

Collection of Religious Perspectives about Infertility

Fact Sheet 13

RELIGION AND INFERTILITY

A Christian Perspective

One of my earliest childhood memories is going to church. It seemed like we were always going to church. There, parents would bring their children and learn more about God. Little did I realize that many things I had learned as a child would cause me so many problems in my adult life.

Both my husband and I were raised as Protestants, in traditional homes—father a provider and mother a homemaker.

As a girl, I saw my role in life as wife and mother. I can remember as a child of five telling my mother I was going to have 1,000 babies. I certainly had high hopes for my fertility!

College was an exciting time in my life. The college I attended was a church college. My views on life were based on what church leaders said was “God’s Way.” It was there I met my future husband, my “knight in shining armor.” Here was the man who would be my husband, my lover, my provider and my protector from all painful situations. Soon after our fertility came into question, my knight began to slip from his white steed.

Because of my concepts of marriage and family, many frustrating days lay ahead for my husband and me. The traditional roles of husband as father, provider and protector and wife as mother, homemaker and caretaker of her children do not allow any accommodation for the infertile couple.

One of the things that really caused me so much pain was that as a woman in the fundamentalist community, I was taught I had no rights, just one basic purpose—wife and mother. When I began to realize that I fell short of this expectation, I knew I had to find an answer to my

questions, “Was I really a woman? Why was I even born if I could not even fulfill my basic responsibility? Why was God punishing *me*?”

Through prayer and reading many books on Christian womanhood, such as *Woman Be Free!* by Pat Gundry (Zondervan Publishing House, Grand Rapids, MI, 1977), God showed me the marvelous revelation that I had a purpose in life, to glorify God. I learned that I was truly a woman because of the basic fact I was born female, and more importantly, God does not punish His children by causing them to doubt their reason for living. In fact, God never punishes those who love Him. God is a God of love. Never does He tempt His children.

There have been many times when I have reached out to my fellow church members, wanting their help and prayers in dealing with this situation. Once, I requested prayer from a women’s prayer group and was promptly told by these women that maybe it was not God’s will for me to have a child. Therefore, they were not going to pray for me. Since my religious beliefs and convictions are based on the power of prayer, I was devastated!

At the occasion of the dedication of my infant niece, the pastor made the comment during his prayer that “the home with children in it is truly blessed.” Both my husband and I nearly fell out of the pew. We both feel that we are blessed in our home because we have a strong, solid love for each other and for our God. It is a matter of perspective. This minister was the father of seven children. I guess he felt he was extremely blessed!

I have mentioned some horror stories of how so-called “friends” have behaved towards my husband and me. Each infertile person has similar stories. Many infertile people feel retreat from church is the best solution to this problem, but retreat from God never is. I admit that I do have it easier than most; because my husband is a

minister of a small country church now, I do not have to endure flowery Mother's Day sermons or sugar-plum messages at Christmas. I am also fortunate to have a dear Christian friend who has shown me something very few people know—empathy. Our friendship grew and solidified while she was pregnant. Never has she given me a specific formula to live by or pray by. She is always there when I have needed someone to talk with or cry with.

God sent her and her husband to us when we needed someone who really cared. My husband and I were attending a church where there was a large emphasis on love, yet it was only a superficial, external love. It was not the kind of agape love Jesus teaches about in the Gospels. Agape love, described in the New Testament, I Corinthians 13, is that empathy that reaches out where people live, non-judging, non-demanding.

We thank God for giving us the opportunity of being able to witness this type of agape love in these friends and through it we have grown in our adjustment to infertility. As we have grown, we can look back and truly say that “..we know that in all things God works for the good of those who love Him...” (New International Version). We know God will use this in our lives to be more open and caring for those around us, whatever their situations and problems. For this, we are thankful.

A Mormon Perspective

I am a Mormon woman experiencing infertility. I love being a Mormon! My religion brings me much strength, but also some heartaches. I am proud of my heritage, but I struggle with the present. What a paradox that some of the very things which make me most proud of my religion are also such stumbling blocks for me.

Our prophets tell us that “no other success can compensate for failure in the home.” Children are desired above wealth, position, degrees or power. “Families are forever.” “Our children are our jewels in the crown of eternal life.” “Yes, children cost a lot, but they last a long time.” Feelings such as these saturate the Utah atmosphere.

Perhaps this emphasis is not so great in other geographical areas of the Church. But here in Utah, the cultural pressure for raising large, happy families is mind-boggling (especially to one unable to reach this goal).

Our Church encourages adoption. They have an agency to handle this. But the requirements are high. This

helps assure the best parents possible for children, but it's easy for waiting couples to develop feelings of unworthiness and frustration. After all, how perfect can a person be?

Mother's Day is a hallowed holiday. Yes, I do believe mothers deserve the recognition and gifts they receive—but it's so hard to sit silently in Sunday school just watching as everyone else picks up their potted petunias. Am I jealous? Absolutely!

Sunday used to be my favorite day of the week. Why does it now seem so depressing? I find myself feeling that church is great for people with families, but it seems so irrelevant for me. I feel left out—like I don't belong.

