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THERE IS A PLACE FOR YOU AND YOUR LITTLE ONES
HOMILETICS AND LITURGY IN VIEW OF PREGNANCY LOSS

A Major Applied Project
Presented to the Faculty of
Concordia Seminary, St. Louis,
Department of Advanced Studies
in Partial Fulfillment of the
Requirements for the Degree of
Doctor of Ministry

By
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December 2022

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To my daughter and granddaughter

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To my wife, Cyndi, for enduring the struggles with me in the forming of this project and undertaking and not letting me give up.

ABBREVIATIONS

ESV English Standard Version

LW *Luther's Works*

ABSTRACT

Baumgarten, Joseph M. *There is a Place for You and Your Little Ones: Homiletics and Liturgy in View of Pregnancy Loss*. Doctor of Ministry. Major Applied Project, Concordia Seminary, 2022. 81 pp.

Pregnancy loss and the grief that follows is more common than most people think. However, there is a gap in resources, discussion, and care for those who have experienced such losses. This is true in wider culture as well as in the church. While there are a few resources available, they are limited. This project addresses the church's ability to provide proper recognition of pregnancy loss, the validation of those losses as worthy of grief, and compassionate care through multiple means including the preaching of the Gospel and liturgical worship. The project uses grounded theory modalities and qualitative research methodologies in an effort to assemble a collection of phenomenological experiences from participants. Then, with the evidence from secondary sources and interviews from primary participants, a homiletic structure is developed which provides a guide to sermon preparation. Three main issues were addressed through this work pertaining to pregnancy loss and the subsequent grief. Participants as well as secondary sources expressed feelings of disconnection, a sense of being alone, and confusion in their grief. Through the process of the interviews and the liturgical worship, participants were shown that they are indeed connected to one another and to God through Christ. The sense of being alone was addressed through the communal nature of the worship gathering. They could visibly see that others were grieving as they were. And the confusion of grief was addressed through the ordered nature of the liturgy and the structured sense of the sermon. The participants could see that Jesus was indeed there for them and others were too.

CHAPTER ONE

THE PROJECT INTRODUCTION

In October of 2020, my daughter miscarried her baby at eight weeks. She was far enough along in the pregnancy to know that she was indeed pregnant. This was her first pregnancy and would have been our first grandchild. She was devastated and shaken to her core. Her husband was heartbroken and hurting as well. Questions arose, as they always do, to which there were no good or satisfying answers. As her father and her pastor, what could I offer her that would minister to her heart's condition? Many Bible passages seemed trite. Prayers were short and stifled. This project addresses the current lack of Lutheran¹ liturgical and homiletical resources available for the pastor who is attempting to provide recognition, validation, and compassionate care to one who has lost a child through miscarriage, stillbirth, abortion, or infant loss. There is a great silence in the church as well as in society when it comes to miscarriage and pregnancy loss. If anything could shape or color my research, this experience was certainly it. My heart's desire is to have something in place, a resource, a formal recognition and validation of those lives lost and those who carried them. I also want to have the ability to speak compassionately in these often-silent times and help fellow pastors do the same.

The location of my research and project is Grace Evangelical Lutheran Church in Eugene, Oregon in the Pacific Northwest. The congregation celebrated its centennial in 2020 and has been in their current location for the last sixty years. Over that time, according to what I found in the church archives, Grace has not held a service for the recognition, validation, and

¹ The Catholic church has a number of resources available to families who have lost little ones in pregnancy including liturgical services and funeral rites. However, due to theological differences, they are not always helpful. I did investigate several of their websites for information in this project.

compassionate care of those women and families who have experienced pregnancy loss². This is not surprising given that, historically, the church at large has not had a formal way of engaging this topic. This is not to say that the church has been lacking in pastoral care for those who have struggled with pregnancy loss. Grace itself is caring and compassionate toward all people in their difficult times. However, the specific, tangible help that a service of remembrance or memorial can provide is different from personal pastoral care.

At Grace, the current membership roll records 114 members as female. According to the Mayo Clinic “about 10 to 20 percent of known pregnancies end in miscarriage. But the actual number is likely higher because many miscarriages occur so early in pregnancy that a woman doesn't realize she's pregnant.”³ A study in Italy included in medical textbooks reports that the percentage of actual miscarriages may be as high as 60 percent.⁴ With the members of Grace, all of this means that somewhere between ten and sixty-eight women have had some experience of pregnancy loss. That is indeed a wide range, but even at the low end that means that ten people could require recognition, validation, and compassionate care for their experience. If we are to add in those who have experienced a still birth, a loss of a child early on, or even an abortion, the numbers are heartbreaking. Without a proper tool to recognize these events and without the right scriptures to validate those who suffer it is difficult to offer compassionate care.

The project looks at the topic of pregnancy loss in our larger context of society and the

² Kate White, *Your Guide to Miscarriage & Pregnancy Loss: Hope and Healing When You're No Longer Expecting* (Rochester: Mayo Clinic, 2021). I will use the term “pregnancy loss” as it is used by the most recent medical texts. Pregnancy loss is used to speak of someone who was pregnant but is no longer pregnant due to factors other than giving birth. This includes miscarriages of different types, stillbirth, abortion (unintentional or intentional) among other medical conditions.

³ “Miscarriage,” Mayo Clinic, accessed September 15, 2021, <https://www.mayoclinic.org/diseases-conditions/pregnancy-loss-miscarriage/symptoms-causes/syc-20354298>.

⁴ Andrea Luigi Tranquilli, ed., *Miscarriages: Causes, Symptoms and Prevention* (New York: Nova, 2012), 4.

need to address the silence around it. When our family shared the news of my daughter's miscarriage, there was an outpouring of sympathy and condolences. But beyond the words, "I'm sorry" there was not much that could be said. Many women shared that they too had experienced a miscarriage, and some spoke briefly about enduring several. Again, beyond the immediate acknowledgment, not much was said, particularly about the hope we have in the promised resurrection in Christ and the mercy of God. The problem is that people do not have the words to share. There are no scripts to guide even the briefest of conversation regarding pregnancy loss. Dahlia Lithwick, senior editor of Slate.com comments, "I think we falter around miscarriage because society has no scripts for dealing with it, and never has."⁵ She noticed this empty space when experiencing her own miscarriage and found very little suitable conversation around the subject. Speaking from a societal perspective, she observes that this taboo subject needs to be shared so that women can heal and find support. I agree with her.

A major contributor to the silence and stigma around miscarriage is that it is misunderstood in terms of its frequency and causes. A study conducted in 2015 by Albert Einstein College of Medicine⁶ found that a surprising number of people held skewed ideas about miscarriage. In their thirty-three-question survey, the researchers found that, although miscarriage ends nearly 25% of pregnancies, most respondents thought it would be closer to a 6% occurrence. While 60% of miscarriages are due to known genetic abnormalities, most respondents assumed that the cause was either stress of some kind, over exertion of the mother, or lifestyle choices such as smoking. The lead researcher, Dr. Zev Williams, is quoted in the article, "The results of our

⁵ Dahlia Lithwick, "I Went Out Full," in *About What Was Lost: 20 Writers on Miscarriage, Healing, and Hope*, ed. Jessica Berger Gross (New York: Plume, 2007), 58.

⁶ "Miscarriage Research," Albert Einstein College of Medicine, May 11, 2015, <https://einsteinmed.edu/news/releases/1089/survey-finds-miscarriage-widely-misunderstood>.

survey indicate widespread misconceptions about the prevalence and cause of miscarriage. Because miscarriage is quite common but rarely discussed, many women and couples feel very isolated and alone after suffering a miscarriage.”⁷ This project addresses this misunderstanding among other issues.

A discussion of grief must accompany pregnancy loss. Grief comes in many and various ways, but in this type of loss, grief can be even more complicated. We will look at how those who grieve the loss of their unborn children often have mixed emotions and responses. Some may feel like they should not even be grieving at all. This is what we’ll come to know as disenfranchised grief. Most grief will not follow an expected pattern but given the loss of the child before being born, death and life are so inextricably linked that grief can be confusing and entangled. We will see how there are alternatives to common understandings of grief and how the human narrative process can play an important role in pregnancy loss. Lives and experiences are shaped in and by our human narrative. It is not just in storytelling or intentional presentation. Regular interactions with people become part of our own story. In the case of pregnancy loss, the narrative can become confusing and the ability to express or share the story is compromised. Couple that with a society or community that does not know how to adequately acknowledge and validate the loss, a woman in grief over a lost child can become isolated.

Creating a community that acknowledges and validates the loss and compassionately cares for those who grieve is especially important in the church. The church is the place for those who feel isolated to find community. But the creation of this community needs to be intentional. Grief, in the usual sense, is communal by nature and the church has rituals and practices that express this. Funerals, memorials, and gatherings are part of the grieving process and are

⁷ “Miscarriage Research.”

effective at guiding people in grief. But very few, if any, such rituals are common practice when it comes to pregnancy loss. This project will investigate and attend to the need for rituals and practices in the community of the church. We will look at a particular liturgical structure that includes tangible rituals in a communal worship setting.

The Holy Scriptures are essential in constructing this worship setting and practice. This project pays particular attention to the book of Psalms and the nature of lament. In expressing the most difficult thoughts and emotions, the lament psalms give structure to the confusing emotions and isolating nature of grief from pregnancy loss. Psalm 6 is central to this project and is analyzed through textual exposition rather than a deep exegetical examination. It is important to see how this psalm is employed in the liturgy and preaching. Confusion and isolation of grief is addressed through the Word preached from Ps. 6 along with other parts of Scripture. In the preaching for the project, disenfranchised grief and feelings of displacement are countered by the assurance of a place in God's kingdom and a confidence in the promises of Christ.

The theological plan of this project attends to two main concepts of God's work in the world. These are the Hidden God and the Theology of the Cross. Looking at pregnancy loss through the lens of Lutheran theology, comfort may be offered in a deeper way and not through trite sayings or bumper-sticker theology, which fail to distinguish between Law and Gospel or the two kinds of righteousness.⁸ Larger theological concepts, such as the Hidden God, help to guide our thoughts and prayers, along with our liturgy, in expressing the confusion and emptiness that often accompanies pregnancy loss. With this concept in mind, a sermon can be crafted, and a liturgy built that brings the true presence of Christ to the hurting. Along with the

⁸ Bumper-sticker theology is a way of reducing greater theological truths to pithy sayings that fit on a bumper-sticker. This is misleading and not helpful to anyone. An example would be: Let go and let God. While right in saying that we commend all things to the care of God, it is not always helpful to read it on a vehicle's bumper.

