

A stylized tree with a green trunk and branches, set against a maroon background. The leaves are in various colors: yellow, orange, teal, and light blue. Small white circles are scattered throughout the foliage.

Office of The
CHIEF RABBI

Baby loss, infertility and childlessness:
A guide for Rabbis, Rebbetzins and
Lay Leaders on providing support





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Foreword from the Chief Rabbi

Chazal teach לעולם תהא דעתו של אדם מעורבת עם הבריות – One should always adopt an empathetic disposition towards others. (Ketubot 16b) **This is much more than a general inclination towards kindness. It is an insistence that we must, at all times, take the time to consider the impact of our own words and actions upon those around us.**

This sage advice applies to everyone, and even more so to leaders. For us as Rabbis, Rebbetzins, educators and lay leaders, empathy is central to our roles, as we seek to utilise the opportunities we have to guide and inspire our communities.

Despite our best efforts to ensure that our kehillot are warm and welcoming places, within which no one is left feeling excluded or alienated, sometimes we can inadvertently leave a person or group of people feeling distinctly uncomfortable and unwelcome.

While so much of our communal activity focuses on the joys and blessings of family life, there are those among us who bear the weight of baby loss, infertility, and childlessness. Many face silent struggles, grappling with grief and trauma that can be difficult to articulate. This guide seeks to help us achieve two objectives: סור מרע - to avoid doing or saying the wrong thing, and עשה טוב - to know how to provide solace, understanding, and unwavering support. The guide weaves the threads of first-hand experiences, expert analysis and practical guidance to better understand the journeys of those affected by baby loss, infertility and childlessness.

I would like to thank Dayan Binstock for his input into this guide, as well as Michelle Bauernfreund and Jessica Sebbag for their tireless work on the guide, and Chana, the wonderful fertility support charity, which has given outstanding service to the Jewish community for some thirty years.

May we be blessed with meaningful and fulfilling lives, and may we foster communities that offer the warm embrace of dignity and comfort for all people, regardless of their circumstances.

Chief Rabbi Ephraim Mirvis



Introduction to the Guide

We are pleased to present this Guide that has been produced for Rabbis, Rebbetzins, and lay leaders in our communities. It focuses on three issues: pregnancy and infant loss, infertility and childlessness. As we know, these are all common issues, which many people struggle with. When we also factor in the Jewish communal context, in which building a family is both a mitzvah and a very strong cultural norm, the pressure felt by those grappling with these issues can increase significantly. The purpose of this Guide is to better understand how we, as leaders, can best support, in the most sensitive and inclusive way, those in our communities who are experiencing any of these issues.

The Guide is divided into two sections. The first outlines key medical terminology associated with the three issues at hand, along with their definitions. It explains the emotional, physical, and spiritual impact of these issues. The impacts can be wide-ranging and, as leaders, it's crucial for us to be able to recognise how people might be affected, particularly because Rabbis, Rebbetzins, and community leaders are in a unique position to support people. Thus, the second section of the Guide details the ways in which you can support someone during these difficult times, including both practical and emotional support, and signposting to relevant charities and organisations.

Our goal is to further expand the tools in your toolbox – to enhance your knowledge and skillset to ensure that we are mindful, as much as possible, of those who may be struggling within our communities.



Explaining the issues

Miscarriage and stillbirth

Miscarriage and stillbirth both refer to the loss of a pregnancy. An estimated 20–25% of pregnancies are miscarried, but the number appears lower because only medically confirmed pregnancies are counted. Many miscarriages take place before a woman even finds out she is pregnant. These numbers are no different in the Jewish community.

It is important to understand the distinctions between different kinds of pregnancy loss so you can speak to and guide those involved using the correct terminology. Most women who miscarry do so once, but some will have recurrent or repeated miscarriages, perhaps with healthy pregnancies in between.

Early miscarriage

This is when the foetus or embryo dies in the uterus during the first three months (first trimester) of pregnancy. Approximately three out of every four miscarriages happen during the first trimester. Very often, doctors will be unable to find a reason for an early miscarriage.