Books, songs and magazine articles remind me that motherhood is a partnership with God. Why doesn't God want me for a partner? Am I really that terrible?

No other church I know of offers such intense mother education to its young women. Our training is tremendous, and I'm sure beneficial, even to those who are not mothers.

But as childlessness seemed more and more probable, I couldn't help feeling I had just completed the equivalent of medical school and was now *not* allowed to practice medicine—what a letdown.

Miracles and Mormonism go hand in hand. We have experienced so many miracles that perhaps we take them for granted, or expect them to be performed on command. If the Lord could allow thousands of seagulls to swoop down and devour the swarms of invading crickets for our pioneer ancestors, why does He keep denying one simple fertility request?

Faith-promoting stories normally stir my heart, and bring tears to my eyes, except when they deal with fertility problems. Maybe a tinge of jealousy is responsible for my resentment toward such stories. Yes, I do remember Sarah, and Rachel, and Hannah and Elizabeth. But I have no son.

Roots are important to Mormons. The church has the largest genealogical library in the world. Our ancestors are remembered and revered. My favorite bedtime stories were about my great-grandparents, especially John August Olsen, who baptized seven members and excommunicated 23. I can hardly blame future grandparents for being anxious to see their own family trees blos-

soming.

Mormons are also a very sharing people. They love to visit and share experiences, even such personal experiences as childbirth. Trying to squeeze into these conversations can be difficult for an infertile person.

I do feel empathy from friends in the Church as they become aware of our struggle. This caring, however, can possibly turn to pity. And pity can be destructive. I don't want to spend my life feeling sorry for myself or having people feel sorry for me.

Although at times shaken, my faith stays strong. I know that God has divine powers of intervention, that He can and does work miracles. Straining to understand why we had been denied a child brought many illogical conclusions to my mind, "God must not think I would be a good mother. Perhaps He's punishing us for some past unrepented sin. Could He possibly still be upset with me for sneaking out on my first date before I was sixteen?"

Very slowly and gradually, through the process of "asking, seeking, and knocking," I am becoming assured that God is not being spiteful, nor do I think He doubts my competency as a mother. I am just beginning to catch a glimpse of the overall picture.

Discovering God's purposes can be a tremendous struggle. It's hard to be happy when you're hurting, and difficult to reconcile the purpose of pain. Denied children, I feel anguish and aloneness—but gradually I'm learning to reach out and catch both fleeting snatches and lingering spaces of happiness that come my way.

We are taught that problems may be given to us for our own growth and enrichment. One of our Apostles, Neal A. Maxwell, has written, "We keep forgetting that a test must really be a test, and a trial, a trial. We forget too that when these come to us they are carefully shaped to wring us and wrench us. It is a measure of both the love of a living God and his perfect awareness of our needs. In our hearts we often know this—even if we resent it"

I can sense that my attitude is changing. I'm doing all I can to help my prayers come to pass, and I trust that the Lord does still care about me. I'm sure He is lovingly concerned with how we are handling our trials.

I am experiencing a new growth from denial. I'm learning acceptance: acceptance of present medical facts, acceptance of myself and my husband as being "ok" and

loved by God, acceptance of society's insensitivities, but most importantly acceptance of my own strength to enjoy life and to cope with any possible future circumstances.

I need to remember that our Church places a tremendous value on individuals: "The worth of souls is great in the sight of God." Every person is important, whether rich, poor, handicapped, or infertile.

While families are a priority in Church values, the core concern is each individual's relationship with God. A closeness to God can give each of us the strength to meet whatever difficulties and challenges life may present.

I pray that you and I will have the strength to meet our own struggles. May we continually be enriched by life, ever willing to reach for its finest hours and its kaleidoscope of experiences.

Having touched the miracle of an adopted child of my own, I know the feeling of peace and contentment that can come. I know, too, that whether a person remains childfree or is blessed with a natural or adopted heir, he is still very much loved by God. This love reaches out to us in unfaltering intensity, in all our individual earth travels, our trials, and our triumphs. May we open our hearts and receive it.

Church and Synagogue Support

Every weekend, infertile couples sit quietly in church and synagogue pews throughout the country. Most of their pastors or rabbis are unaware of the pain and suffering of those couples trying desperately to have a child.

Although many church and synagogue members have immediate family and friends experiencing infertility, religion, for the most part, doesn't acknowledge infertile people. The secrecy of the infertile, their inability to voice their pain and their quiet disappearance from church and synagogue rolls, has deepened the problem.

To be involuntarily childless is an ever-present struggle with grief. A most natural place to go for solace and healing is their place of worship. Yet the overwhelming emphasis upon family, and upon rituals revolving around family, makes some services particularly painful.

As a choir member in my parish church, I had no advance warnings of christenings. I dutifully sang my way through these grueling tests of strength. Just as painful

were Mother's Day and Father's Day sermons. In particular, I remember one Mother's Day when my priest in all innocence asked all mothers in the congregation to stand. It seemed as if every woman rose except me.

My husband and I struggled each Sunday, debating whether to attend services or not. Many couples have decided not to chance an encounter with a children's sermon or a christening, or a baby on the same pew. They have dropped out of congregations, battling this crisis without vital spiritual resources.

