



Hello & Goodbye

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PREGNANCY LOSS IS PAINFUL, CONFUSING, AND ISOLATING. WITHOUT A HALACHICALLY PRESCRIBED PERIOD OF MOURNING, PARENTS STRUGGLE TO GRIEVE FOR THE LOSS OF A LIFE THAT NEVER WAS. FOR YEARS, PARENTS BIRTHING A STILLBORN CHILD WERE TOLD TO HAVE NOTHING TO DO WITH THE BABY. TODAY, THOSE PARENTS ARE DISCOVERING THE COMFORT THAT CAN BE FOUND IN CONFRONTING THE LOSS, AND LEARNING TO SAY HELLO BEFORE SAYING GOODBYE

*S*taring at the static, unmoving figure on a sonogram screen, Malkie Klaristenfeld was practiced enough to figure out that this marked her third stillbirth and 14th pregnancy loss.

It had been 15 years since she'd birthed her first stillborn, an unbearable loss, and experience of yearning, hope, and grief. It was 15 years since she'd realized that the prevailing belief — move on and forget the loss — was at best ineffectual, and at worst, a betrayal of her experience and the life she had carried.

"I couldn't just move on," she says. "I couldn't make myself forget that wrenching nightmare of leaving the hospital, fully cognizant of the growing distance between my child in the hospital morgue and myself. Nor could I fill the aching emptiness of arms bereft of a live bundle of joy. I knew I'd either have to bury myself along with that baby, or *do something*. There was no forgetting"

Prevailing medical belief about stillbirths was two-pronged: swift and clinical. The baby had to be removed at the earliest opportunity to prevent maternal infection. As soon as the baby was delivered, the baby was whisked away to the morgue, and the bereaved parents were left with the task of making burial arrangements. And then came the task of "moving on," forgetting about their loss. For many years, the pervading belief had been that if you don't see the baby, you don't connect to it, and can forget about it easily. Malkie knew this wasn't so; despite mothering a crew of healthy children, she carried the searing agony of loss with her every single day.

Stillbirth was taboo: conversations conducted in whispers, the gender of the baby rarely discussed. Closure, believed both doctors and well-meaning laypeople, would come in the form of a new pregnancy.

But Malkie soon learned that openly confronting a loss can lay the groundwork for healing. She read of how having the opportunity to say hello before bidding the baby goodbye can be an important step on the path to closure. Holding the baby, taking some quiet moments to talk and daven with the baby before giving it over to the *chevra kaddisha* for burial helps concretize the loss and allows parents to grieve.

"Together with *askanim* who felt passionately about this, I reached out to *rabbanim*



in the States and in Eretz Yisrael, as well as some medical professionals, and explained the psychological and emotional aspects of the loss — a parent will never forget their child. The pain is too great to simply be discarded.” She advocated for the therapeutic importance of saying “hello” and “goodbye” to their baby, who had been such an important focus of their lives for weeks or months.

The *rabbanim* researched this approach, questioning Malkie extensively on the emotional repercussions of what had been done until now, and on how her proposed changes would aid parents. Having received rabbinic support, Malkie trained as a perinatal bereavement coordinator at Resolve Through Sharing (RTS), a national, not-for-profit organization that provides training for compassion in bereavement care.

In her training as a perinatal bereavement coordinator, Malkie learned that the “hello and goodbye” approach had already worked wonders in helping bereaved parents receive the closure they needed to the tragedy of losing a child before it knew life.

While developing her approach, Malkie clarified the fundamental differences between a Torah and secular approach to this heartrending goodbye. “We know that everything happens for a purpose; that those *neshamos* have fulfilled their *tafkid* and are now returning to Shamayim — the very best place possible — in the very same state of purity and innocence they’ve descended to Earth. Although we cannot always find meaning in the misery, there’s comfort in knowing that there’s a purpose to the pain,” she says.

As well, parents find comfort in the idea that these pure souls can be entrusted with their parents’ *tefillas*, hopes, and dreams for the future. They are going directly to the Kisei Hakavod and can intercede on their parents’ behalf.

GETTING TO KNOW YOU

The only opportunity parents have for this type of closure is within a few hours of birth. True, this is at the height of physical and emotional trauma, but as one who hasn’t always had the opportunity for that closure, Malkie knows that it’s vital. Together with Zahava Farbman, LMSW, associate director of Project Chai Crisis Intervention, Trauma, and Bereavement

Services; Dvora Entin, LCSW of JFCS Ma’oz, Philadelphia; and other trained doulas and social workers, Malkie now acts as an emotional and educational doula, preparing the couple for what lies ahead in a practical, physical, and emotional sense. This alleviates a lot of anxiety that comes with the unknown. Her organization, Knafayim, provides both emotional and practical support through pregnancy loss, as well as other women’s issues related to loss.