Hidden God, Luther's Theology of the Cross offers a firm foundation for the suffering of life and loss. Seeing the suffering of grief as it is and not trying to find meaning in it or to deny it or even to justify the suffering is part of the Theology of the Cross. We do not try to minimize the impact of the grief nor see a "lesson" in it. Grief is the result of loss of relationship and connection and must be recognized and validated.

The sermon structures and homiletical concepts address the following question: how do pastors, as deliverers of the good news of Jesus Christ, communicate that recognition, validation, and compassion in full view of such tragic and confusing circumstances? The Law, and thereby the work of calling a sin, a sin, is inherent in our Lutheran understanding of the preaching task. In the case of miscarriage, stillbirth, and abortion, the Law has already done its work, and in many cases, it has crushed those who have endured such loss. To step into the pulpit and employ the convicting Law improperly at this point adds insult to injury or salt to an open wound. The suffering are already hurting and need the validation and compassion of the Gospel more than anything else. They need to hear and believe that Jesus loves them and is *for* them and that there is a place for them to bring their grief. What is needed for such times and for pastors in these situations are scripts to aid in their sermon preparation and delivery of the purist Gospel, of the truly Good News, and words of kindness, gentleness, uplifting from the Shepherd of the sheep.

Research Question

How can the church, through liturgy and preaching, address pregnancy loss with compassionate care and provide recognition and validation⁹ for those who have experienced such

⁹ Validation is understood here to be the acknowledgment of the community that the loss of a child through miscarriage or other means prior to birth is to be recognized as deserving of grief. This is addressed in the "disenfranchised grief" section of the project.

loss?

Research Purpose

The purpose of the research is to evaluate the applicability of Gospel-centered preaching in a worship setting regarding the recognition, validation, and comfort of those present. Along with the overarching purpose, my hope is that it may accomplish more. I hope that this research will open the discussion of miscarriage, stillbirth, abortion, and infant loss because the silence that most women experience is inexcusable and often devastating. The discussion around these events should be as common as any other pregnancy related discussion simply based on the sheer volume of miscarriages experienced by women in society. In addition, I present a liturgy that can help churches and pastors with tangible means to recognize, validate, and provide care for the women in their congregations who have experienced this type of loss. Included in the work of this project are sermon outlines and guides for developing Gospel-rich and gently compassionate sermons. The example sermon and liturgy can be used in a congregational setting. Finally, the project provides Grace as an example to other churches of carrying one another's burdens in Christian love and opening the doors of the church to the hurting in the community around us.

CHAPTER TWO

THE PROJECT IN THE CONTEXT OF RECENT RESEARCH

Expressions of grief vary as much as those who experience grief. No two experiences are alike. This is especially true with pregnancy loss. The grief of those who have lost children either before birth or soon after does not fit neatly into categories or types or surveys. Dr. Donna Rothbert, a clinical psychologist specializing in perinatal issues, including pregnancy loss sees a variety of reactions from mothers who have gone through pregnancy loss. She says, “Not everyone who loses a pregnancy feels they have lost a baby. Not everyone who loses a pregnancy finds it to even be a big deal. But for most of us, it is an enormously big deal. It can feel like the invisible giant of losses, an earthquake that happened only to us.”¹ Does the grief hit like the earthquake, or does it pass by with hardly a whisper? Angela Garbes, author and spokesperson on motherhood in our modern times, says, “The reactions to pregnancy loss are as diverse as the women who experience them—essentially infinite.”² I agree with Ms. Garbes and can see why grief associated with pregnancy loss is such a labyrinth.

Grief and Goals

Experiencing a loss of any kind generates a grief response. Grief, in a general sense, has signs and markers that can be communicated. In 1969, Dr. Elisabeth Kübler-Ross published her seminal work, *On Death and Dying*. In the preface to the 2003 printing of the work, Kübler-Ross outlines the intentions of her research. It was to be “an account of a new and challenging

¹ Donna Rothert, *At A Loss: Finding Your Way After Miscarriage, Stillbirth, or Infant Death* (Oakland: Open Air Books, 2019), 21.

² Angela Garbes, *Like a Mother: A Feminist Journey Through the Science and Culture of Pregnancy* (New York: HarperWave, 2018), 83.

opportunity to refocus the patient as a human being, to include him in dialogues, to learn from him the strengths and weaknesses of our hospital management of the patient.”³ Her work was never meant to be a sure and certain guide to grief or a system for diagnosing and categorizing grief. The five stages model that arose out of her work, however, became the language of grief for a large portion of society.⁴ This is not to say that her work is not valuable when addressing grief, but it should not be used as a checklist for the grief experience. The study of those who were dying is insightful and helpful for understanding certain experiences. However, Kübler-Ross did not study pregnancy loss or the associated grief. While certain “stages” of grief are seen in those who have lost children in the womb (particularly denial) this pattern cannot be followed to the letter.

A byproduct of the stage model of grief was the creation of a grief “goals.” The goal for this model was to reach acceptance. Once acceptance was reached, so it seemed, grief was at an end. But anyone who has grieved the loss of loved ones or pregnancies knows that grief does not come to an end. It changes over time and is felt differently throughout life. Human beings do not finish grieving.⁵ Author Megan Devine states: “We’ve got this idea that there are only two options in grief: you’re either going to be stuck in your pain, doomed to spend the rest of your life rocking in a corner in your basement wearing sackcloth, or you’re going to triumph over grief, be transformed, and come back even better than you were before.”⁶

³ Elisabeth Kübler-Ross, *On Death and Dying: What the Dying Have to Teach Doctors, Nurses, Clergy, and Their Own Families* (New York: Scribner, 2003), 11.

⁴ Kübler-Ross was studying people who had terminal diagnoses and their particular responses. Denial, anger, bargaining, depression, and acceptance were most common. However, this isn’t a timeline or a progressive experience. The adoption of this “model” for grief was inappropriate and has colored our view of grief for several decades.

⁵ Indeed grief does not end until the return of Christ and the fulfilled promise of tears wiped away and the end to sadness.

⁶ Megan Devine, *It’s OK That You’re Not OK: Meeting Grief and Loss in a Culture That Doesn’t Understand*

Devine illustrates how today's Western culture looks at grief as a problem to be solved or an emotional state to get past. She sees a better way. A healthier way to grieve this loss is within the context of a community. The goal is not to erase grief as if it never happened. For her, it is in simply being with someone who is grieving and walking alongside them in their grief.⁷ One benefit of Devine's understanding of grief is that it is experienced more as a narrative that plays out over time and less as a checklist of particular emotions and responses. Stephen Crites says in his 1971 article on the human narrative, "The stories give qualitative substance to the form of experience because it is itself an incipient story."⁸ Crites argues that "the formal quality of experience through time is inherently narrative."⁹ Groups and cultures have an organized way of sharing personal experience. Memory provides the details of the narrative of personal experience. The elements of memory include images, emotions, interpretations, and cultural contrivances. Grief is a particularly persistent narrative. We view the experience of loss and grieving as part of the narrative arc of the one grieving. Part of this project was designed to provide a space in time for participants to share that narrative and to tell the story. Sharing the story with me allowed the participants to hear how the grief is still a present reality but is no longer a controlling or limiting factor in their lives. The importance of sharing their stories cannot be understated. It is in speaking of the event that the memory is stirred, and the emotions expressed. This can be a dangerous endeavor as it can trigger in the storyteller a flood of negative emotions and pain. However, as was shared by a couple of the participants, it was in the sharing that the memory of their child was made alive again. That is, they were enabled to

(Boulder: Sounds True, 2017), 57.

⁷ Devine, 60–61.

⁸ Stephen Crites, "The Narrative Quality of Experience," *Journal of the American Academy of Religion* 39, no. 3 (1971): 297. <http://www.jstor.org/stable/1461066>.

⁹ Crites, "Narrative Quality," 291.

embrace their children in a new and loving way. In grief, in retelling the story of loss, in particular the loss of a child, the memory of the child is connected to a larger story, a larger community. And to know that other people can refer to that child brings recognition and validation of the loss. Thomas Long comments on a child's funeral in this way, "The Christian community should carry this child to God, as we would carry any other person, singing as we go."¹⁰

It is within the community that what once was a memory kept locked away is given expression and recognition and the grief is now shared. To grieve alone only adds insult to injury. But to be with someone while they grieve as support, companionship, and to listen is invaluable, especially to those who have experienced pregnancy loss. Author Angela Garbes comments, "When it comes to pregnancy loss, there is no script to follow. To help a woman navigate it, you don't need to offer advice or perspective. It is enough to show up, however awkwardly, and be there. To listen."¹¹ Walking with someone in their grief validates their feelings, acknowledges the loss they carry, and provides space for them to grieve in their own way.

Grief, then, becomes communal. It is no secret that in the United States, there is a streak of fierce independence and the need to make it on your own. Self-determination and self-esteem abound in our history. It seems that the same independent spirit and idea of the strength of self has infiltrated even grief. This creates a problem. Grief experienced alone can be exponentially more difficult to process. Especially in the case of pregnancy loss, grief compounded by a sense of isolation leaves women vulnerable to despair. But grief was meant to be communal. It is a

¹⁰ Thomas Long, *Accompany Them with Singing: The Christian Funeral* (Louisville: Westminster John Knox, 2009), 201.