Religion has already awakened to the changing parameters of its family. It is time for the churches and synagogues to recognize the childless. This can be done with a special prayer during those holidays that emphasize family. A healing service can be held for anyone experiencing a life crisis. Clergy and lay people can tactfully incorporate infertile couples into church activities. Congregations can provide opportunities for fellowship and socializing for the isolated couples, who may have distanced themselves from their immediate family and friends.

Infertile persons may need to be reassured of God's protection, and to know that they will make peace with whatever lies ahead, which may include their most terrifying prospect—remaining childless. Clergy can also provide information about important community resources such as RESOLVE. Perhaps the church could offer guidance through the perplexing ethics of new reproductive technology, with the clergy allowing infertile women and men to come to their own decisions.

Caring and listening are wondrous and rare gifts for an individual who is grieving. Their privacy must also be respected as they are included in church and synagogue activities.

When someone dies, the congregation embraces the grieving family long after the death. Often I longed for that embrace during my ongoing grief. Now that my husband and I have adopted our son and are public with our past struggles, we receive that outpouring of love. My prayer is that the many miracle seekers still wrestling with their faith will be enfolded in such love, the love of God.

Infertility and Orthodox Judaism

Having experienced infertility as an Orthodox Jewess, and having served as president of RESOLVE of Chicago, I am keenly aware of the special problems of this

situation. I have written the following article for Orthodox couples and the professionals who treat them, as well as to help the general public better understand their plight.

I was not raised as an Orthodox Jew. In my family, religion was simply a cultural influence that was felt in a festive way during the holiday seasons such as Chanukah and Passover. As a teenager, however, I began to explore my religion and I developed a deep faith and commitment to the observance of Orthodox Judaism. As I made the conscious choice to observe the strict laws concerning the Sabbath, diet, and even marriage, I also accepted readily the thought that righteousness invariably brings rewards, if not in this world, then in the next. At 17 years of age, when my peers were choosing professional careers, my ambitions were marriage and motherhood, creating an Orthodox household devoted to my religious ideals. At 21, married one year, and childless, I was told I would probably never have children. I can still remember thinking over and over again, "I've worked so hard, I've changed by whole life, I've truly been devout. Yet I must have done something wrong or this wouldn't be happening to me..."

There is something unexplainable about faith that keeps it alive even in its darkest hour. My religious commitment has endured as I've pursued the solutions to my childlessness. Today, nine years later, I am the mother of four sons. The eldest is adopted; the younger three are products of medical treatment. All of them are the answers to my prayers!

The concept of marriage in Orthodox Judaism cannot be separated from the concept of family. A marriage without children is not considered a fulfilled marriage, and as such is grounds for divorce.

To "be fruitful and multiply" is one of the first commandments found in the Old Testament. From this commandment many rabbinic authorities prohibit the use of birth control until a couple has produced at least two children, preferably one of each sex. The interpretations of this commandment go from the extreme of allowing the use of birth control only to protect the life of the women, to the more liberal acceptance of birth control for the spacing of children and limiting family size. Neither of these extremes allow for the positive choice of childfree living.

The childless orthodox couple is easily identifiable as infertile. They do not have the opportunity of keeping

their infertility “in the closet” until such times as they feel ready to discuss it with family and friends.

Infertile couples in the general population may choose to pass off their childless state as a matter of choice, thereby avoiding pressure from family to produce an offspring. The orthodox couple does not have this option. If they have not produced a child by their first wedding anniversary, they are immediately the object of speculation amongst the members of their community. They are suspected of practicing birth control and thereby criticized for not fulfilling the commandment to “be fruitful and multiply,” or they are suspected of “having trouble” and soon become objects of pity to their fertile family and friends.

Couples struggling to deal with the pain of their infertility often avoid hurtful situations—specifically holidays and gatherings where there will either be many children present or where they will find child-rearing the main topic of conversation. The infertile Orthodox couple cannot really make this choice. Their community is a prolific one, with a typical orthodox family having far more children than the general population. This stems from the belief that it is your duty to have as many children as possible, since it is said, “whoever adds one soul in Israel is as if he builds a world.” Most often their social life is locked into a particular circle of family and friends who share their religious views and practices. It is therefore not an option for them to change their environment to an alternate situation which would put less emphasis on their childlessness.

This is especially true for couples who are part of a Yeshiva (theological seminary) community. They are part of an isolated educational community that lives, studies, and socializes together. They do not practice birth control, except in cases of danger to maternal health. Even if these couples choose to seek comfort and understanding from their community, the results are often most disappointing.

A typical 24-year-old woman in a Yeshiva community will have been married for six years and will probably have at least five children and possibly number six will be on the way. While this woman may be much envied by her infertile friend because she is fulfilling her lifelong goals, the reality is that this woman is also being taxed to the limit of her strength to raise her brood of young children while coping with pregnancy closely followed by yet another pregnancy. Understandably she has very little sympathy or emotional energy left over to devote to an

infertile friend whose childless situation might not seem unattractive from time to time. From the infertile woman's point of view however, this lack of understanding comes across as uncaring, insensitive and altogether disappointing.