Ectopic pregnancy

This is when a fertilised egg implants outside the womb, often in one of the fallopian tubes. The pregnancy cannot be saved and can become dangerous to the mother if not removed. The fallopian tube may also need to be removed. Ectopic pregnancies occur in approximately 1 in every 80 pregnancies and are usually discovered in the first trimester. It is possible to conceive again after an ectopic pregnancy, but the chances of having another ectopic pregnancy are increased if you have previously had one.

Molar pregnancy

This is when there is abnormal cell growth and the foetus does not develop as it should. The pregnancy cannot be saved. 1 in 600 pregnancies is a molar pregnancy. It may result in a miscarriage, or will be picked up during the first trimester. The pregnancy will need to be removed and the mother will need some monitoring afterwards.

Late miscarriage

This is when a baby dies in the uterus between 14 and 24 weeks of pregnancy. It is also known as ‘second trimester loss’. In these cases, the baby will need to be delivered. Approximately 1 or 2 in every 100 pregnancies end in late miscarriage.

Stillbirth

This refers to a loss at any point after 24 weeks of pregnancy. Approximately 1 in every 200 births in England is a stillbirth. Stillborn babies must be officially registered.

Recurrent miscarriage

This is used to describe when three or more pregnancies have been lost in a row. It affects approximately 1 in 100 couples.

Termination of pregnancy

Terminating a pregnancy for medical reasons (TFMR) is the ending of a pregnancy, most commonly due to results from antenatal testing, which show that the baby has a serious genetic or structural condition. A termination may also be offered if there are complications with the pregnancy that pose a significant threat to the life of the mother or baby. Although there is not currently any robust data on the number of TFMRs, from the available statistics it is estimated that at least 5,000 happen in the UK every year.

Most miscarriages take place during the first trimester, which is often before the parents have shared their pregnancy news. For this reason – and because it is such a painful, private topic – talking openly about miscarriage is rare. Therefore, many people might not realise how common miscarriage is. While stillbirths are a more public trauma, seeing as the pregnancy has often been shared with family and friends by that point, some might prefer to grieve privately.



Explaining the issues

Infertility

If a couple has regular, unprotected intercourse for a year (or if over 35, for six months) but cannot conceive, it could be a sign that they are dealing with infertility of some kind. Most couples (84%) will fall pregnant within a year if they have regular, unprotected intercourse. Around 1 in 7 couples have difficulty conceiving. A couple that has been trying to conceive for more than three years without success has a 25% chance (or less) of conceiving within the next year. Furthermore, fertility declines with age, so the chances of conceiving get lower over time. These numbers are no different in the Jewish community.

There are several different types of infertility.

Female infertility

This is when a woman is unable to get pregnant naturally. There are four main causes:

- Egg production problems
- Conditions that affect the ovaries
- Conditions that affect the fallopian tubes
- Conditions that affect the womb

Often, an advanced maternal age can also make conceiving difficult. In one in four cases, it is not possible to identify the cause of infertility. This is called unexplained infertility.

Male infertility

This is when a man is unable to have children naturally. There are many causes, including sperm disorders, hypogonadism, and ejaculation disorders. Similarly to women, an advanced paternal age can make conceiving more difficult.

Primary infertility

This is when someone who has never conceived before has difficulty conceiving.

Secondary infertility

This is when someone who has conceived before has difficulty conceiving again.

In addition to the medical categories of infertility, **halachic infertility** occurs when a woman ovulates too early, and therefore too long before mikveh immersion (and thus intercourse) to allow for conception.

Childlessness

There are many reasons a couple or individual may be childless – this may be by choice or not by choice. Both women and men can be childless. This includes married couples and single men and women. In the UK, around 1 in every 5 women end their childbearing years childless. 80% of these women are childless not by choice. These numbers are no different in the Jewish community.

Childless by circumstance (not by choice)

There are many circumstances that can lead to childlessness:

- Pregnancy or baby loss
- Infant loss
- Infertility of either or both partners
- Not having met a partner with whom they want to have children, which is often referred to as ‘social infertility’
- Genetic factors that make conceiving difficult or complicated
- Physical or mental illness, or emotional or relationship issues, that make childbearing untenable
- Deciding that using other reproductive methods isn’t right for them

Childless by choice

Some people choose not to have children for any number of reasons. They might prefer to refer to themselves as ‘childfree’.