¹¹ Garbes, *Like a Mother*, 87.

shared experience, though felt differently by each person. Therefore, a funeral is important in the experience of death and why something of the kind needs to be available for those who have lost pregnancies. In a funeral the community gathers to mourn together, to comfort one another, and to hope together. A funeral recognizes the communal nature of grief and the gathering of the body of Christ at the time of death. Richard Rutherford, professor of theology and liturgy at the University of Portland says, “Funeral ritual belongs to the very heritage of the human community.”¹² Rutherford begins his book on the development of Christian funeral practices and evolution of the Roman Catholic funeral liturgy by focusing on the communal aspects of the funeral. The development and holding of a memorial or funeral for those lost in pregnancy should be a vital part of the Christian community. However, I agree with Thomas Long here, “Circumstances vary, and pastors will, as always, have to make decisions related to those circumstances, but generally speaking, funerals are not held on the occasion of miscarriages. A ritual of loss and prayers for healing and hope are often a more suitable response to a miscarriage than is a full funeral service.”¹³

We make a distinction here regarding the nature of the proposed service. The memorial service presented in Appendix 1 is not a funeral service. It is important to note that the communal aspect of worship is maintained but the focus and intention of the service is very different from a funeral.¹⁴

Pastoral care for families who have experienced loss is not in question. What is vital to see

¹² Richard Rutherford and Tony Barr, *The Death of a Christian: The Order of Christian Funerals* (Collegeville: The Liturgical Press), 1990. 3.

¹³ Long, *Accompany Them*, 202.

¹⁴ Most notable is the absence baptismal language. Since the child died before baptism was possible, we make no mention of it. The idea may already be on the minds of the parents that there is a problem because their child was not baptized. However, the service in Appendix 1 is designed to demonstrate the love of Jesus for their child and the grace of God despite the child being unbaptized.

is that the worshipping community is at a deficit with no officially recognized service for pregnancy loss. In addition, there are no accepted social constructs governing the grieving process because pregnancy loss has been largely overlooked in the Christian community or only spoken of in hushed tones. Dr. Ken Doka recognizes what he calls disenfranchised grief. “Disenfranchised losses are not openly acknowledged, socially sanctioned, or publicly shared. They create a paradox. We experience loss, but we come to believe we do not have the right to grieve that loss.”¹⁵ While Doka does not mention the grief of pregnancy loss, the idea of disenfranchised grief fits well with that experience. In more traditional instances of grief, such as the loss of a beloved grandfather after a prolonged illness, there are societal norms that loosely dictate the days following. There is a funeral or memorial of some kind. Words of consolation are offered to the family. Taking care of family business and details follow a set pattern. The loss is acknowledged, accepted, and validated as is the grief. But with disenfranchised grief, there is no pattern to follow. Author Peggy Orenstein notes, “There’s little acknowledgement in Western culture of miscarriage, no ritual to cleanse the grief.”¹⁶ Society has no norms and barely has words to offer. Add to that the fact that, “Americans don’t like unhappy endings. We recoil from death.”¹⁷ In pregnancy loss and, perhaps, even more so in the parts of society do not recognize the loss as a baby, there are no scripts to follow. This leaves the one grieving the loss confused as to how they *should* feel and how long they *should* feel that way.

Gaps in the Scripts

Disenfranchised grief, a lack of discernable patterns or expectations, and a silent response

¹⁵ Kenneth J. Doka, *Grief is a Journey: Finding Your Path Through Loss* (New York: Atria Books, 2016), 183.

¹⁶ Peggy Orenstein, *Essays on Girls, Women, Sex, and Life* (New York: Harper, 2018), 173.

¹⁷ Orenstein, *Essays on Girls*, 175.

from culture and society leave women who have lost pregnancies confused. What are they to do? Where can they go to find comfort? Is this a problem in the church, too? Is this something that extends into a general human experience? Disenfranchised grief, as Doka explains, places the griever at great disadvantage. Unless someone around them has experienced the same grief, it will not be comprehended by passersby or friends or colleagues, at least not fully. Within the narrative of their grief, women may find comfort in companionship and friendship. But again, unless that friend has also lost a baby in some way, the grief won't be understood completely. And it hasn't been until very recently that books and other resources were widely available that speak to miscarriage and loss.¹⁸ It seems as though certain parts of society are recognizing that there are no set patterns, no accepted scripts for working with pregnancy loss and grief. Dahlia Lithwick speaks from a secular point of view. "The universality of the taboo on discussing miscarriage- the fact that our grandmothers and great aunts never discussed theirs, either- suggests that the shame surrounding pregnancy loss predates even feminist politics. I think we falter around miscarriage because society has no scripts for dealing with it, and never has."¹⁹

Lithwick wrote those words almost nineteen years ago. Perhaps not much has changed since she penned the phrase, "society has no scripts for dealing with it." With this in view, not only is it difficult for those who have lost pregnancies to understand their own grief, it is made more difficult because it is not something that people openly talk about. Orenstein comments, "They tell you only if you become one of them."²⁰ It is rare for someone to offer up this part of their life freely. It is not until one person talks about their pregnancy loss that others will come

¹⁸ I searched through Amazon.com, barnesandnoble.com, along with the Eugene Public Library. The vast majority of books that I found on the subject of pregnancy loss were written within the last ten years.

¹⁹ Lithwick, "I Went Out Full," 58.

²⁰ Orenstein, *Essays on Girls*, 174.

forward.²¹

The accepted scripts of grief fail those who have experienced pregnancy loss because they ring hollow. After having officiated at well over fifty funerals in my time as a pastor in the Lutheran church, only two of them have been for children lost prior to birth. In either case, words fail to genuinely express sorrow and are seemingly incapable of expressing comfort. A funeral for someone who has endured a long, protracted illness late in life can be said to finally be at rest, or perhaps even that he is truly in a better place.²² To a mother who has not even been able to hold their child in their arms or hear the cry of their newborn, there is no *better* place. The better place would be in the loving arms of her mother. The child is not finally at rest as they hadn't even had the chance to begin life. Words that express condolence to grieving family members in what might be considered normal circumstances do not fit in the circumstances for which this study exists.

Two of the resources consulted for this study create lists of things that were or could be said in the case of pregnancy loss. Trying to put the best spin on the words said, one can see maybe why they were said. But the scripts don't fit and simply cause hurt even if it was unintentional. The first list comes from Rachel Lewis in her book *Unexpected*.²³

- At least...it was early, you're young, you have other children, etc...
- Everything happens for a reason.
- You can always try again.

²¹ This statement played out before my eyes when I announced to the congregation at Grace that I was studying this part of grief. After that announcement, several people approached me wanting to tell their stories or at least saying that they too had had a miscarriage. My daughter, Madeline, also found that once she told everyone what had happened, others came forward to share that they had also experienced pregnancy loss.

²² And even then, words can fall short of offering true comfort and solace.

²³ Rachel Lewis, *Unexpected: Real Talk on Pregnancy Loss* (Minneapolis: Bethany House, 2021), 169.

- They're in a better place.
- You'll get over it.
- God never gives you more than you can handle.²⁴
- Heaven needed another angel.²⁵
- You need to be grateful for what you have.

Jessica Zucker adds her own list of what not to say.²⁶

- At least you know you can get pregnant. Things will be different next time.
- At least you have a healthy child. You were ambivalent about having another baby.
- The baby wasn't healthy. Aren't you relieved things ended early? It wasn't really even a baby yet.
- You look great! You don't even look like you were pregnant.

These statements are not helpful in the least for most women. The lack of empathy, understanding, tact, subtlety, and compassion is striking. Angela Garbes argues, “But those directives, which come from well-meaning partners, friends, family members, and health-care practitioners, can get in the way of the more complex, healthier—and often slow—process of grieving and recovery.”²⁷ When people don't know what to say, when society does not provide scripts for these situations, we end up blurting something out that we think sounds helpful and

²⁴ Lewis, *Unexpected*, 172. Apart from being Biblically unfounded, this statement compounds the struggle of faith and brings into question the mother's relationship with God or her own spiritual fortitude. It is a terrible thing to say.

²⁵ Lewis, *Unexpected*, 172. Again, this is a Biblically and theologically false statement. Humans are not angels nor do they become angels. And if God had a need for more angels, he wouldn't take them from young mothers trying have children. He could simply create others. This is another terrible thing to say, often uttered by Christians with the best of intentions.

²⁶ Jessica Zucker, *I Had a Miscarriage: A Memoir and a Movement* (New York: Feminist Press, 2021), 86.

²⁷ Garbes, *Like a Mother*, 77.

immediately after it, our proverbial foot goes into our big mouths.

As Christians, we can embrace the ability of the Scriptures to offer comfort without resorting to platitudes. We must also reach out with a solid understanding of the Scriptures as they are employed in these contexts. The preaching of the Word of God in this midst of these struggles must avoid cherry-picking texts that only sound sweet and instead delve deep into the Scriptures for those texts that are truly comforting. The project will look more closely at that in the following chapter. But we cannot close this chapter without offering some words to be said in response to the gap in the scripts that currently exist. Looking again to Zucker²⁸, there are ways to communicate compassion without resorting to empty or hurtful words.

- I'm here to listen
- I'm sorry for your loss
- This is a significant loss
- How have you been feeling since...the loss, the testing, the news?
- (Sometimes saying nothing is better)
- You did nothing wrong. This is not your fault.

The pastoral response should look very much like this list above. Again, in order to provide compassion and comfort, we cannot resort to empty words. The empathic ear, the open conversation, and the accepting heart do well to simply be with the person grieving. Listening to stories shared, to memories recalled, and to tears that flow is so important and so often missed because of our discomfort with death, especially the death of the littlest ones. Zucker shares her goals of her counseling work after her own miscarriage. "I wish my mother had supported me

²⁸ Zucker, *I Had a Miscarriage*, 86–88. I've shortened some of the responses from Zucker's list in order to accommodate more. She offers explanations about how these alternative statements are helpful and better choices for those attempting to offer comfort and validation.

differently after my miscarriage. My hope is that by attending to our cultural patterns of communication with regard to pregnancy loss, we will have access to more loving, less fraught interchanges.”²⁹ I echo her goal especially in the context of the church. To open dialog more readily and to address the resounding silence that is only just beginning to break is a wider goal of this project. While I know that there has been increased interest in pregnancy loss over the last decade, there is still much to learn about how to communicate effectively, to acknowledge and validate the suffering, and to comfort those who grief such loss in a compassionate way.

²⁹ Zucker, *I Had a Miscarriage*, 95.