“I help the parents see what their choices are, and the psychological effect their actions will have in the future,” Malkie says. “Yet, I encourage them to speak to their *rav* before making a decision so that they’re completely comfortable with it.”

Naomi and her husband aver that the hello-goodbye they gave their baby was deeply meaningful. After four miscarriages, Naomi’s new, steadily progressing pregnancy seemed promising. Relief proved to be short-lived, however. A 20-week sonogram revealed that the fetus had AMC (arthrogryposis multiplex congenita) a rare congenital condition involving severe physical deformities, and it was confirmed to have medical complications as well.

“It was Gehinnom. The unknown. The paralyzing fear of what the future held. Then there were the typical — and not typical — challenges of pregnancy. A pregnancy I knew wouldn’t result in a healthy child. Absolute Gehinnom.” Complicating matters were the people who knew about Naomi’s earlier miscarriages and kept wishing her well.

Naomi’s baby lived for under an hour. But Naomi and her husband named the baby — a name she still uses today when speaking with her husband in private about the baby. She and her husband held, spoke to, sang to, and took photos of their child. Two years later, Naomi speaks with gratitude of the opportunity she was given to say hello — and goodbye.

Sometimes a couple will make the decision to see their baby together, and sometimes it’ll only be one parent who connects with the child in this very tangible manner.

Malkie recalls one of the most difficult (induced) labors she attended, which lasted over two full days. Though the child’s father wanted to bond with his child, his wife was simply too exhausted. Completely depleted from a slow, arduous labor,

“Although we cannot always find meaning in the misery, there’s comfort in knowing that there’s a purpose to the pain”

she had no emotional energy left to bond with her stillborn.

Difficult as it was for him to go alone, Malkie found a quiet room for the father and encouraged him to spend some time with his child there.

Mr. Y. Roth, who experienced his own loss, thereafter assuming administrative and fundraising duties at Knafayim, also received encouragement to see his stillborn child. “We had a baby,” Mr. Roth explains. “Why shouldn’t I know my child, see my child, before its return to the Kisei Hakavod?”

“An elderly gentleman told me that he was a child when his father passed away, yet he still feels a sense of missing a part of his father’s life because he hadn’t seen his father during his illness. I don’t want to walk around with that feeling of having missed an opportunity to bond. I’m so grateful I have that image to carry with me.”

After a 24-hour labor, Moshe Winograd’s wife delivered their stillborn child on Friday night. The couple could see and talk to the baby, but halachically, were unable to hold the baby until after Shabbos. Moshe insisted that he wanted the opportunity, and was granted administrative permission on Motzaei Shabbos. “My wife was able to connect to the baby all through the pregnancy,” he explains. “This was *my* chance to connect; my *only* chance.”

Holding the baby, caressing her, singing Shema and Hamalach Hagoel provided that bond. Sending the pure *neshamah* on her journey back to Shamayim wrapped in a cocoon of fatherly love comforted the bereaved father so that he could face the world again.

At times, parents are still traumatized from the birth, and they feel unable to face bonding with their baby. Malkie respects that decision, yet reminds them that she’ll be there to help when they’re ready for it. She’s procured hospital photos of babies upon parents’ requests months later — commonly on the baby’s due date — to provide a level of comfort and closure to the still-grieving parents.

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SOMEONE CARES

One of the most powerful emotions Malkie recalls from after one of her losses was the bill she received from the *chevra kaddisha* just days after a loss. “I couldn’t understand how a mother, in the throes of raw grief and shock, could deal with that as well,” she says.

Today, she handles all technicalities between Misaskim (which arranges burial with the *chevra kaddisha*) and the bereaved parents. So that the grieving parents don’t have to. So that they know they are not alone. She has also compiled a *chizuk* packet that she sends to bereaved parents.

“When I was grieving, I found comfort in music and writing.” She compiled her poignant, personal pieces into a small booklet, adding the personal accounts of other bereaved parents, as well as inspiring messages by *rabbanim*. Tapping into her musical expression, she produced a touching musical CD, with Faigy Singer, a labor and delivery nurse at Mt. Sinai Medical Center. “It’s so important for parents to know that they’re not alone,” Malkie says.