Explaining the issues

The emotional and physical impacts

People who are experiencing pregnancy or baby loss, infertility, or childlessness may be going through a process of grief and mourning. Their loss – at whatever stage of pregnancy or fertility treatment – is a very real loss, a loss of an imagined future that has now been taken away. It is important to understand that this can be an ongoing process, even after months or years have gone by. Many if not most people will either already have or will go on to have live births and healthy children, but that will not necessarily lessen their distress. They may always remember the babies that might have been.

The feelings felt after the termination of a pregnancy can be as strong and as painful as any other type of baby loss in pregnancy. A mother being told that her or her unborn baby are at risk is a painful and traumatic experience. Parents often feel guilt linked to making the decision to terminate, which can make it even harder.

Different people grieve in different ways. There is no right or wrong way to grieve or express grief, loss, or other feelings. It is crucial above all to remember that everyone's experience of loss is individual. Differences in expressions of grief can sometimes lead to a couple being able to support each other, whilst at other times can lead to tensions in a relationship.

Often, grief over childlessness, baby loss, and infertility is hidden. This type of grief is known as disenfranchised grief – where the loss is not openly acknowledged or publicly mourned. This lack of acknowledgement can make the person or people feel as though their loss is not as 'important' or 'real' as other types of losses. Though some people do open up about these issues to their family, friends, and the wider community, many do not and prefer to keep their grief private. It is important to remember that disenfranchised grief can be acutely felt by anyone who longed to have a child and family, but was, or is currently, unable to.

Grief manifests at a personal level and at a communal or social level. Following a loss or the time when a person realises their dream of becoming a parent has passed,



However close a couple are, they will almost certainly grieve in different ways and at different times. Some people cry more than others. For some there is a more delayed reaction, as the sad reality sinks in or as new medical details come to light. The advantage of this 'imbalance' in patterns of grieving, when the one is up and the other is down, is that they can be there for each other more fully, accepting the other's reality.

Nechama



a person might feel the need to withdraw and grieve privately. They might want to talk about their feelings with trusted family and friends, but they might not want to talk about it at all. Some people want to get back to 'normal' as quickly as possible. They might choose to immerse themselves back into work and the community, and speak openly about their loss. Others might choose to return to work and everyday life without talking about it.

Whenever and however a person goes back out into the community following a loss, especially after the death of a child, they may feel anxious knowing that their loss is public, and worried about how other people will react towards them. Sadly, some reactions may be hurtful, even if they are not intended as such. Additionally, they may worry about how they will react if another person talks to them – whether they bring up the loss or not. Some might feel criticised during their interactions with other people, as if they are in some way to blame for what happened.

Social pressures and traditional gender roles can leave men feeling unable to speak about the emotional impact of childlessness, baby loss and infertility. Specific care should be taken to support men in this regard.



Explaining the issues

The emotional and physical impacts continued

For all people who are struggling to have children, or who find themselves childless not by choice, seeing other pregnant women, newborn babies, or families with children may be painful. This alone may cause them to hold back from attending social or communal events, including going to shul. In addition to this, such events are often family-focused lifestyle events.

For those undergoing fertility treatments, it can be a difficult journey fluctuating between hopefulness and severe disappointment if the treatments are unsuccessful. Every unsuccessful treatment can feel like a new loss.

Shame or embarrassment is often felt acutely. For example, those dealing with infertility might be embarrassed for others to know they are struggling with something that is universally considered so natural. Within a relationship, one partner may feel guilt or a sense of failure, which can create a complex dynamic.

Physically, most women who have experienced late miscarriage or stillbirth will have given birth in traumatic circumstances. Not only are they grieving, but they are also dealing with the physical aftermath of giving birth, which may include lactation. Similarly, women who are going through fertility treatments are also affected physically; treatment can involve daily injections, medication, and appointments. Women may also be experiencing hormonal fluctuations which cause emotional distress or mental health difficulties.

Pregnancy after loss or fertility treatment is also a difficult and precarious time. The pregnancy itself might be medically normal – though this is not always the case – but the feelings are often those of anxiety and worry. People may feel uncomfortable receiving well wishes or being asked about their plans for the baby. Hearing other people's pregnancy announcements or being around other pregnant women can still be 'triggering'. A baby born after loss is commonly referred to as a 'rainbow baby'.