CHAPTER THREE

THE PROJECT IN THEOLOGICAL PERSPECTIVE

In this section, we build upon what Dr. Kenneth Doka calls “unacknowledged losses of life: disenfranchised grief.”¹ The earlier chapter presented the idea that in Western culture, grief is often connected to a goal. Grief becomes a process by which the one grieving works through different stages or different ranges of emotion in order to reach a final goal. This goal might be to find meaning in the grief or simply acceptance of the loss itself. However, I contend that grief has no ultimate goal. With unexplainable loss, such as most pregnancy losses, grief becomes a part of the lived experience of the person. Disenfranchised grief creates a vacuum in the middle of grieving. After pregnancy loss, many are left feeling alone in their grief, in silence over their suffering, and without support from those around them. It is a grief with no order, no publicly recognized system, and no discussion. It is amid this grief that the Lutheran expression of the Theology of the Cross becomes vital and foundational. Gerhard Forde insightfully says, “The cross insists on being its own story. It does not allow us to stand by and watch. It does not ask us to probe endlessly for a meaning behind or above everything that would finally awaken, enlighten, and attract the exiled, slumbering soul. The cross draws us into itself so that we become participants in the story.”² Someone who grieves under the Cross can neither deny nor ignore grief. Not only that, but they must look at their grief and face the loss as a reality. In pregnancy loss, since culture has no real way of acknowledging it, denial of grief’s full impact only exacerbates the grief and pain of the loss. This doesn’t just happen in the person who has

¹ Doka, *Grief is a Journey*, 183.

² Gerhard Forde, *On Being a Theologian of the Cross: Reflections on Luther’s Heidelberg Disputation 1518* (Grand Rapids: Eerdmans, 1997), 7.

experienced the loss. Those around her who deny their pain or worse, her pain, stack pain upon pain. But the one who grieves does not have the luxury of ignoring the pain of loss or explaining it away in some ethereal way. “They, in other words, are led by the cross to *look at* the trials, the sufferings, the pangs of conscience, the troubles—and joys—of daily life as God’s doing and do not try to *see through* them as mere accidental problems to be solved by metaphysical adjustment.”³

The Theology of the Cross does not explain away trials, troubles, or grief. The question then arises, “How is it helpful then?” The Theology of the Cross is not helpful in assuaging grief by providing an understanding, a teaching moment, or a pithy saying. Forde acknowledges, “So theologians of the cross know that we can’t be helped by optimistic appeals to glory, strength, wisdom, positive thinking, and so forth because those things are themselves the problems. The truth must be spoken.”⁴ The truth that is spoken through the Theology of the Cross is that there is pain, suffering, loss, and death in the world, and, as Timothy Keller notes, “it comes upon people who seem to have done nothing to warrant it.”⁵ This is especially true of pregnancy loss.

Along with the Theology of the Cross is the theology of the Hidden God. When suffering is at its worst, God often seems to disappear or distance Himself from the sufferer. Gene Veith comments, “The fact of suffering is often taken as a sign that there cannot be a God...Even worse, the fact of suffering is sometimes taken to mean that the sufferer has been rejected by God.”⁶ Veith discusses the hiddenness of God in depth. He addresses some of the significant concerns with the Theology of the Cross, suffering, and the apparent absence of God in the most

³ Forde, *On Being a Theologian*, 13.

⁴ Forde, *On Being a Theologian*, 17.

⁵ Timothy Keller, *Walking with God through Pain and Suffering* (New York: Penguin, 2013), 94.

⁶ Gene Edward Veith, Jr., *The Spirituality of the Cross: The Way of the First Evangelicals* (St. Louis: Concordia, 1999), 63.

difficult times. “To say God is hidden, of course, does not mean that He is absent. On the contrary, someone who is hidden is actually present, just not seen.”⁷ It is precisely when we go searching for God in the suffering that He hides Himself so that we won’t be able to see Him. Seeking God in the suffering is akin to asking why bad things happen to good people. There is no answer that satisfies. This is because we ought not go looking for God in the suffering, but in the Cross, the promises of God through Christ, and in His people. Gerhard Forde works with this experience with the “God not preached” in his book *Theology is for Proclamation*.

God not preached is the absconder, one who hides behind naked abstractions, and there is nothing theology as such can do about that because theology is a collection of abstractions. It is only in the concrete proclamation, the present-tense Word from God, spoke ‘to you’ the listener, that the abstraction is broken through for the moment and God no longer absconds but is revealed.⁸

For Forde, God is not found in the metaphysical sense through what he refers to as theological abstracts. But God shows up when the Word of God is proclaimed as being “for you.” Therefore, seeking God despite the suffering or even because of the suffering has everything to do with faith. As Herman Sasse said, “Faith always deals with what is hidden.”⁹ Faith can reveal the hidden through the real word of God either preached or read or otherwise communicated. And the conviction that this is done “for you” through faith allows the unseen to be grasped.

For this project, we deal with the Hidden God, not in ethereal or mystical ways, but in the ways in which he chooses to reveal himself to the human world in general and to the grief stricken in particular. We speak of God in concrete terms in the person of Jesus Christ. The

⁷ Veith, *Spirituality*, 56.

⁸ Gerhard Forde, *Theology is for Proclamation* (Minneapolis: Fortress, 1990), 17.

⁹ Herman Sasse, *We Confess Anthology: We Confess Jesus Christ*, trans. Norman Nagel (St. Louis: Concordia, 1984), 50.

tangible nature of God's promises is central to the theology of Oswald Bayer.¹⁰ For Bayer, Jesus is not just the fulfillment of promises made by God to His people in the past but *is* the promise of God Himself. In other words, Jesus does not come as God in the flesh to talk about the promise fulfilled. By His incarnation, He *is* the promise fulfilled. Jesus is both the promise and the promise fulfilled. Bayer links this promise with the terrible reality that God is often hidden from our sight. Bayer is, of course, steeped in the Theology of the Cross and the hiddenness of God. The central theme to his homiletic is the action of the sermon. The sermon is not just a few words about something theological or spiritual. It is the living and active Word of God that accomplishes what God says. The homily, then, centers on the delivering of the promise to the ears and hearts of the suffering.

Not only does God allow Himself to be seen and heard in Christ, but it is also in the Scriptures where the Hidden God, through faith, lifts the veil long enough for us to comprehend His promises and love. The Scriptures chosen for this project reflect the feelings and emotions of those experiencing disenfranchised grief and a sense of displacement as identified by James Neiman and Thomas Rogers in their book *Preaching to Every Pew*.¹¹ To help preachers speak more directly to their hearers in meaningful ways, Neiman and Rogers present four perspectives of cultural diversity: ethnicity, class, displacement, and religious beliefs. Each perspective presents unique challenges to effective communication including preaching. Those who have lost children prior to birth often report feeling out of place even in settings where they have normally felt comfortable, including church. We will use their definition of displacement which identifies “any movement or shift from a customary setting. The customary settings in our lives are those

¹⁰ Oswald Bayer, “Preaching the Word”, *Lutheran Quarterly* Vol XXII (2009), 250.

¹¹ James R. Neiman and Thomas G. Rogers, *Preaching to Every Pew: Cross-Cultural Strategies* (Minneapolis: Fortress, 2001).

spaces where we usually experience familiarity, predictability, and control—wherever we feel safe.”¹² Displacement as it fits with pregnancy loss is the feeling that those who have experienced this loss often feel out of place, isolated, or without the necessary stability to grieve.

In the Scriptures, God addresses these feelings of displacement. As preachers, we look to the Scriptures as the pure truth and comfort for the grieving. We choose texts that attend to the emotions in an authentic way, not in pious paraphrasing. The book of Psalms is an obvious place to start. We find the full range of human emotion expressed in the book of Psalms along with expressions of faith, trust, and hope. The Psalms had been collected by the people of Israel throughout their history. Many of the Psalms are expressions by individuals, such as King David, while others are corporate prayers and songs to be used in worship settings. The lament Psalms, of which Ps. 6 is an example, were composed during times of terrible sorrow and pain. The people of God use the Psalms to cry out to God in their disenfranchisement, displacement, and grief. Within the framework of the liturgy for the recognition, validation, and comfort of those who have experienced pregnancy loss¹³, the Psalms are integral to promoting the free expression of grief. Psalm 6 and Ps. 139 were chosen for the service. The pattern of sermon preparation that I followed for this part of the project is an example of what Dr. David Schmitt calls “textual exposition.”¹⁴ This is a particular method of exegetical work in the text. It is not as detailed as the work that might accompany a Bible study. “Such exposition is not comprehensive, the rehearsal of every detail of the exegetical complexities or the historical situation of a text. It offers only

¹² Nieman and Rogers, *Preaching*, 85.

¹³ The liturgy was designed by the author during a DMin independent study with Dr. Kent Burreson. This liturgy will be discussed in detail later in the chapter.

¹⁴ David Schmitt, “The Tapestry of Preaching,” *Concordia Journal*, Vol. 37, No. 2 (Spring 2011): 3. <https://concordiatheology.org/2011/09/the-tapestry-of-preaching/>.

that information which is pertinent to the sermon, clarifying for *this day this* aspect of *this* text.”¹⁵

As this sermon was an occasional sermon and not one that would normally be preached in the context of Sunday worship, a more general textual exposition was appropriate.

Psalm 6

Psalm 6¹⁶ is a psalm of lament, of contrition, of recognition of sin and its effects. It is the expression of a broken heart and soul, of sickness, sadness, and pain. Luther comments on the lament, “Now draw together the weight of feelings in this psalm, and you will see that it cannot be heard without many tears.”¹⁷ However, there is hope in Ps. 6. It comes in verse 9: “The Lord has heard my plea; the Lord accepts my prayer.” It is fitting that this psalm would be used in the context of pregnancy loss and in a liturgical setting. As we’ve seen above and will see in Chapter 5, the experience of those who have lost pregnancies can be overwhelming in suffering. The emotions that are expressed in this type of grief are found in the psalms of lament. At the same time, a hope can be found, and a light made to shine.

O Lord, rebuke me not in your anger,
nor discipline me in your wrath. (Ps. 6:1)

The psalmist here pleads with the Lord to be merciful and not treat him in anger or wrath. Notice the plea is to not rebuke nor discipline, but to attend to the suffering in some other way. In some parenting circles, discipline should never come from a source of anger, but always love. Discipline out of love looks different and has a different intention.

Many times when tragedy hits, people assume that God is angry with them. Some who

¹⁵ Schmitt, “Tapestry”. 1.