The religious crisis produced by infertility is similar in all religious people regardless of their specific religion. First comes doubt, “Why me? I've tried to do all the right things. How has God let this happen to me? Is there not justice?” Next comes guilt, “I must have committed some transgression to bring this upon myself and my spouse.” This leads either to atonement, “I'll just have to try harder and then I'll be rewarded with a child,” or to disillusionment, “It's no use, I've been devout and it didn't matter; I will forsake my religion.” These last people then possibly lose what may have been their one source of comfort, their faith.

In Orthodox Judaism there are strict rules governing sexual relations between husband and wife. Sexual intercourse is prohibited during menstruation (a minimum of five days) and during seven bloodless days following the menstrual period. At the end of this time, the wife immerses herself in a ritual pool (mikveh). Intercourse is then permitted. For most couples this would coincide with the time of ovulation, and conception hopefully results. For the infertile couple, however, the time of abstinence may well coincide with what appears to be their fertile time.

In some instances, it may be possible to manipulate either the time of ovulation and/or ritual immersion, but rabbinic permission must be sought. It is not acceptable to “shop” for an opinion. A couple is only permitted to ask a specific question once, and having asked, they must be ready to accept the answer. Therefore it is important that the rabbi they choose to consult be knowledgeable about infertility and the choices modern medicine has to offer. Some desperate couples may choose not to ask preferring not to know if their chosen treatment would not be approved. If successful in producing a child, they may still suffer from guilt and fear because they did not seek rabbinic permission. And if they remain childless, they are likely to suspect their guilt in “not asking” as the cause. For those couples who do “follow the rules” and consult with a rabbi and then remain childless, often the result is bitterness and disillusionment. In situations concerning questions about inseminations, semen analysis, ritual immersion, etc., couples often don't ask their rabbis the necessary questions because of a combination of feelings of embarrassment and hopelessness. These cou-

ples proceed to make their own decisions, often erring on the side of strictness.

When orthodox couples do consult rabbinic authorities, they are often pleasantly surprised by their cooperative attitude toward infertility treatment. Judaism is often very enlightened and liberal on this subject. It is important to note that there are very few absolute decisions. Each rabbinic decision is unique to the couple inquiring.

The physician/patient relationship in an infertility study is a very special one. Each must possess complete confidence in the other to facilitate treatment. The patient clings to his or her physician's every word and explanation in the hopes of understanding and solving their problem. At the same time the physician is dependent upon his patient's cooperation in reporting symptoms, charting temperatures and scheduling office visits. The two must work together as a team to insure the best chance for successful treatment.

The orthodox patient must make further demands on this relationship by asking the physician to adhere to a strict set of religious regulations and rabbinic opinions.

The doctor who becomes impatient with this situation, either because of a lack of understanding or interest, further increases the burden on his patient by making cynical and/or discouraging remarks, such as advising his patient to "cheat." The patient is then forced to choose between their doctor, who they believe to possess the "cure," or their religious conscience.

The orthodox patient whose physician takes the time to become knowledgeable and understanding of this problem is truly envied. Most often the well-informed physician will be sympathetic and cooperative, and will be willing to spend time with the couple and their rabbi to decide the course of their fertility treatment.

For any infertile couple, the normal stress of infertility can produce guilt, frustration, anxiety, marital stress, loss of self image and depression. The orthodox couple experiences all of these feelings, as well as bearing the extra burdens imposed by the observation of their religion. This often precipitates a severe religious crisis. Their options are more limited. Donor insemination and surrogate parenting would probably not be allowed to most couples. They must make additional demands on their physician to work within the specifications of their religion. Orthodox couples, already adhering to a religious "scheduling of lovemaking," must further schedule their

sex lives based on their fertility. And finally, they receive an extraordinary amount of pressure from family and community to produce a child, since failure to do so is considered grounds for divorce.

In times of crisis people turn to their religion to help them cope and give them strength. The same is true with Orthodox Judaism. A belief in God and his ultimate wisdom can sometimes smooth over the rough spots. But often adherence to a strict religious structure produces rough spots and creates hurdles that seem to make the going tougher, with bitterness and cynicism resulting.

Orthodox couples do not have the luxury of avoiding the issue until they feel ready to confront it. Hopefully the discipline learned in the day-to-day observance of Orthodox Judaism will lend them the strength to face infertility and come to terms with it.

INFERTILITY: DILEMMAS FOR THE JEWISH COMMUNITY

by Richard V. Grazi, MD

Every couple struggling with infertility is aware that this condition is unlike any other in medicine. Although the diagnosis and treatment of infertility can be highly technical, the experience of infertility is that of a life event that penetrates the core of the human psyche. With good reason, the defining work of Barbara Eck Menning, RESOLVE's founder, draws parallels between the experience of infertility and the psychological stages of death and dying: denial, anger, mourning and acceptance. But these extremely powerful emotions may be overshadowed by something even more powerful—the spiritual overtones of infertility.

Because the biblical instruction to "be fruitful and multiply" is so central to the faiths of Judaism, Christianity, and Islam, religious followers are often confronted with a seemingly unsolvable paradox in their lives, one that they would not experience if faced with diabetes, heart disease, or even cancer. Their quest for spiritual validation is intense and often painful.