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My second miscarriage occurred shortly before Yom Kippur. I didn't take my daughter to the children's service because everywhere I looked there were siblings, double buggies, and pregnant mums and I couldn't face seeing the thing I wanted so much being played out in front of me. I slipped into the main service during a quiet time in the afternoon, but when we reached the words *V'al chata'im / she'anu chayavim aleyhem / kareit va'a'ri'ri*, the translation suddenly came into focus. Was this meant for me? Was I being punished? Once I saw those words in that light, I could never un-see them. It is so important to be aware of who is in the room – and who can't face being in it at all – who might be feeling that pain, whether from the loss of a baby, infertility, or any other kind of trauma and to find ways to be inclusive and show that we care, even if we don't know who they are.

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Amy



Explaining the issues

The spiritual impact

Experiencing any of these issues can cause people to question their faith. While many turn to prayer in their times of need, others, in their grief, shame, or anger, may question God's plans.

In addition to their own personal faith, childless people, or those struggling to conceive, may find themselves facing an existential crisis over their place in the community. Jewish life is so centred around the family and children that childless people may feel as though there isn't a place for them at shul or in other communal settings. That these issues are so rarely talked about isolates them even further.

As people age, the expectation that they should have children grows. Other people might ask them about their future plans for having children without thinking that these questions might cause acute distress. A childless person will also be very aware that other people are 'wondering' about them or

discussing their childlessness, which will add to their feelings of isolation from the community.

In a community where having children is taken for granted, and even expected, someone who is struggling may find themselves unable to fit in. Not only are they struggling to have children, and struggling with how other people might view them, they may start to struggle with how to define themselves within the community. Over time, they may experience a loss of identity. They may question who they are, and what their purpose is – as part of the community and in their life as a whole. Childless people may also get left behind by their peers who move on to their new role as parents. This can add an extra layer of grief.

Within Judaism, there are many expectations when it comes to having a family. The mitzvah of procreation is mentioned many times in Tanach:



My wife and I like so many other couples, married with big dreams for a large family of 4/5 children. Years down the line with child number one illuding us, the doctors still have no idea why. I feel so exhausted, so confused and so lost. I simultaneously feel slightly less human for not being able to start a family whilst also in so much emotional pain, I feel over exposed to my humanity. This is what I feel before I even step into a communal setting. When I do step into the community, I am presented with activities segregated by life stage, none of which apply. Youth activities are not appropriate, friends attend family activities, and 'empty nester' activities are attended by people the same age as my parents. There's nowhere for me to go. I feel so alone.

Every day during Shema Koleinu, I daven for everyone in the world that struggles with fertility. I wish my community davened for me.

Saul



When we met 20 years ago it wasn't long before we were engaged and then married. It felt like we were setting off on an adventure, and that adventure included starting a family.

But after 10 years of medication and procedures, it became too distressing for me to share in my friends' happiness. There was constant chatter about their children, I couldn't cope. I was sad, angry and bitter.

Our lowest point came when we decided to go to Eilat to try and recuperate and lift our spirits, but it was the worst holiday we ever had. It rained for three whole days. It seemed like G-d was crying with us.

I began to have serious issues with G-d, I railed at Him, shouted at Him things like, 'why is everyone having babies when I can't?' I felt abandoned by Him, He wasn't my friend and I couldn't find comfort.

Sheri





Explaining the issues

The spiritual impact continued

Religious and cultural expectations

“So God created man in His image, in the image of God He created him; male and female He created them. God blessed them and God said to them, ‘Be fruitful and multiply, fill the earth and subdue it...’” - Bereishit 1:27-8.