¹⁶ For the purposes of this project, I will use the English Standard Version (ESV) of the Holy Bible, unless otherwise noted.

¹⁷ Martin Luther, *First Lectures on the Psalms I*, ed. Hilton C. Oswald, vol. 10, *Luther’s Works* (St Louis: Concordia, 1974), 81.

have lost pregnancy may feel the same. Even well-meaning Christians may say that the miscarriage is the result of God's anger or discipline. "What did I do? Why is God angry with me?" The confusion of grief creates questions without suitable answers. Thankfully, the psalmist doesn't stop here.

Be gracious to me, O Lord, for I am languishing;
heal me, O Lord, for my bones are troubled. (Ps. 6:2)

This is the admission that one needs grace and mercy and healing because they are languishing and troubled. It is a plea for that mercy and grace. "And here it must be noted that this psalm and others like it will never be thoroughly understood or prayed unless disaster stares a man in the face as it does in death and at the final departure."¹⁸

It is in the death of their pre-born baby that the mother experiences the depth of this psalm. Life and death come together in pregnancy loss. This is part of the unique suffering of pregnancy loss, the binding of life to death and death to life.

My soul also is greatly troubled.
But you, O Lord—how long? (Ps. 6:3)

The lament is not just over physical suffering, though that is part of it. It is also spiritual suffering. As theologians of the Cross, we understand intellectually that God imparts His grace in the midst of trouble. God's goodness is masked by the pain. Suffering seems to slow time. This is especially true of spiritual suffering. Since God operates outside of our notions of time, grief can seem to last forever.

In pregnancy loss, the grief is both acute and chronic, to use medical terms. It is acute in that the spiritual pain of the immediate can be intense and is certainly sudden and unexpected. Then, the grief hangs on, refusing comfort or consolation. As was mentioned above, there is no

¹⁸ Martin Luther, *Selected Psalms III*, ed. Jaroslav Pelikan, trans. Arnold Guebert, vol 14 *Luther's Works* (St. Louis: Concordia, 1958), 141.

goal in this grief and it is natural to cry out to God, asking, “how long?”

Turn, O Lord, deliver my life;
save me for the sake of your steadfast love. (Ps. 6:4)

The psalmist expresses confidence here even while suffering. He knows that God is faithful. He pleads for deliverance from the suffering because God’s love is firm. Merit or worthiness is not the qualification for being pulled out of the suffering, but only the love of God. There is no expression of doubt regarding the love of God.

It is at this turn that pregnancy loss can often challenge faith. The participants that were part of this project expressed faith in God despite the circumstances of their losses. While many experienced anger and sadness toward what could be considered “God’s plan,” they did not talk about turning away from God or doubting His love for them.

For in death there is no remembrance of you;
in Sheol who will give you praise? (Ps. 6:5)

This continues the psalmist’s confident expression. He knows that God would not allow him to languish in Sheol or even in death because there is no one and nothing to praise God in the darkness. “For sin is the death of the soul, and pain is its hell. Both are felt by one who lies in this distress, namely, in sin and in punishment for sin.”¹⁹

Here, we must tread cautiously as homileticians. Especially in this project, to equate what happened in pregnancy loss directly with a particular sin or punishment can do considerable damage to someone who is hurting deeply. The death of the child in the womb is not punishment for the sin of the mother, but the result of sin in the fabric of the world.

I am weary with my moaning;
every night I flood my bed with tears;
I drench my couch with my weeping.

¹⁹ LW 14, 143.

My eye wastes away because of grief;
it grows weak because of all my foes. (Ps. 6:–7)

The psalmist expresses the depth of his grief over sin and suffering. The ongoing emotional outpouring weakens him physically and emotionally. Moaning, tears, and weeping drain him of energy and resolve.

This is a clear connection to the experience of grief. In its intensity and duration, tears become a familiar part of life. It takes its toll on the one who mourns.

Depart from me, all you workers of evil,
for the Lord has heard the sound of my weeping.
The Lord has heard my plea;
the Lord accepts my prayer.
All my enemies shall be ashamed and greatly troubled;
they shall turn back and be put to shame in a moment. (Ps. 6:8–10)

Here are the words of confidence in the face of trouble. Faith and the remembrance of past actions of God bring about a sure and certain hope that the prayers in the depths of grief have been heard and accepted. Along with that confidence is the hope that all of the enemies will be put to shame and vexed.

This is a turning point for those who suffer grief. Not that grief has subsided or evaporated, but that even in the midst of mourning, the prayers of the faithful are heard and accepted. For the mother who mourns the loss of her child, the sadness will never be completely gone this side of the return of Jesus. But, through faith and hope in Christ, the enemies of sin and sadness that darken the doorways of life so often will be put to flight and turned away.

The textual exposition in this way is important for preaching preparation because it does not dwell on the minutia of exegetical analysis. Not that the deep analysis is unimportant, but for the purposes of preaching, this type fits well. “While textual exposition is narrowed down by what is pertinent to the sermon, it is also expanded by the forms of communication possible for

contemporary hearers.”²⁰ What follows are sermon structures and forms that take into account the textual exposition and the occasion of the sermon.

Sermon Structures for Homilies in Special Service for Pregnancy Loss

Sermons require some amount of scaffolding for them to be organized and make appropriate use of the text, the movements, the illustrations, and anything else the preacher wants to include. Most pastors have learned a few basic structures for sermon preparation and delivery. In cases of occasional sermons, the structure may vary widely from Sunday sermons or lectionary sermons. For the homiletical structure, I developed three examples from three separate homiletic sources.²¹

Example 1: Displacement²²

This theme and structure stem from the research presented in Chapter 2 along with the interviews conducted for the project. Neiman and Rogers use the term “frame” to qualify their positions in preaching. The frame of displacement is position that there are people in the congregation who feel like fish out of water. They are not connecting in the same way as the dominant culture of the congregations. Neiman and Rogers discuss feelings of invisibility and an erosion of identity that comes from a loss of place. Also, there are those who have been displaced that carry hidden wounds from the past. For the purposes of this project, the frame of displacement fits extraordinarily well with many who have experienced pregnancy loss. Due to the lack of discussion of the subject, they often feel invisible. They carry wounds and grief from

²⁰ Schmitt, *The Tapestry of Preaching*.

²¹ Nieman and Rogers, *Preaching to Every Pew*; Paul Scott Wilson, *The Four Pages of the Sermon*; Dean Nadasdy and David Schmitt on Imagistic sermons.

²² Neiman and Rogers, *Preaching*, 84–111.

the experience that are not healed. And because there is a part of their identity that was connected to child-bearing that has been lost, they often feel as though they don't completely fit in with others who have not experienced such a loss.

When translated from emotion to theological expression, a feeling of being displaced echoes our collective sinful condition. We feel out of place in the world around us and often feel as though God does not see us. "Displacement separates us from the patterns that have been central to us, the strategies that have helped us mark off who we are."²³ Neiman and Rogers discuss the alienation and a deprivation of a source of identity that accompany displacement. All of these things, along with the secretive nature of grief in pregnancy loss, combine to create a sense of separation from God, from self, and from others. If there is no connection to any source of exterior validation and no immediate source of identity, grieving mothers are a displaced population within the church.

Comparison/Contrast Structure within the Frame of Displacement

This structure allows for the comparison of perceived states of being with the truth of God's Word. In this case, the sermon addresses emotions or feelings contrasted with the Scriptural understanding of God's reality.

Rhetorical Unit #1: Feelings of Invisibility vs. Being Seen By God—Psalm 139:1–5

Nieman and Rogers comments here, "Feelings of isolation and rejection are heightened while, at the same time, available social resources for expressing and addressing displacement remain unused."²⁴ Psalm 139:1–5 provides a ready expression of a sure connection with God that

²³ Neiman and Rogers, *Preaching*, 86.

²⁴ Nieman and Rogers, *Preaching*, 92.

supersedes the isolation and rejection that the loneliness of grief creates. The one who mourns is not unseen by God even though they may feel unseen by those around them.

Rhetorical Unit #2: Hidden Wounds vs. Compassion and Healing of God—Psalm 6:6–7

Again, from Neiman and Rogers, “Beyond promoting mere psychosocial adjustment, however, the preacher can distinctively declare a Christ who knows our most hidden wounds and perilous journeys and offers a special bond regardless of the present circumstances.”²⁵ The deep pain expressed in Ps. 6:6–7 almost shouts the grief, the sense of being alone, and the ongoing pain associated with pregnancy loss. This is pain expressed in secret, in solitude, and darkness. But here is where the God who knows our pain, who sees us, meets us with the comfort of Jesus. And giving words to the emotions and pain can free the one who mourns to see the One who is there for them and sees them and feels with them.

Rhetorical Unit #3: Erosion of Self vs. Value in Sight of God—Psalm 139:13–16

In the final move of the sermon, the displaced person, whose sense of self has been damaged or destroyed, can finally hear of their value in the eyes of God. Psalm 139:13–16 praises God for His knowledge and creative work in human life. The one who mourns the loss of a child can rest in the faith that God was with them and with their child from the very outset. They can be sure that God, the creator of the cosmos, knows each person, born and unborn. They may go through times of feeling a weak sense of self or value in the world. But God values them so much that He sent His Son Jesus to die and rise again for them and for their little ones. So then, the promise of the resurrection is for them too. God’s intimate knowledge of each person begins in the womb but does not end there. It extends to the resurrection of the body and the life

²⁵ Neiman and Rogers, *Preaching*, 101.

everlasting.

Example 2: Immanent Trouble and the Four-Pages Structure

Using Paul Scott Wilson’s Four-Pages homiletical structure is a straight-forward path to preaching. Having a clear picture of the trouble in the world and in the Scriptures allows the preacher to address both a general understanding of suffering and a specific type of suffering connected to sin and its effects in the life of the hearer. Wilson writes, “As preachers, we are identifying immanent trouble when we examine the world horizontally for evidence of the fall and when we reflect in our words the brokenness of the world and the suffering of the innocent.”²⁶ In the case of pregnancy loss, the suffering is tied to an event and experience of the brokenness of the world and connected to suffering and grief.