Although there are many commonalities among the way the major religions handle infertility, Judaism poses unique questions to those experiencing infertility.

Background

Jews regard God's instruction to populate the earth as the first of the 613 commandments. Moreover, for his-

torical reasons of Jewish people having faced millennia of persecution, forced religious conversion, and mass killings, bearing children is very highly valued and is deeply ingrained in the Jewish culture as an essential survival strategy. But just as every Jew is aware of the religious and historic mandate to procreate, so is each aware of the possibility of infertility. To this day, the prayer composed by Hanna, barren for many years prior to giving birth to the prophet Samuel, opens the daily prayer service at synagogue. And Hanna's experience was only one of many examples of infertility found in the Bible. At their essence, each of these biblical accounts teaches that procreation is solely in the hands of God. Few devout people would argue this point.

But if divine assent or assistance is accepted as requisite for human procreation, infertility must, by definition, imply a withholding of God's grace. Hence, every infertile couple is forced to reassess their sense of worthiness. While physicians examine their physical bodies to discover the cause of problems, they themselves endlessly probe their spiritual beings to find defects. They must deal with a difficult paradox: How does God command one to do something and, at the same time, prevent us from doing it?

Jewish Identity

The ways in which Jewish couples confront and solve these infertility issues are as diverse as the Jewish people themselves. Secular and non-Orthodox Jews tend to live comfortably with modern reproductive technologies, and use them liberally in order to achieve their family-building and community-building goals. On the other side, so-called ultra-Orthodox (Haredi) Jews rely mainly on prayer, and use medical intervention sparingly and reluctantly. Between these two groups, and with a more complicated response to the problem of infertility, lives a large and like-minded community of traditional Jews who on one hand view infertility as a spiritual challenge, and on the other hand view modern medical technology as just another manifestation of divine solutions. This group will use technology willingly, but only insofar as it meshes with what is perceived to be ethically and spiritually proper.

Jewish Law

In contemporary Orthodox Judaism, the acceptability of any medical therapy is defined by the Code of Jewish Law, or *Halakha*. The basic source for Halakhic decisions are the Bible, the Mishna, and the Talmud, and universally accepted codifications such as Maimonides' *Mishneh Toran* and Karo's *Shulkhan Arukh*. Unlike the

situation within the Roman Catholic community, Halakhic rulings on current issues cannot be promulgated by any central authority. Collegial review and community acceptance eventually allow specific opinions to emerge as dominant. Yet, even when one view surfaces as authoritative, individual rabbis or laymen will often defer to their own local authority, whose opinion is considered decisive. Thus, there is currently no unanimity of opinion concerning certain reproductive therapies. While it is not uncommon, for example, for some Orthodox couples to use gamete (egg or sperm) donors, others reject this as an illegitimate mixing of genealogies or, worse still, a form of adultery. These conflicting views by groups of individuals who presumably follow the same religious guidelines may be confusing to health care providers. It is important for the latter to note that the Halakha is a living and evolving legal construct, and it is still responding to a rapidly changing science. Because there are so many vastly different scenarios regarding the use of reproductive technology, there is not as yet a uniform Halakhic response. As Lichtenstein, a contemporary authority, has said, "A sensitive *pasek* (Halakhic decisor) recognizes both the gravity of the personal circumstances and the seriousness of the Halakhic factors.... he might stretch the Halakhic limits of lenience where serious domestic tragedy looms, or hold firm to the strict interpretation of the law when, as he reads the situation, the pressure for leniency stems from frivolous attitudes and reflects a debased more compass."

Common Problems

Jewish communal life is typically focused on events that bring families together. Weekly Sabbath services, holiday celebrations, ritual circumcisions, bar and bat mitzva—all of these are occasions for families to celebrate and recognize milestones, especially by transferring traditions from one generation to the next. "And you shall teach your children" is a focal point of the traditional liturgy. But the extended families that make up the Jewish communities lend themselves to prying, advising and sometimes meddling into another's problems of infertility. Not surprisingly, therefore, Jewish couples facing infertility experience these family events with emotions ranging from anxiety to profound depression. Self-exclusion is a commonly employed coping strategy.

These overwhelming psychological challenges are often exacerbated by the intense pressures that couples can encounter during medical therapy. For example, traditional Judaism is guided by strict principles of modesty. For both men and women, the body is sacred and is meant to be covered. Furthermore, the Halakha pro-

scribes sexual relations during and one week after menstrual bleeding and at any other time that uterine bleeding is encountered. There are also strict prohibitions against masturbation, except under unusual circumstances. All of these restrictions pose logistical problems for the couple seeking fertility therapy, and when these are compounded by the couple's social challenges and spiritual/ethical dilemmas, a true crisis can result.

It is not possible to outline here the various medical and counseling techniques that can be used to help Jewish couples to resolve their infertility. Indeed, as each couple will bring with them an unique set of Halakhic as well as specific medical problems, there is no one solution in any case. The principle with which the dilemma of infertility may be approached, however, is summarized by the words of Rabbi J. Soleveitchik, one of contemporary orthodoxy's most poignant voices. Commenting on the meaning of the second part of the biblical verse, "be fruitful and multiply, fill the earth, and subdue her," he states, "Only the man who builds hospitals, discovers therapeutic techniques, and saves lives is blessed with dignity... Man reaching for the distant stars is acting in harmony with nature, which was created, willed, and directed by his Maker."