CONNECTING HEARTS

Feeling that they aren’t alone is a large part of the healing process.

“Most often, the emotional and psychological difficulties that couples face after pregnancy loss are far more significant than the physical challenges,” says Dr. Victor A. Rosenberg, MD. Attending Physician at North Shore University Hospital, Department of Obstetrics & Gynecology Division of Maternal-Fetal Medicine.

“Most women will recover physically within a few weeks, but the psychological difficulties persist.”

Though there’s almost nothing a woman can physically do to lose her pregnancy, the most common struggle Rosenberg sees is guilt. Women wonder whether they shouldn’t have lifted their toddler, rested more, and so on. The emotional healing from pregnancy loss can take months and years. Support during that time can make all the difference.

“When I had my first miscarriage 25 years ago,” Rochel Leah Grossman, the executive administrator at Knafayim, says, “the topic was taboo. No one spoke about these things. Today, there’s a forum for sharing and understanding that allows us to heal. I feel like I’m healing my own losses *now*, by helping women deal with their loss.”

She hosts a small, yet impactful gathering in her home twice yearly, where Malkie puts on a musical performance, presents an evening of remembrance and validation, a professional lecture on the topic of “Was it for Nothing?” and women share their personal stories with those who understand the hurt.

A large part of the support women receive from others who have suffered a loss is the confirmation that their feelings are normal; their situation isn’t normal. This turns grief into something acceptable rather than shameful, and allows for healing.

“The wisdom of this perspective,” Dvora says of support groups, “is the solid foundation that allows a family to mourn and then heal even when they don’t

have the comfort of a public *levayah* and shivah. Just as one wouldn’t go to work during the week of losing a close relative because of shivah, losing a baby should also keep you from going out that week.”

She explains that integrating the experience of loss into the fabric of life is an absolutely critical component for healing; the presence of the baby has to be honored in a family — even if the child never came home.

A large part of what Dvora orchestrates is that women should *be a mother* to their child — even if it’s just for some brief moments on the phone line, when sharing with others who have been through something similar. “We want women to be able to say things like: ‘he looked just like my oldest,’ or ‘my baby girl weighed 8.5 at birth’ and such. That’s part of the healing process.”

Many parents will also seek meaning for their loss. Moshe’s experience, for example, lead him to pursue the psychological aspect of pregnancy loss and complications as a PhD doctoral student immediately after the loss. In the ensuing years, he directed his grad studies toward that area, and hopes to specialize in pregnancy-loss-related psychological services.

Other parents will sponsor a day of learning or perform extra *chesed* on their child’s due date. Though there’s no formal or necessary halachic commemoration, this can add meaning and comfort to parents’ experience.

Proper support, grief integration, and time will cast its healing balm. “When someone suffers a loss,” Malkie explains,

“it’s as if there’s a boulder oppressing them at every waking moment. As time goes by, it shrinks; first into a large rock, and finally, into a pebble. Sometimes the pebble grows heavier — like around the time of the due date... but time definitely heals.”

“When I had my stillborn last year,” she says, “you couldn’t talk to me for a week. Now, it’s tough, and I have my ups and downs, but I’m functioning.”

In rare cases, grief can be overwhelming, and professional therapeutic support is called for.

MARS AND VENUS

“Many couples have a pregnancy loss within their first year of marriage,” Dvora points out. “This may be the couple’s first encounter with grief and they need to develop a new language to communicate their grief.”

She recommends that the couple speak to someone who can walk them through what the grief process will look like, and how their spouse’s needs may be different than their own.

An example Dvora elaborates on is where women feel that their husbands are disconnected from the loss. However, the truth is that they never connected to the child as deeply as the woman did during pregnancy, and therefore may not

feel the loss as much.

“A woman should *tell* her husband what form of support she needs,” Dvora says. “Be it a walk, a listening ear, or his presence at home, she is giving the couple as a unit a gift; he’ll feel happy about meeting her needs, and she’ll get the support she needs.”

Malkie tells of one woman who was weepy and emotional, and complained that her husband seemed indifferent. When she called him during a crying spell, he remarked that he’d sponsored drinks and coffee in shul that morning in memory of their lost child. It wasn’t that he didn’t care, but his emotions were expressed and dealt with differently.

MOVING FORWARD

Some women may think that another baby will “make it all good.” Though a healthy baby will give them joy, energy, and renewed hopes and dreams, it’s not a replacement for the loss, nor for dealing with grief.