It is interesting that Wilson’s consideration of immanent²⁷ and transcendent trouble roughly follows what we would call the two kinds of righteousness. This creates options for the preacher when looking to Wilson for guidance. Transcendent trouble, posits Wilson, is that which separates us from God in the vertical relationship²⁸. This is what Lutheran theology refers to as our righteousness before God or the vertical axis of the cross. When we use this structure, we look to the text to point to a specific manner of sin or something that deems us guilty before God. For example, we could look to Matthew and the Sermon on the Mount. Jesus draws distinction and connection between anger and murder, lust and divorce. Though transcendent trouble always affects the immanent present, the focus is on God’s judgement regarding those particular sins.

When it comes to immanent trouble, Wilson shifts from the vertical relationship or

²⁶ Wilson, *Four Pages*, 112.

²⁷ Paul Scott Wilson, *The Four Pages of the Sermon: A Guide to Biblical Preaching*, (Nashville: Abingdon, 1999), 110–117.

²⁸ Wilson, *Four Pages*, 110.

righteousness before God and looks instead to the horizontal expression and experience of that relationship. “In the case of immanent trouble, individuals share guilt with society and the primary thrust of guilt tends to be social...The result can be a feeling of collective guilt, of shame, of mourning, and of a renewed awareness of surrounding needs.”²⁹ In other words, an awareness of the effect of sin all around us as it is experienced in pregnancy loss and grief. Preachers here will need to be careful not to mix immanent with transcendent trouble and attach the grief and guilt in a causal way to the pregnancy loss.

Four Pages Structure—Romans 8:18–26

Rhetorical Unit #1: Immanent Trouble in the Text—Evidence of the Fall

We read here that the entire creation has been “groaning together” under the bondage to sin and the resulting decay. We ourselves “groan inwardly” as we wait for God’s work to be completed. Sin indeed takes its toll on all of creation.

Rhetorical Unit #2: Immanent Trouble in the World—Suffering of the Innocent

That shared suffering shows its ugly face in many ways. Our human bodies do not always work the way they are supposed to and we suffer physically. This is obvious in the losses of our littlest ones before they are born. We know this shouldn’t be the way things go and our physical, emotional, and spiritual suffering are almost too much to take.

Rhetorical Unit #3: Hope or Grace in the Text- Jesus as Redeemer from the Fall

There is redemption from the suffering in Christ. John 3:16 tells us how much and in what way God loves His entire cosmos and Jesus came to redeem all of creation. All of creation waits

²⁹ Wilson, *Four Pages*, 113.

to be set free from the decay and bondage of sin. It is the hope, the confidence, and the trust in God through Christ which sustains creation in suffering. It is the hope in the promised glory to come.

Rhetorical Unit #4: Hope or Grace in the World- Jesus as Redeemer from Suffering

Though the suffering of our experience is great, we too can have hope in Christ. Not only for ourselves but for our littlest ones. As much as we are part of the redeemed creation, so are they. “We wait eagerly for adoption as sons, the redemption of our bodies.” Our little ones are as much a part of that adoption and redemption as we are. As Jesus has redeemed us, He has redeemed them.

Example 3: Image Centric Form

In this form, a particular image plays a central role in shaping the sermon. Dean Nadasdy writes, “The text is still the driving force shaping the sermon, but the preacher intentionally enhances the text by the images the text itself suggests.”³⁰ The central image can be an imaginative image or a well-known image such as a Renaissance painting. David Schmitt states the functionality of images in preaching, “The nature of the image, the congregational context, and the relationship of the image to the content and the function of the sermon help the preacher determine not only which structure to use but also whether the image should be only verbally depicted or also visually displayed.”³¹ Nadasdy is aware that the image presented by the preacher may not always be the image that is formed in the minds of listeners when the image is described

³⁰ Dean Nadasdy, *The Beautiful Sermon: Image and the Aesthetics of Preaching* (St. Louis: Concordia Seminary Press, 2021), 119.

³¹ David Schmitt, “Imagistic Structures,” Concordia Theology, Concordia Seminary, August 1, 2011, <https://concordiatheology.org/sermon-structs/dynamic/imagistic-structures/>.

verbally. “Listener images are shaped by experience and memory.”³² An image would need to be carefully chosen at any time for a sermon, but especially so when it comes to pregnancy loss and this occasional sermon. The nature of grief and the tenderness of this pain must be handled delicately. For example, a text that uses baptismal imagery should be avoided. Little ones lost to miscarriage do not have the chance to be baptized. An image of baptism could cause more fear or anxiety in a mother who worries about their lost one. However, as we’ll see in the text below, an image of Jesus with the children can be quite comforting. This could be coupled with the text from John 14 where Jesus promises to take the disciples to be where He is. Where Jesus is, is the best place to be for anyone. This can bring a sense of peace that comes from the Holy Spirit ensuring those who have lost little ones that their little ones are not lost after all but are in the presence of Christ.

Central Image with Single Focus³³: Mark 10:13–16

Rhetorical Unit #1: The Image Introduced

Open with a retelling of the text, paraphrased and in familiar language. Notice the movement in the text itself as people bring children, are pushed away by the disciples, and then brought in by Jesus. This back-and-forth movement could be physically demonstrated by the movement of the preacher.

Rhetorical Unit #2: Hopeful Parents

Move to the hopefulness of the parents in the image. This echoes the hopefulness of the parents sitting in the pews. They long for the blessings of Jesus. But there are barriers. The fear

³² Nadasdy, *Beautiful Sermon*, 119.

³³ Schmitt, “Imagistic Structures: Central Image”.

that can accompany pregnancy loss is the fear that the children are somehow gone.

Rhetorical Unit #3: All Are Welcome with Jesus

Move to the response of Jesus to the disciples' actions. Jesus won't stand for any barriers between Himself and the children. They are most welcome with Him. In fact, Jesus says they are heirs of the Kingdom of God. The Kingdom is theirs. There is a place for all of the children, born and unborn, in the Kingdom of God. They are not lost. They are not gone. They are in the arms of Jesus.

Rhetorical Unit #4: Jesus' Blessed Embrace

Move to the final actions of Jesus. The physical response of Jesus is profound. Not only does He pronounce a blessing, He takes them up in His arms. He embraces the littlest ones. He has a place for all of the children in His Kingdom, even for the unborn.

Conclusion to Chapter Three

The task of preaching with pregnancy loss in mind can be overwhelming. Preparing a sermon that acknowledges the loss and grief of families, validates the loss as deserving of grief, and delivers the compassionate word of Jesus can seem impossible. Lutheran theology is uniquely situated to address the losses as real and deserving of grief. The Theology of the Cross recognizes death and loss as tragic realities and the horrible results of sin in the world. It does not attempt to answer impossible questions or provide saccharine statements that never comfort. It calls death, death and grief, grief. This theological scalpel prepares the hearers' hearts to receive the true comfort of the Gospel. The Theology of the Cross opens the door for the Hidden God, the God not seen. God often feels distant or absent when the crushing weight of sin and its consequences burden us. In the case of pregnancy loss, questions arise in grief about the

whereabouts of God. Often, we go searching for answers where they will not be found. Instead, the Hidden God invites us to find Him where He promises to be: in His Word, in His Church, in His Son, Jesus. He provides a place for those who grieve and whose questions go unanswered. He provides a community around the hurting. The Psalms comfort and console the grieving in the midst of that community. They are full of emotional expression and faithful trust in God even in the most difficult circumstances. The Psalms of lament in particular provide a great depth of emotions and range of expression. Psalm 6 became a theme for the project used both in the liturgy and in the preaching. The groaning and pain visible in Ps. 6 were connected to the grief and sorrow of pregnancy loss. The textual exposition of Ps. 6 guided the development of themes and insights for the preacher. Finally, three different approaches to preaching were offered as ways to communicate the acknowledgement, validation, and care that is needed in pregnancy loss. Each of the examples utilize different parts of Scripture in order to show the flexibility of the structures. Ps. 139 communicates the reality of grief in the presence of God over against the perception of grief in ourselves using a comparison and contrast structure with the theme of displacement. Next, the Four-Pages structure from Scott Wilson was used, guided by the text from Rom. 8:18–26. Finally, the story of Jesus blessing the children from Mark 10 became the single focus in a central image sermon structure. The hope is that the preacher would see the functionality of the structures in view of the different text types.³⁴ Any of these structures can be used in the particular setting of a pregnancy loss memorial.

³⁴ The Psalm is poetic, Romans is didactic prose, and the Gospel is narrative storytelling. A future study of the types of text, coupled with the sermon structure would be very interesting.

CHAPTER FOUR

THE PROJECT DESIGN AND METHODOLOGY

The project attempts to answer the question: How can the church, through liturgy and preaching, address pregnancy loss with compassionate care and provide recognition and validation for those who have experienced such loss? I attended to the effectiveness of recognition, validation, and consolation of participants through formal interviews conducted with those who have experienced pregnancy loss to determine the benefit of the homiletics and liturgy.

Research Design

Population Sampling

I employed purposive and selective participant sampling. The size of the sample of participants was to be a minimum of seven and a maximum of ten purposive samples. My final number of participants was seven. Since the service itself was open to anyone who wanted to attend, the number of those who attended the experimental service and hear the proposed sermon was fifteen. However, those who were part of the actual research and sampling was seven.

The qualities that I sought in my sampling are as follows:

- Members or regular attenders¹ at either Grace Lutheran Church, Eugene, Oregon, or Hope Lutheran Church, Springfield, Oregon.
- Female.
- Minimum of 18 years old, though the event of pregnancy loss may have occurred prior to them reaching 18.

¹ Meaning they attended worship at least twice per month for the previous six months.

- They must have experienced some form of pregnancy loss and be willing to share the story of the event with the researcher.

I selected participants through direct invitation along with announcements² during each of the church services two weeks prior to the proposed experimental service. Participants also volunteered to be part of the research. The sensitive nature of the subject matter made it difficult to know who fulfilled the requirements. The secretive nature of miscarriage prevented me from knowing who had experienced such an event and who had not. Added to the difficulty was the fact that I had only been pastor of Grace Lutheran Church since October of 2018. I was still learning about the members.

I met with each participant individually to obtain informed consent and to explain the intention of the research. They were able at that time opt out of taking part in the active research but still attend the service. None of the seven opted out of the interview after reviewing the informed consent document. All agreed to be digitally recorded, being assured of the confidentiality of the recording and transcript. Any identifiable data was redacted in the transcripts replacing names with [name] and places with [place] or it was blacked out on the printed transcripts.