In conclusion, most traditional Jews today find themselves living at the crossroads of modern medicine and traditional Halakhic values. In trying to square the demands and potentials of both, each may find a different comfort zone. Therefore, each person facing infertility may interpret his or her spiritual challenge in a different way, and each may draw the road to resolution slightly differently. Because the *Halakha* is fluid and constantly reacting to change, the choices made by couples will also change with time. It is crucial for Jewish couples confronting infertility to be aware of the possibilities that are available to them within the guidelines of contemporary Jewish law and ethics. Likewise, their care givers must be sensitive to the complex demands with which the couple must struggle in their quest for parenthood.

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PSYCHOSPIRITUAL HEALING

by Robert McInnes, MD

Think of this for a moment. Imagine you are standing in a large group of people somewhere. As you stand there, you might pass the time by watching the people and the situation around you. You might notice the fashions that people are wearing and the statements their clothes make; you might wonder about the personal lives of the people, their families and health or troubles; you might notice the design or decoration of the structure surrounding all this; you might look around and see all the trash and mess that needs to be cleaned. All of these experiences—and many more—are occurring simultaneously. However, usually you have a personal preference and see these situations from only one, or perhaps two, perspectives.

So it is with infertility and the creative process. You may be trying to have a child. But you are also so much more than that. You bring a past and your history to the process. You may have a partner who is also struggling with infertility for his or her own reasons. This is not only a struggle with how your body and reproductive system works and doesn't work, it is also a search for answers and cures. Infertility involves a strong emotional component, plus a less well-defined spiritual component. All of these dimensions are occurring simultaneously.

So how do you address these multiple needs—the physical, emotional, mental and spiritual needs? The traditional focus of the management of infertility is primarily on the physical (medical) aspects, with additional emotional psychological support. Many of you pursue the mental component on your own with reading, discussions with your medical practitioners, friends and groups as well as surfing the Internet. You usually have a preference to focus and blame the physical parts ("my tubes are blocked" or "my sperm count is too low"), and the emotional parts ("I'm depressed" or "I worry too much" or "I'm being punished").

Excellent mind/body programs have been developed to bring relaxation and meditative techniques into the sphere of infertility. Breathing exercises, relaxation techniques and yoga practices can effectively lower stress levels in this highly charged situation. Studies have documented the role of stress in reducing the efficiency of the immune system. The relationship of stress to infertility and vice versa has not been so clearly defined.

However, there are generally fewer support systems or models for managing the spiritual or psychic dimensions and needs of infertility. Most of you acknowledge and identify the spiritual aspect in your lives. (The Pew Research Center reported in 1997 that 71% of respondents

say “they never doubt the existence of God,” up from the center's 1987 figure of 60%). Prayer, meditation, grounding, focusing, guided visualization, working with guidance and subtle energy are some examples of spiritual practices that can be developed by individuals struggling with infertility.

When you access your spiritual psychic natures, you become more whole (holistic) in your approach to the infertility—combining the physical, emotional, mental and spiritual dimensions in your management. A good beginning is developing a sense of “presence” to the infertility. Usually, when you are confronted with stressful, difficult or frightening situations, you have a natural reaction to withdraw (the first step of “flight” or “fight”) and you gasp for breath. Can you remember times when you were in this situation? Often you may feel this way when you are presented with the initial realization that you have infertility, or when you have to undergo a difficult test or procedure. This reaction is a defense that may have served you well in the early stages of your life. You go “out-of-body”; you develop nausea and emptiness in the pit of your stomach as the energy drains from your body. But you give up a lot of control of your situation and become less effectively involved in your process.

How about if you practice bringing your “center” back down into your body? In fact, bring your center back down from your head and eyes where it is usually located (since we are such a visual and vigilant culture), and bring your awareness down into the abdominal area. Bring it back down to balance the physical center of the body- to an area known as the “tan tien” by martial artists and other eastern traditions. This area is also part of the pelvic area—the highly charged seat of reproduction and sex.

In this way, you become “centered” and grounded, truly “present” to yourself and to what is occurring to you and around you. Now, you can purposefully surrender to the infertility procedure or dilemma with full intention and control. Notice, this is “surrender” in the sense that we “surrender to God” rather than being submissive—which implies denial. Notice also that being present does not mean that you accept, or resign yourself to any inevitability or futility about your infertility but rather, when you are present, you are able to access untapped spiritual resources. Now you can simply BE with the infertility. You can tolerate your pain, anguish and perhaps irony of your infertility and not need to break down, withdraw or collapse. With practice, you can become skilled with this exercise and be able to draw upon it during other diffi-

cult situations.

