some news for you...and because I'm not smart enough to get all five of us on a video chat at once...* she attaches a picture of a well-lit polaroid of her maroon manicured bare feet underneath a yellow *babysaurus* onesie on her carpet. *Y'all are going to be aunts and an uncle! First OB appointment is tomorrow. Announcing sometime in February if all goes well.*

The pale orange light mists into yellow, and my Uber driver gets back into the East bound lane of the Crosstown.

Facebook Newsfeed
January 2017

Birth: Brittany, 1-14-17. Comment, “Tears of joy!”

Pregnant: Mary Kate, 1-22-17. *701 Likes, 241 Comments.*

Birth: Emily, 1-22-17. Husband posts, “#ProudDaddy #ThisThingPoopsALot”

You Pick Tuesday

Every Tuesday, Johnny's House, the local Orlando morning radio show I listen to on my way to work, has a segment called "You Pick Tuesday" where the listeners pick the day's conversation topics by posting their ideas on the show's Facebook page the night before. A few years ago, as I was scrolling through my newsfeed before bed, I happened across the "You Pick Tuesday" feed asking for ideas, and on a whim, I added one.

"My husband and I have been married for a little over two years, and we are constantly being asked when we're going to have kids. I always find myself caught between wanting to tell them I've been going through infertility treatments for a year and telling them to 'mind their own damn business.' When have you been in a situation where you contemplated telling someone off, and what did you say?"

In the morning I had two Facebook notifications that someone had replied my comment on Johnny's House's post. The first was a man who wrote, "Have you considered it isn't part of God's plan for you to have children?" The second was my mom's reply to the man. "Who are you to know what is and is not part of God's plan?"

My heart swelled with pride and embarrassment. I had posted my "You Pick" topic idea thinking it was late enough in the night that it would get buried in people's newsfeeds and my friends and family would never know I had written it. But my mom found it. And she defended me against a faceless attacker. I felt her love for me more in

that one post than any other single memory of her. More than telling me, “You’re a child after my own heart” when I chose crunchy Cheetos and Dr. Pepper as my snack from the vending machine during my brother’s church league basketball game. More than her sitting in the floor and playing “the Barbie game – Queen of the Prom” with me, despite having back problems, when I stayed home sick in the first grade. More than her beaming with pride at school awards nights in auditoriums with poor acoustics. This one social media comment from my mom, who hates confrontation, to a faceless name behind a computer screen made me feel proud of myself for the first time for speaking out loud about infertility. That my cause was worth championing because someone was championing me.

But what if that random man was right? What if it wasn’t in God’s plan for me to have children? But my mom was also right in that we, as humans, will never know God’s plan for us ahead of time, if he “plans” at all.

There are two couples in the Bible who are told to have struggled with infertility – Abraham and Sarah and Zechariah and Elizabeth. As the story of Abraham and Sarah is taught in the Southern Baptist church I was raised in, it was God’s plan for Sarah to give birth to Isaac, one of the greatest patriarchs of the Israelites. God appeared to Abraham and simply laid out his plan and everyone’s role in it. Stories like theirs make both prosperity and despair more easily digestible because they mean that everything that happens is because God has foreordained it. While Zechariah and Elizabeth finally give birth to John the Baptist, who later went on to baptize Jesus, after decades of praying for a baby. Stories like this one allow people to think that if they pray enough and are

righteous enough, God will answer their prayers with a “yes.” But to me, what these stories do is pit two Christian pillars against each other.

Simply, if God’s plan is predetermined, then why pray to God asking for one outcome over another? Or if God does listen to and grant prayers, why are some left suffering and not others? Unfortunately, I have no definitive or scholarly answer to give; I must leave this topic to the priests and protestant theologians to continue their struggle to strike the balance between predestination and prayer.

But for me, I prayed. I prayed for wisdom for our doctors to lead in our best interests. I prayed for strong communication between me and the world around me – so that others didn’t feel as lonely – and strong communication between me and Matt – because our marriage, like any other, would have fallen apart without it. And I prayed that God would give me peace and clarity through this journey, for the stress and the worry and the blame and the self-doubt were too much to carry alone, and I noticed my prayers came easier and peace came faster when Matt and I weren’t actively trying to conceive.

Maybe it’s God’s way of telling me that his plan for me doesn’t include a baby. Whether it does or not is becoming less and less important, although the pain of it does lurk around dark corners from time to time. I am happier and lighter focusing on myself and helping care for others. This year, I’ve accepted a promotion at a new high school where I coach other reading and English teachers; I’ve volunteered at a community food bank; I donated feminine products to a local Women’s Resource Center on International Women’s Day; and I’ve donated bags of clothes to local charities. These are all small

acts, but when I focus on loving the people around me, I feel more connected, more human than I have in the past three years.

And yet, in the darkest, most still moments of the night, I pray for a baby.