“God blessed Noach and his sons, and He said to them, ‘Be fruitful and multiply and fill the land.’” - Bereishit 9:1

“And you, be fruitful and multiply; teem on the earth and multiply on it.” - Bereishit 9:7

“And God said to [Yaakov], ‘I am God. Be fruitful and multiply; a nation and a congregation of nations shall descend from you.’” - Bereishit 35:11

“Do your duty ... and provide offspring.” - The story of Tamar, Bereishit 38:8

“God established [the world]; He did not create it for emptiness; He fashioned it to be inhabited.” - Isaiah 45:18

“In the morning sow your seed; in the evening do not be idle, for you cannot know which will succeed.” - Kohelet 11:6

Not only is having children ‘the most natural thing in the world’ and a worldwide norm, it is also a commandment from God. There are stories in the Torah that talk about punishments of childlessness or describe miraculous births. They can be hard for a childless person to listen to, and they may place an extra pressure on those who are struggling.

Culturally, it is generally assumed that all Jewish adults want to have children and that, at some point, they will. It is not unheard of for religious or community leaders to ask, ‘What are you waiting for?’ or ‘When are you going to have kids?’ Most of the time, these questions are meant in a benign way, but they reinforce the notion that if a person doesn’t have children, they are doing something wrong. Similarly, friends and family might ask these questions too, reinforcing the notion that having children is normal, obvious, and easy. These questions – asked without realising there may be an

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When my dream of having children died, a large part of me died alongside it. Nothing prepared me for the final realisation that I would never get to light candles with my daughter every Shabbat or become grandmother to her children. Grief stole many years from me and along with it my sense of identity as a Jewish woman. Who am I if not a Jewish mother bearing the next generation?

Childlessness has been an isolating journey. All my friends are members of the exclusive motherhood club to which I will never belong, nor will I join the grandmothers club beyond it.

I feel grateful however, for the lessons childlessness has brought me. A deeper understanding of empathy, tenderness, and vulnerability and of strength, resilience, and courage. A powerful toolkit which is helping me support others whilst carving out a new life for myself beyond childlessness. One of equal value, meaning, and purpose.

Sara

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issue – will almost certainly cause pain and anguish to those who are struggling.

While these expectations about having a family are inherent in our communities, an understanding of how common miscarriage, baby loss, and infertility are is not. These topics are often not spoken about publicly, and this taboo further reinforces the notion that everyone should have children. The silence on these topics means people don’t realise that 20–25% of pregnancies end in miscarriage, that 1 in 7 couples are having trouble conceiving, and that overall, 1 in 5 women end their childbearing years childless not by choice.



Practical and emotional support

Overview

When dealing with these issues, the language we use is all-important. Community and religious leaders should ensure they fully understand the terminology and the differences between various types of miscarriage and infertility and, more generally, the many circumstances resulting in childlessness. Using a medically inaccurate term when speaking to someone who is grieving can be very insensitive, however, some people may prefer to avoid medical terminology altogether.

It is crucial to be guided by the person you are supporting and to try to mirror the language they use when discussing their loss. Listen to how they describe their experience of the pregnancy and loss, and be guided by that. Many women and couples think of even the earliest pregnancy as a baby, rather than an embryo or foetus. Some might prefer you to use the word 'baby', however early their loss. Women and couples often dislike the use of the word 'termination' to describe their experience because of its association with the termination of unwanted pregnancies. They may also feel it implies that they had more choice than they really did.

Acknowledging the grief of those who are suffering is important too; it should not be ignored or skated around for fear of upsetting them. We need to show empathy for these issues, which is best achieved by looking at each instance individually. Reach out to the grieving person and let them know you care. Listen carefully to them without judgement. Respond to how the grieving person acts. Acknowledge their loss but be sensitive to the fact that they may not want to talk about it – or perhaps they do. Try to understand how they feel in any given situation, and accept that they may not attend certain places or events. Even if they pull away from the community, continue to reach out and ensure they do not feel left out or excluded.

Religious and community leaders should be able to provide appropriate emotional and pastoral support, and give advice when necessary.

Some supportive, helpful things to say:

- It's good to see you
- I'm so sorry to hear what you are going through
- I've been thinking about you
- Is there anything we can do to support you?
- If you would like to talk, I'm here to listen

Some things not to say:

- I know how you feel (no matter how much you think you do)
- At least you have other children / at least you're young (or anything beginning with 'at least ...')
- You can always have another
- This only happens to people who can handle it
- It's a test from God and God only tests people who can cope with it

(Source: Nechama Comfort)



Practical and emotional support

Questions about halacha and ritual

Religious and community leaders might receive questions relating to the halacha surrounding these topics. The laws of Taharat Hamishpacha, particularly visiting the mikvah, can be difficult or painful for those who have suffered a loss or are experiencing infertility. It is crucial to answer questions and discuss the halacha with empathy and sensitivity, and without passing judgement.