Implementation

This project was advertised with announcements printed in the weekly bulletin a minimum of two weeks prior to the launch of the project. Verbal announcements were also made in worship services two weeks prior to the launch of the project.

The Seminary and IRB approved consent documents were presented and explained at the

² See Appendix 3 for sample announcement

beginning of each individual interview. At that time, any questions from the participants were addressed.

The qualitative research methods I used included one-on-one interviews. Given the nature of the research, being very personal and emotional, each participant was asked at the beginning of the interview to share their story. The initial question was used to provide space for the individual participant to share the story of their miscarriage(s), stillbirth(s), or other pregnancy losses. I was open to whatever extent the participant was willing to share. I encouraged the participants during the interviews using active listening responses and non-verbal cues such as nods. Alternate questions were asked when the participants reached the end of the main part of their story. The interviews lasted no more than 60 minutes. One participant exceeded this time due to their detailed memory and need to share in depth. The interviews were recorded using digital audio. I was able to use the record feature of my personal smartphone, Google Pixel 6 Pro. A small microphone was connected to the phone and placed in proximity to the participants. No video recording was used.

The service designed for the project was announced two weeks in advance with verbal announcements from the front of the church on the Sundays ahead. One week prior to the service, I placed an announcement on my personal Facebook page as well as on the page dedicated to Grace Lutheran Church. The purpose of the social media post was to raise awareness and serve as a reminder for the special service and as a passive invitation to those outside the church to attend. They would not be included as participants in the wider project but could still attend the service. Within two weeks following the service, which was held on August 20, 2022, at 5pm at Grace Lutheran Church, each participant was interviewed regarding their experience with the service. These second interviews were originally set to be held face-to-face

in the same manner as the first interviews, but time and travel of several of the participants did not allow for that. Instead, each participant was emailed a copy of several follow-up questions and their response was recorded in text rather than in audio. The initial interview questions along with the follow up questions are presented in Appendix 2.

The environment of the interview varied according to the ability and preference of the participant. Five of the seven interviews were conducted in my office located in the building of Grace Lutheran Church. A plain table was set up with a single microphone attached via USB-C to my Google Pixel 6 Pro for recording the interviews. The office is naturally lit with many windows. The participants were given the option to close the blinds if they so desired. None of them chose to do so. One participant required the interview to be held at their home due to their inability to travel to the church. In that case, the interview was conducted at the participant's kitchen table with the same audio recording procedure. While the environment contained several noise issues, the interview had minimal disruptions. The seventh participant was interviewed through email due to travel restrictions associated with the current COVID mandates in our community.

All the data was collected in interview form and recorded on my computer. After the interview, the data was immediately transferred to a secure and encrypted flash drive. After all the interviews were transcribed, the electronic data was erased from my computer but is kept secure on the flash drive.

Data collected through interviews, documents, and other artifacts will be held in confidence. Electronic data is stored on a secure, encrypted flash drive that is password protected. Paper forms or other artifacts are secured in a file cabinet located in the office of the researcher. If, at any time, a participant wishes to have their data stricken from the record, all

efforts will be made to permanently erase said data.

For transcription of the interviews into readable texts, I used the recording/transcribing feature on my smartphone. Google uses a direct transcribe feature that employs a learning AI in order to maintain accuracy. Upon receiving the transcripts, I reviewed them for accuracy and found them to be easily followed with a minimum of errors. I will follow the IRB process as provided by the Seminary to maintain confidentiality and security of all material recorded and written for the project.

Methodological Approach

I followed the structure of the Action Research Methodology as described in *The Action Research Dissertation*.³ As the work of the MAP in the current Doctor of Ministry program involves research in the lived experience of a particular congregation in a particular setting, I was not an outside observer.⁴ I am an insider doing active research in the lives of the people whom I serve as pastor. Action research provides the best approach to research design. With the added value of improving the lives of the people involved in the research, there is a practical, real-world benefit immediately available to the participants in the research including myself.

Another aspect of Action Research that is beneficial for this MAP is that some information has already been gathered which generated the idea for the research in the first place. In October of 2020, my daughter had a miscarriage early in her first pregnancy. When the people of the congregation heard what had happened, several people approached me to share part of their own experiences. What I perceived was a great need for recognition and validation of that loss in the

³ Kathryn Herr and Gary L. Anderson, *The Action Research Dissertation: A Guide for Students and Faculty*, 2nd ed. (Los Angeles: Sage, 2015).

⁴ I will note that as a male, I did consider that I would be outside of the lived experience of my participants due to the fact that I cannot/have not experienced a miscarriage myself.

church itself. Something else needed to be done publicly to acknowledge the loss and provide consolation and comfort. This is not an idea about contributing to the general database of information or the world of academia. This is something tangible, practical, and hopefully beneficial for real people in a real situation.

Research Methodology

Due to the deeply emotional character of the subject of pregnancy loss, qualitative research methodologies such as personal interviews and testimonials would yield the clearest information regarding the lived experience of the participants. Such research relies heavily on the active listening skills of the researcher and the ability to help those who are hurting express their thoughts and feelings. Likewise, the discussion in society regarding such loss has been limited and thus, there are no satisfactory scripts⁵ to use in these circumstances. Through the interview process and the subsequent worship experience, qualitative methods will yield the best results.

Qualitative methods such as interviewing also allow for the researcher to listen for themes in the testimonies and interpret the experiences of those being interviewed. With multiple interviews, the researcher can identify connections and threads of similarity among the stories of those with like experiences. This would allow me the ability to better attend to the emotional and spiritual benefits associated with the project.

As the interviews were conducted and the information was gathered, I used methods of interpretation associated with grounded theory development.⁶ Interviews and action research are decidedly more inductive than deductive and are useful for conceptual thinking rather than

⁵ Scripts are common, understood methods of addressing the loss of life. This is outlined more directly in Chapter 2 of this MAP.

⁶ Khan, Shahid, "Qualitative Research Method: Grounded Theory," *International Journal of Business and Management* 9, no.11 (October 2014): 224. <https://doi.org/10.5539/ijbm.v9n11p224>.

theoretical testing. This method seeks to gather evidence in the form of qualitative research and construct conceptual theories as the evidence leads. In the case of this project, the interviews regarding the lived experience of the participants along with the research done in the literature review in Chapter 2 allowed me to develop theories and practice regarding the need for recognition, validation, and comfort for those who have experienced pregnancy loss. If I had entered into the project with preconceived notions of emotional needs or allowed my personal experience alone to guide my theories and project, I would not have had as complete a picture. The project would not have had value or validation. This is not to say that I did not already have some assumptions or theories in mind, but I chose to allow the research to shape the project rather than attempting to operate only with my personal theories.

Assumptions, Limitations and Role of Researcher

In action research when the researcher is an insider, there are certain assumptions that need to be addressed. A major assumption I am making in attempting this research is that most women who have experienced pregnancy loss will want to talk about their experience and would benefit from recognition and validation of their specific loss. I also assume that those who participate in the research hold a view of life that begins in the womb, whether at conception or sometime later, and that children are desirable and gifts from God.

There are indeed certain limitations that need to be addressed in doing research of this scope and significance. One such limitation for this project is that I will be focusing on the experience of the women who have lost children in pregnancy, but not the experience of the fathers. Men have a much different perspective on pregnancy loss in their families and are deserving of their own research and study. Another such limitation is that I will be necessarily focusing on women in the church and in a Christian framework. While pregnancy loss impacts

all women regardless of their faith, I cannot fully address the experience of all women. Another limitation is the changeable and deeply personal nature of grief. Everyone experiences grief differently even in circumstances that are quite similar. Time is also a limitation. A longitudinal study of grief would likely provide a much more thorough image of the experience. Due to the time sensitive nature of the project, the study will provide a snapshot rather than a full panorama. My positionality for this project falls into the “insider in collaboration with other insiders.”⁷ As the pastor of Grace, I am on the inside of the congregation, and I will be working with others in the congregation. The goal is to not only expand the knowledge base of homiletics and liturgy, but also to improve the practices of recognition, validation, and consolation of those who have suffered pregnancy loss of any kind. The benefit to the participants can be clearly seen. There is also a tangible benefit to the wider church that can result from this type of collaborative research. As mentioned above, my own daughter had a miscarriage recently. This may prove to be a catalyst to my research but could also color my interpretation of the research. As the pastor and as one who has watched the grief associated with miscarriage, I am in a position to empathize with the participants in the research. With that in mind, it may prove difficult to remain objective when conducting interviews.

⁷ Herr and Anderson, *Action Research Dissertation*, 40.

CHAPTER FIVE

PRESENTATION AND EVALUATION OF THE DATA

At this point in the project, the interviews have been conducted, the service has been held, and the follow-up conversations with the participants are completed. What remains is the process of data analysis and interpretation. It may be helpful to remind ourselves of the qualifications for participant selection. Participants must be women who are members or regular attendees of either Grace Lutheran Church or Hope Lutheran Church. They must have experienced a pregnancy loss at some point in their past. They must be a minimum of eighteen years old although the pregnancy loss may have occurred before reaching that age. They must be willing to share their experiences with the researcher and be digitally recorded. They must be willing to attend a special service designed for the purposes of this project and give their feedback regarding their experience. All of the participants chosen for this project met each of the parameters.

In order to maintain anonymity and prevent any reidentification of the participants, I cannot go into detail regarding the individuals. However, some general statements are necessary for data analysis. The participants ranged in age from early eighties to late twenties. Two of the seven participants had experienced multiple pregnancy losses. All of the participants had been married at the time of their pregnancies. All of the participants had some connection to a church at the time of the pregnancy loss, though not all of them were Lutheran.¹

A bird's eye view of the data reveals many similarities between the current research as shown in Chapter 2 of this study and the participants from Grace Lutheran Church. Each individual had unique experiences and yet expressed similar reactions and emotions connected to them. The feeling that something was not quite right with the pregnancy or that the connection

¹ For further information regarding each participant, please see Appendix 5.

between mother and child was off was shared in the literature and in the interviews. Another reaction would be the sense of being alone in the struggle or experience. This was a profound similarity considering the data regarding the frequency of pregnancy loss as shown in Chapters 1 and 2. How could people feel so alone in an experience that so many others have shared? A third similarity that emerged was the confused sense of grief associated with this type of loss. This was also discussed in Chapters 2 and 3. Without an accepted model of grief to follow, the confusion in grief was extraordinary. These three themes will be laid out throughout this chapter: disconnection, a sense of being alone, and confusion.