For women who’ve experienced pregnancy loss, the optimistic belief that “pregnancy equals healthy child” has been corroded. “Women who haven’t addressed their previous loss may have a difficult time connecting to their new baby,” Dvora explains

From a medical perspective, Dr. Rosenberg recommends couples seek answers as to why the loss occurred, as being involved in their medical care often provides tremendous emotional and psychological healing. He’s seen couples who were told that the loss was an “accident” and that there was nothing to do, only to discover that the mother had an underlying medical condition that needed treatment to prevent another loss.

If no cause is found, the couple will need emotional support throughout the next pregnancy.

“There’s so much doubt and fear of the unknown,” Naomi says. “There’s that intense feeling *all day long* that you’re pregnant, and anything can happen... You keep on waiting to feel the baby, wonder if you should be running to the doctor every other day, if you’re neurotic, or if you have a free ticket to do whatever you want because you had a loss...”

Both Malkie and Dvora offer a listening ear and therapeutic support to women during subsequent pregnancies to offset that anxiety, and help them cope with their fear of a tragic outcome. The same way she has been empowering bereaved parents through their losses for the past 15 years. For as Malkie says, “If you don’t allow yourself to grieve, you don’t heal.”

Watching over You

Malkie Klaristenfeld

From the start, this pregnancy was shadowed with uncertainty.

For the first few weeks, I reined in the excitement that the promise of new life carries on its wings — especially at my age, when the merest sliver of promise is a blessing. The days turned into weeks, and slowly — in an agony of doubt — the weeks morphed into months.

I counted them carefully. I saw myself holding this little, precious *neshamah*'le and marveling at its innocence and perfection. Every ten days brought another appointment. Another run-through of all the numbers. Another sonogram. 10:30 a.m. on Tuesday, December 31st was to be just one more. The anxiety that had been stalking me peaked the night before.

"Come with me," I asked my husband, only half in jest. "I'm scared to go alone."

"It's just another appointment," he said. "But... but you'll call me as soon as it's over."

I walked through the doors of Methodist Hospital and submitted myself to the ministrations of an unfamiliar, tight-lipped sonographer. My heartbeat quickened as the image appeared on the screen. *My baby!* There it was; a beautiful little silhouette outlined with that special halo that only Hashem's protection could provide.

I smiled involuntarily and then looked closer.

Nothing marred the perfect picture. Nothing to signal even the slightest hint of life.

"There is no heartbeat," I said.

Silence. The sonographer matter-of-factly repeated my words. "There is no heartbeat."

I froze.

"When did you last visit the doctor?" she asked, getting up and heading to the door. "I'll call another doctor," she threw over her shoulder.

I was alone.

Just me and my silent, silent baby.

Not long after, I stood in the corridor of Methodist Hospital, toying with my cell phone uncertainly.

"Oh, Mrs. Klaristenfeld!" an enthusiastic voice greeted me.

I turned to face the smiling countenance of a valued professional contact. "So how's it going?" the doctor inquired solicitously.

In that deserted corridor, the tears finally came. It was embarrassing, breaking down in the presence of a respected doctor with whom I deal

professionally. But I cried. I cried for the little baby who was to be such a special gift when I hadn't expected to receive another. I cried for myself and for my husband who was still unaware that we had lost our child forever.

"This was my biggest fear," I finally said, amid the tears. "I have buried so many children! Too many." I told him that I wanted this baby delivered whole, without a D&E procedure.

The doctor was silent and I forged ahead. "This precious *neshamah* must be delivered without trauma. I want my baby to remain... complete. As complete as she is right now."

He solicited the opinion of another doctor, who approved. Based on my history and medical status, he felt that a regular delivery would not pose any threat. And my regular obstetrician stepped up to the plate, as I knew he would. Although he believed that the better approach was to do a D&E, he promised to do whatever it takes to give me that one remaining comfort, in the safest way possible.

"Rethink your decision," he urged. "But if this is what you want, then we'll stand behind you."

The tears were once again tumbling over each other at this simple gesture of warmth and empathy. My doctor would be in the hospital on Thursday, and irrationally, I was glad to have one more day to carry my child close to my heart.

I came home and walked straight toward the couch in my dining room. I sat down heavily... and sat... and sat. Hours passed in silence, as I continued sitting in the same position. I couldn't talk. I couldn't think. I couldn't even *feel*.

Instead, I fielded a tangled web of questions that grew thicker and more complex as the minutes ticked by. The pain and scathing agony cowered in their respective corners, as a surge of anger overtook me.

I was hurt. I was resentful. I was confused.