There are many ways to develop awareness of your spiritual body and wisdom. One is to work with guided meditation, visualization or imagery. Connect with your reproductive systems and creative processes. Develop a relationship with them that is solid and energetic. Take a few deep breaths and try to relax your body. Close your eyes. Visualize the pelvic area, the pelvic organs, the eggs in the ovaries- and sperm in the testes- and all the surrounding circulation, tissues, nourishment, warmth, compassion and love. Take this a step further and reflect or meditate on the creative process of fertilization- the union of egg and sperm, the early development of the embryo, through to the embryo into the uterus. You don't need to know any anatomy or physiology for this practice. Just bring into your awareness whatever it means to you- the reproductive system, the creative process, the embryo in the womb (or even in the incubator, if you are being treated with in-vitro fertilization). This practice, like all other spiritual practices, is “timeless”. That is, it may be in the present, the past or the future, or even combinations and still remain a potent valid experience.

Another practice can be built upon these centering and imagery exercises. Bring your awareness to the relationships you have with all of the people who are involved in your goal of building a family. These include your spouse or partner, other family members- parents, siblings and children, extended family and in-laws, friends, associates at work, acquaintances, medical staff and personnel. Grandparents and ancestors, even children and future children's children can be included in this exercise. It can also include the embryo/child you are trying to achieve right now. Become aware of the powerful energetic relationships you have with each of these individuals and just *be* with this awareness. Remember, these are spiritual psychic connections. You are not trying to “fix” anything, or heal emotional wounds (which could take therapy) or analyze your relationships. You are working with the healthy parts- exploring with curiosity. There is no judgment in these spiritual realms. Just be with these energetic connections and relationships that you have for infertility and the creative process. This can lead to some very amazing experiences.

So, what if you try these exercises and practice really hard? Will you, or your partner, get pregnant and have a baby? Maybe. Maybe now. Maybe later. Maybe not. But one thing is certain and that is: a healing will occur. This healing involves creating a powerful, palpable relation-

ship with God and your creative process. You may know God as God, or the “source”, or the “mystery”, or modern technology, or a character lesson. This healing may include getting pregnant; it may be recognizable now; or not until later. But by bringing these other spiritual/psychic parts of yourself into your awareness and presence, you bring wholeness to your situation. The management of your infertility now includes the full complement of medical, emotional, mental and spiritual approaches. It can now be holistic and far more comprehensive and complete than was previously possible.

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The Following are Perspectives from RESOLVE members on religion and infertility:

OUR OWN DECISION: DONOR INSEMINATION AND THE CATHOLIC CHURCH

We are the parents of a four-year-old son, conceived by donor insemination (DI). We are Roman Catholics from very traditional Irish-Catholic families.

When my husband, Sean, was diagnosed with azoospermia (no sperm) and we had no treatment options we experienced anger and disbelief. As these feelings began to fade, we realized we faced some difficult choices: adoption, DI or a childfree life. We both felt strongly that we wanted to experience both pregnancy and birth if at all possible. DI seemed to be the logical option, but this presented us with a new dilemma.

Some of the most difficult parts of our decision-making were due to Catholic teachings, which tell us that DI is morally unacceptable. The Church objects to the artificial (noncoital) nature of DI, both in obtaining the specimen from the donor and in the insemination process. Catholic theologians feel that the bond of marital fidelity is broken by these acts, both the bond between the donor and his (presumed) wife and between the recipient and her husband. The Catholic Church also emphasizes the importance of parenting in almost all discussion of marriage. We know that the Church encourages adoption as the ideal solution for infertile couples, but we were not open to adoption at that time.

We found ourselves trying to grieve the loss of my husband's fertility and to consider the implications for our marriage at a very young age. Each of us struggled with the many questions involved: “Why do I want a child?” “What if I would choose DI and my partner wouldn't?”

“What would we tell the child?” “Do I want to remain in the Catholic Church?” “Should I stay in this marriage?” After many conversations and sleepless nights, we realized that we needed some guidance. Sean met with our parish priest, who knew us well, and he arranged for us to meet with a professor of moral theology at a large Catholic college.

Our discussion with the professor was a turning point in our struggle. He explained the background of the Catholic Church's teachings regarding marriage and children. We talked about our marriage and about how we could view DI—as a form of infidelity, or a route to parenthood that would ultimately strengthen our commitment to each other. The professor helped us to clarify both the ethical and emotional issues of DI, and then our discussions became more focused.

The knowledge that the Church's teachings are not absolute in this area brought us a great sense of freedom. American moral theologians do acknowledge some cases where DI is an acceptable route to parenthood. It became clear to us that we were responsible for making our own decision, adhering to the principles of Catholic teaching as we understood them. In our hearts we each wanted to experience pregnancy and birth and to know at least half of our child's genetic heritage. Slowly, we realized that we could choose to become parents by DI and that our marriage had already been strengthened by these first steps on our route to parenthood.

JUDAISM AND INFERTILITY: ONE VIEWPOINT

“What do you want to go to graduate school for, Pamela? Why don't you just get married and have some kids?” my grandmother asked, the year before I was married. “What are you doing in social work school? Why aren't you raising kids?” asked the Hillel rabbi at my university, after I had been trying for three years to have children. “Come on, what are you waiting for? Where's the baby?” asked a relative at a Passover seder, after we had been trying for five years to have children. “The only way we're going to get through all these in vitro fertilization (IVF) cycles is if we think of the people in the camps and all they went through and how they did make it out of there,” my husband said, after the first of three IVF cycles.