For those who have experienced baby or infant loss or stillbirth, some might also be looking for a ritualistic way to mark the loss or deal with the mourning process. There are a number of options that can be suggested to them. There is no halachic need to do any of these, but they may help a couple to process their grief. It is important to understand what they are looking for, in order to be able to find an option that will help them.

Chesed

This offers a way to do something positive and to help others in memory of a loved one.

Learning

Engaging in regular learning or setting a learning target can help motivate someone who is grieving to do something new. It is a spiritual action they can do in memory of a loved one.

Reciting Kaddish

This can help acknowledge the loss within the community, offering a place and a way to grieve that is familiar and therefore fully understood by others in the community. It helps equate this loss with other sorts of loss.

Saying Yizkor

This offers a regular way to remember the loss within the community.

Reciting Tehillim

This is a more private way of grieving or praying while offering a calm, spiritual outlet for grief. It is also a way for those struggling with infertility to embrace something both spiritual and private. Psalms 121 and 128 are particularly appropriate.



As the Rabbi and Rebbetzen of a small community in Australia at the time, the stillbirth of our daughter was a very public loss. The grief that engulfed the whole community led to acts of chesed and ‘peacemaking’ on an unprecedented level. Even at the time, this made us feel that our daughter had been the catalyst for so much good, which was a great comfort to us, and that it was a zechut for her neshama. And the feeling that people really cared about us was more than matched by the great happiness in the community when our next son was born.

At the time of our greatest pain, my husband and I both felt Hashem’s strong presence more than at any other time in our lives, as if we were being carried, and we look back on it as a turning point in our personal spiritual growth.



Nechama

Lighting a yearzeit candle

This is a way to privately commemorate the anniversary of the loss.

Attending the burial

Attending the burial can help bring some sort of closure, and it also helps the individual grieve alongside others in their community. Even if they are not ready to go back into the community yet, they will be aware that others are sharing in their grief.

Placing the matzevah

A way to commemorate the loss after a set amount of time has passed. Placing the matzevah can offer some more closure, and also brings the mourner back to the grave, which can be therapeutic.



Practical and emotional support

Questions about halacha and ritual continued

Visiting the grave

Visiting the grave can be very therapeutic because it offers the mourner an opportunity to focus on their grief completely. Everyday life brings many distractions, but sometimes it is useful to ‘get away’ and let the grief come out in full.

Sitting shiva or another organised time for mourning

Sitting shiva can be a therapeutic opportunity to talk about the loss and grief with family, friends, and others in the community. It helps the mourner see that other people care and share in their grief. It allows time to focus solely on the loss without having to handle everyday tasks. Mourners might find it helpful to dedicate time out after a loss, to give them an opportunity to grieve and receive visitors, even if not through a formal shiva process.

Naming the baby

Sadly, with miscarriages and stillbirths, there is no ‘need’ to name the baby. However, many parents will want to give the baby a name because, although it never lived outside the womb, it is their child. Naming the child is important. It acknowledges the loss and can help the parents when they speak of their child to others.

Community Involvement

Community leaders have a responsibility to consider the events, sermons, and other activities that take place in their community. They should work to make them as inclusive as possible for all members regardless of their family situation.

Raising awareness of these issues is important. It is vital, not only to raise awareness of the more obvious circumstances such as baby loss and miscarriage, but also to discuss the many reasons why people end up childless. It is critical to include all childless not-by-choice people into the storytelling so as to not further alienate them. Rabbis, Rebbetzins, and other leaders may want to consider addressing these topics in a sermon or another setting. This will signal to those struggling – and to the community as a whole – that these issues are acknowledged, important, and on the community’s agenda.

Some who are struggling with these issues feel isolated and excluded. Actively working to include them, and being consciously mindful of every event and how it may impact them, can make a huge difference.