Hashem! Tatte in Himmel! What message are You sending me?!

For years, I have been counseling and supporting and guiding couples experiencing a loss... a loss just like my own.

What are You telling me, Tatte?! What is the message in this heart-slicing pain?! I have helped so many of Your suffering children in just this situation!

Was it anger? Was it confusion?

The hours ticked by slowly, tomorrow's ordeal peeked out at me from behind the stars. I was scared. So, so scared. I needed to take someone along with me; to support me. For more than a decade, I had always dropped everything to be there for others in this situation. Would no one

be able to do the same for me?!

The answer was hurtful and unequivocal.

I walked into the delivery room, appearing for all the world like a woman in the bloom of pregnancy. It was a fleeting moment, just a passing illusion.

The induction progressed slowly, and I remained awake, haunted by a progression of little faces and tiny, delicate fingers. All those babies I had held and cuddled, supporting their parents as they bid them final farewells... All those pure *neshamos* who had flitted briefly through my life, leaving an imprint that neither time nor activity could erase...

They were all there, in the Mount Sinai delivery room.

Delivery was difficult and draining. I was terribly and achingly alone. No one was there to hold my hand or to reassure me that these horrific moments would soon pass. No one could give me that which I gave to others.

Helpless and broken, I couldn't give it to myself.

The baby finally made her appearance. I couldn't look. I could barely feel. My little princess was lying there, silent and cold. She was mine. *Mine*. The doctors called her 'a second-trimester pregnancy failure.'

But she was my little girl.

And I was her mother. The only mother she would ever have. A mother for mere moments, but a mother nonetheless.

And then came the painful, wrenching farewell. I felt detached. "I can't do it now," I cried out. "I'm not fully present and... and I can't squander these moments!"

"The baby is here now," I was told. "This is the time."

And then the silent, little form that had nestled within me for so many months was brought in to me. I trembled. *Come on, Malkie, I urged myself. You know what these babies look like! You've seen hundreds of them! You know how to get acquainted; how to sing to them; how to bond with them... and then... to let them go.*

But knowing was one thing. Feeling was quite another. That helplessness washed over me again, stronger and more potent than before. I was alone. I would have to face this all on my own.

For a moment, I saw myself bending over that tiny form and handling her with love. I saw myself soothing the bereaved mother, wiping her tears and holding her hands gently.

But then I saw... myself. I wasn't Malkie of Knafayim. I wasn't the giving, supportive presence that others had come to know. I was just a mother. A grieving mother whose daughter had gone even before she had come.

And I screamed.

I couldn't do it. I couldn't even look at my bundle of innocent purity. *I couldn't!*

The baby lay near me, completely covered. I didn't touch the blanket. I just looked at that tiny form concealed under a pure, white blanket. It was so small.

Somewhere in my subconscious, I realized that someone had softly opened the door and then closed it again. I was in my own world. It was

a small world; a world just big enough for me and this little *neshamah*'le who would soon be taken away, never to be seen again.

Suddenly, my little world filled up. Hundreds upon hundreds of stillborn babies crowded in on us, squeezing the air out of my lungs. It was so crowded and yet so eerily silent.

I saw myself handling those little souls, caressing them and smoothing their features so that their parents could form the most positive memories. I saw myself gently pouring water over their tiny little hands. I heard myself reciting Nishmas over them; putting those little fingers over small and unseeing eyes for their first and last Shema.

Help me! I cried out to those innocent souls. *I welcomed you into this world and escorted you out. I was there for you... but who will be here for me?!*

In a moment of reprieve, someone gently walked in and ever so softly lifted the blanket. Once again I was left alone. My little baby daughter and me. To get to meet each other and then... to say goodbye. And so, I ever so slowly leaned over to my baby — the one little baby in this whole parade who was and always will be just mine — and I uncovered her smooth little face. She looked so fresh. So perfect and untouched.

I counted her fingers. Ten perfect fingers and ten perfect toes. I looked at every part of my little girl's body. So many minute details had come together. So much perfection and so much silence.

The door opened softly once again.

"I think it's time to... to take her back," I was told.

I flinched. *Take her back?!*

This was it. She was being taken from me forever.

I allowed someone else to enter and to do what I did for so many, bring her to her final journey.

The bassinet was wheeled toward the door, while I murmured those timeless words that I had said so many times in the past. "*Ki malachav yetzaveh lach...*"

May the *malachim* watch over you, my precious little one. They will come with you on this final journey while I — your mother — will stay far, far behind. ☹️