Being Jewish and infertile affords one the opportunity to experience the most positive and the most negative aspects of Judaism. During the course of our six years of infertility, my husband, Steve, and I discovered stories in

the Hebrew Bible and from Jewish tradition, prayers in the prayer book and people in our religious community who offered strength and support for our struggle. At the same time, we encountered painful stereotypes about childbearing in the Jewish establishment. We also recognized God's hostile face for the first time. In addition, we sensed a general attitude among Jews in the US and Israel which made us feel like invisible members of the community because of our inability to bear children.

We never expected people to stop delighting in their children or sharing notes on pregnancy and birth experiences. What hurt and angered us so much was the sense that we did not exist if we could not be biological parents.

People seemed to be embarrassed when, in answer to their foolish and innocent questions, we disclosed our unsuccessful attempts to have children. Once they found out, they treated us like lepers.

For Steve and me, infertility was like a personal holocaust. The historical Holocaust has been a central image and motivating factor in the psyches and lives of those who have tried to have families since World War II. The pressure from our parents and families has been intense, whether verbalized or not, to bring more children into the world. The memory of the deaths of so many innocent people put a weighty significance on the potential birth of a new generation. When the birth process breaks down, the communal loss of six million is stirred up again and the perpetual questions resurface, "Why has God let this happen? What are we paying for? Will we ever bring life into the world?"

When my husband and I lost the first pregnancy because it was ectopic, we felt so alone with our grief. There was no ritual to help us through the process of mourning for our child who might-have-been. Even though the Jewish people have had so much experience with loss and mourning, Judaism seemed to have no answers for us. But when I looked deeper, I found that the ingredients were all there. Only the recipe was missing.

The Hebrew Bible is full of women who had difficulty conceiving: Sarah, Rebecca, Rachel and Hannah. Infertility was not a taboo subject in biblical times. One Jewish custom for honoring someone who has died is to study a text for some period of time each day. I found it helpful to study these stories, partly to help channel some of the grieving into a meaningful activity to reconnect me with a faith which had become rather shaky, and

partly to see if my tradition had any words of wisdom to offer me.

The stories made me uncomfortable with their focus on the procreative abilities of women. However, the study of Jewish texts demands more than a reactive stance from the reader. Steve and I delved deeper into the story of Hannah and found that later commentaries filled out her character and her life, focusing on aspects of her personality which transcended her infertility problem. Eventually, I came up with a new version of the story of Hannah, which I told in our havurah (prayer and study group) on the first day of Rosh Hashanah, the time when her story is traditionally recited.

My husband channeled his grief by becoming a Jewish Big Brother. He was able to try on fatherhood and satisfy some of his yearning for a family. His Little Brother helped us both discover that we could bond with a child who was not a blood relative. We have since adopted, and Steve's Little Brother has become a "big brother" to our son.

In addition to these avenues of coping, my husband and I came up with a ritual of mourning in which we "buried" a symbol of our pregnancy loss in a plot of earth which had special meaning for us. We read aloud selections from the Jewish memorial service and poetry about loss and hope. Only the two of us attended, but the relief we felt for concretizing the death of our hope was very great.

In the Jewish community as in its secular counterpart, there are pressing issues which have never had to be faced before: use of new technologies by infertile couples and lesbian couples; women postponing motherhood and adoption—conversion and integration of non-Jewish children into the community. Though they never sought out this task, it is the responsibility of Jewish infertile people to educate their community. If there is no acknowledgement of childlessness and infertility in one's religious group or community center, then one must find formal and informal opportunities to sensitize one's peers to the plight of those who want and cannot have children. In my own case, the more I have expressed to others how devastating infertility has been for me and my husband, the more integrated I have felt with a heritage which places a great emphasis on procreation.

Suggested Readings

Gibbs, D., Garrett B. & Rabon, P. (2004) *Water from the rock: Finding God's comfort in the midst of infertility*. Chicago,

IL: Moody Press.

Glahn, S., Cutrer, W. (1997) *When empty arms become a heavy burden*. Nashville, TN: Broadman & Holman Publishers.

Grazi, R.C. (1994) *Be fruitful and multiply: Fertility therapy and the jewish tradition*. Spring Valley, NY: Feldheim Publishers.

Kushner, H.S. (2004) *When bad things happen to good people*. New York: Anchor.

Kushner, H.S. (1997) *How good do we have to be?* Boston, MA: Back Bay Books.

Schalesky, M. (2001) *Empty womb, aching heart*. Bloomington, MN: Bethany House Publishers.

Van Regenmorter, J., Van Regenmorter, S. (2004) *When the cradle is empty*. Wheaton, IL: Tyndale House Publishers, Inc.

RESOLVE Fact Sheet 8, *Coping with the Holidays*, visit www.resolve.org, and click on "Publications."

Additional Resources

A TIME, www.atime.org, support and education for Jewish women and men with infertility.

Stepping Stones, www.bethany.org, Christian resources relating to infertility, including a newsletter.

Hannah's Prayer Ministries, www.hannah.org, Christian support for infertility.

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