Crucially, thought should be given to reframing the childless experience within Judaism and within the community. This can include considering the roles that childless men and women play in the community and how that can be explored and improved going forward.

Those involved in the planning of communal events should be advised to consider those in the community who may be struggling with any of these issues. They should think whether there is a way to include them at events that would otherwise be family- or child-focused. This will not be possible for all events, but it may help the community be more inclusive at times. Those involved in the marketing and publicity of events should also be mindful of these issues. It’s important that childless people, or those grieving, aren’t repeatedly receiving information about events for families. Consider creating ‘opt out’ options for certain emails, or creating different mailing lists so information about family events is only sent to those with families.



Signposting

Organisational help

There are many organisations that offer help, support, or resources on these topics. Community leaders should be aware of the various organisations, and be able to pass on their details to couples or individuals who are experiencing any of these issues. It is crucial to ensure that individuals seek medical help when required. It is important to be aware that some people may not want to speak to community leadership about these issues. Amongst the organisations listed below, those marked with an asterisk* have online communities and forums where people can get support anonymously, and/or speak to others that have been through similar circumstances. Whilst many of the organisations below offer support for couples, the ones with the following symbol ~ also offer support specifically for men.

Here is a list of some of these organisations:

Bonei Olam

Provides support and financial assistance for couples facing infertility.

020 8458 1410

Chana

The leading fertility support organisation for the Jewish community in the UK. They also support couples going through surrogacy and work closely with the London Beth Din on these issues.

info@chana.org.uk
020 8201 5774 (helpline) / 020 8203 8455 (office)

Fertility Network UK*~

Provides free and impartial support, advice, information and understanding for anyone affected by fertility issues.

<https://fertilitynetworkuk.org>

Jnetics

Dedicated to the prevention and diagnosis of Jewish genetic disorders.

<https://www.jnetics.org>

Yad La'em

Supports mothers physically and emotionally after birth.

eemanuel37@gmail.com
020 8209 1113

Miscarriage Association*

Provides support and information to anyone affected by miscarriage, ectopic pregnancy, or molar pregnancy.

info@miscarriageassociation.org.uk
01924 200799



Signposting

Organisational help continued

Sands*~

A pregnancy and baby loss charity. They work to reduce the number of babies dying and ensure that anyone affected by the death of a baby receives care and support for as long as they need.

helpline@sands.org.uk
0808 164 3332

Nechama Comfort

Supports Jewish families who have suffered pregnancy and infant loss. (Based in the USA.)

info@nechamacomfort.org
+1 833-632-4262

The Ectopic Pregnancy Trust*

Supports those who have suffered from an ectopic pregnancy, as well as their wider family and friends.

<https://ectopic.org.uk>

Tommy's*~

Provides trusted pregnancy and baby loss information and support.

<https://www.tommys.org>

Petals

Provides and promotes specialist counselling for parents across the UK following baby loss.

<https://petalscharity.org>

Jewish Bereavement Counselling Service (JBCS)

Offers counselling and support to people following a bereavement.

enquiries@jbcs.org.uk
020 8951 3881

The Compassionate Friends*

Charity dedicated to the support and care of bereaved family members who have suffered the death of a child of any age and from any cause.

<https://www.tcf.org.uk>



Signposting

Organisational help continued

The Good Grief Trust

A charity run by the bereaved, to support the bereaved.

<https://www.thegoodgrieftrust.org>

The Stillbirth Support Group

A United Synagogue chesed group that offers confidential support and help to men and women who have suffered a stillbirth recently or in the past.

020 8343 5651

I Was Supposed to Have a Baby

Instagram account that speaks up about many of these issues using real-life stories to spread awareness and support those who are struggling.

www.instagram.com/iwassupposedtohaveababy

Gateway Women*

Supports women who are permanently involuntarily childless due to infertility or circumstance.

www.gateway-women.com

Ageing Well Without Children

Provides information and support for people ageing without children.

<https://www.awwoc.org/>

United Synagogue Burial Society

Responsible for all the activities surrounding the burial of United Synagogue members.

020 8950 7767



Thank you

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Statistics used in this guide have been taken from the following organisations and charities:

Tommy's
Healthline
Miscarriage Association
NHS
Petals
ONS
Gateway Women

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