Data Analyses

Disconnection

Psalm 10:1

Why, O Lord, do you stand far away?
Why do you hide yourself in times of trouble?

Participant 4: “And I began to have signs that (things) were not right.” Nearly all of the participants discussed at some point feeling as though things were not quite going to plan. It was a gut feeling or something intuitive. Two of the participants recalled feeling that everything was normal until the ultrasound revealed a lack of heartbeat or a weak heartbeat for the baby. Then, after consulting with the doctor, some of the participants describe a numbness or feeling disconnected from reality.

Participant 3: “I was like expecting it, but not expecting it at the same time.” How is one to feel when the expectation was the growth of a healthy baby and now there is an emotional attachment, but the reality is that the baby will not be born at full term or alive? Disconnected from their thoughts, their emotions, their babies, and from others around them best describes the

expressions of the participants.

Orenstein: “The connection I felt was unanticipated, electric: as if a frail, silvery thread ran between us...Then, in my eighth week, walking to the subway, I felt it snap. Just like that. It’s over, I thought.”² Peggy Orenstein describes the attachment, the connection as “a frail, silvery thread” that later snaps. A connection made that is no longer there.

A Sense of Being Alone

Psalm 22:11

Be not far from me,
for trouble is near,
and there is none to help.

Participant 2: At a bridal shower... “Nobody mentioned that I had been pregnant too...I was sitting there, you know, trying not to cry.” The disconnection felt by the participant led to a feeling of being alone and forgotten. This sense of being alone is compounded by the fact that people do not know how to address the issue of miscarriage in a healthy way. The lack of scripts and rituals available leave people at a loss for what to say. The sense of being alone was expressed by all of the participants at some point.

Participant 5: “I don’t remember now that anybody from the church knew about it. Because I mean sometimes, you’re just don’t want to talk about it.” This participant did not have the words herself to share with others so then others could not respond. The sense of being alone was made worse by the participant herself because she had no way to bring up the subject to others, even others within the church.

Participant 6: “I’ll just tell you a piece of the loneliness I felt...I just felt like I was in a

² Orenstein, *Essays on Girls*, 173.

bubble. I just remember being in this group of people that are just talking and laughing and having fun and I'm thinking, but I'm hurting." The participants expressed the feeling of being alone even when they were not physically by themselves. It was as if life moved on without them and they were no longer connected to others because of their grief.

Zucker: "We're conditioned to not share these stories. We've become accustomed to living parallel to one another, oblivious of the pain we're all trying to overcome."³

Confusion

Psalm 6:1–3

O Lord, rebuke me not in your anger,
nor discipline me in your wrath.
Be gracious to me, O Lord, for I am languishing;
heal me, O Lord, for my bones are troubled.
My soul also is greatly troubled.
But you, O Lord—how long?

Participant 4: "There was nothing to bury. There was nothing to see. There was nothing to there, just and then you sit around and worry."

Participant 3: "You don't know how you're supposed to feel...mad and frustrated and sad, all these emotions of it...so it's like a lot of weird emotions." "But when you go through you're like I didn't feel like there was the right way to feel or anything. I just like, didn't know what to feel and when the feelings came and like, I don't know how to process them."

Garbes: "The sadness and anxiety that follow may have intertwined physiological and emotional roots that are hard to detangle."⁴

Orenstein: "But for me, there is another uncomfortable truth: my own pro-abortion-rights

³ Zucker, *I Had a Miscarriage*, 32.

⁴ Garbes, *Like a Mother*, 85.

politics defy me...at direct odds with everything I believe about when life begins...At the same time, I can't deny that it was something. How can I mourn what I don't believe existed?"⁵

Expected Findings

The first book I read once I decided to focus my research on pregnancy loss was Jessica Berger Gross's *About What Was Lost*.⁶ It is a collection of essays on miscarriage. After reading those accounts, I was determined to create a project that would address the experiences of women who had lost children. What I expected to hear from the participants in the research was an echo of the essays from Gross's book. That is what I heard.

In speaking with the participants and listening to their stories of grief and loss, I was amazed at the parallels between them and the essayists. The sense of disconnection was widespread. This disconnection ranged from feeling adrift from family and friends to the tragic sense of loss in the midst of the miscarriage itself. Then, the sense of being alone was shared. Most of the participants, along with many of the writers expressed the feeling of being alone in their suffering, that no one else had gone through what they were going through. This is part of the lack of the conversation addressed in Chapters 2 and 3 of this work. The confusion of grief, similar to a "fog of war" feeling, was common. Sadness, anger, depression, along with guilt and shame accompanied many of the stories. The disenfranchised grief and the feeling that they didn't really deserve to grieve was heartbreaking.

While there were no surprises in the findings, it is important to note the common thread of

⁵ Orenstein, *Essays on Girls*, 175. Orenstein wasn't the only pro-choice advocate I included in my research. In fact, several authors talked about how their ideas about the option of abortion was challenged when they had a miscarriage of their own. How could they use the dehumanizing language of abortion when the connection they felt with their own pregnancies was so much more? It is an interesting challenge for today.

⁶ Jessica Berger Gross, *About What Was Lost: 20 Writers on Miscarriage, Healing, and Hope* (New York: Plume), 2007.

this type of grief and that lack of response from society. For the purposes of this project, the lack of response from the church expressed by many of the participants was not unexpected. When the resources available to the pastor are lacking and training in counseling is sparse, one cannot expect the church to have a strong showing. However, the prayer is that such a struggle to acknowledge and validate the losses of so many women in the congregations will begin to ease as the compassionate care and love of Jesus makes its way into the conversation.

CHAPTER SIX

SUMMARY

How can the church, through liturgy and preaching, address pregnancy loss with compassionate care and provide recognition and validation for those who have experienced such loss?

This was the driving question behind the project. Through research, experimentation, and qualitative analysis there is an opportunity to be met in the church and the church can meet it. The current gap in resources and understanding of pregnancy loss for pastors does not have to persist. There are scripts available for conversation around the topic and openings can be created to allow the sharing of stories and experiences. I feel comfortable in asserting that in nearly every congregation there is someone who has experienced pregnancy loss and has not had the opportunity to share their story, to be validated and recognized for their grief. Thus, the care that they may have received has most likely been superficial. But this doesn't have to be. The church is equipped with the Word of God which speaks the comforting Gospel of Jesus. The church is indeed a place for the hurting, especially those who hurt in secret because they think they are alone in their suffering.

After my daughter's miscarriage two years ago, I realized my own personal lack of knowledge and experience with pregnancy loss. The statistics of pregnancy loss were astounding. There were more people than anyone would have believed who have been through this experience. No woman should grieve alone. There was no need to grieve alone. Upon sharing the news of my daughter's loss, people spoke tentatively of their own losses. People in the church and people outside the church shared similar experiences and the pain that accompanied them. One of the most common comments I heard in the initial stages of the project

was that the women had not spoken of their losses. They had not had the opportunity to share their stories publicly or to speak of their grief. This wasn't just in the church but throughout society. Authors like Rachel Lewis¹ and Jessica Zucker² stepped out of the shadow of secrecy about pregnancy loss and created space for others to share. What is surprising is that these two published their books only within the last year! This is not to say that other resources and support had never been available, but the utility of these previous efforts was modest. The world and the church need more.

This project took on the task of creating this space through conversation and through worship in the local congregation. The initial interviews opened up the conversation for some who had not spoken of their losses for some time. What I found was that the narrative process opened up memories and recognized the losses as real. The interview provided a listening ear and a microphone to capture the lived experiences as the participants were remembering. I heard names of babies that were never born and hopes of mothers that did not come to pass. But I also heard of hope in the promise of the resurrection and the sure confidence in the love of God despite the pain and suffering of pregnancy loss.

In his book on the nature of the Gospel, Frederick Buechner speaks of the Gospel as a comedy, a fairy tale, and a tragedy. The first step in Gospel proclamation is to identify the tragedy. It was in attending to the tragedy of their experiences that the participants heard the Good News spoken. "As much as anything else, it is their experience of the absence of God that has brought them there in search of his presence."³ This project provided an opportunity for

¹ Rachel Lewis founded a support group called "Brave Mamas" which is an online community providing space for the grieving mothers to share their stories.

² Jessica Zucker started a trending hashtag on social media #IHadaMiscarriage which created a groundswell of support and sharing for mothers who had similar experiences.

³ Frederick Buechner, *Telling the Truth: The Gospel as Tragedy, Comedy & Fairy Tale* (New York: Harper

those who had experienced the Hidden God to hear of the present Christ. In the worship setting that was designed for the project there were tangible rituals as well as spoken Gospel to engage the participants in the presence of Christ with one another. The worship setting was designed to communicate the recognition and validation that their losses were real and counted for something. Their losses could be publicly recognized as losses deserving of grief and time spent mourning. The names of the children were written in a book that will be preserved for future times. For some, this was the first time they had ever written the name of their child for others to see. The worship setting provided a community for those who grieve so they knew that they were not alone in their grief. People of the congregation participated in worship including those who had not lost children themselves. They were there to show their support and love for those who had. It was the body of Christ assembled to comfort those who had experienced these profound losses with the comfort of Christ.

God's peace and a place for those whom He loves was proclaimed through the prayers, the Psalms, and the preaching. I recognized through research and interviews that the anguished hearts of those who had experienced pregnancy loss needed to hear that the church was a place for them and that God, in Christ, had created this place for them. Guided by the Holy Spirit, they were led to share their stories and embrace the place that Christ had made. The themes identified in the research were a disconnection between the grieving and those around them, a sense of being alone, and a confusion of emotions associated with the grief. Because the research methodology was qualitative and grounded in theory, it allowed for the modification of the experimental service to meet the needs of the participants. Thus, the liturgy in the context of a specific congregation with even more specific participants could be crafted and the preaching

& Row, 1977), 40.

more directed toward their experiences.

The effect of the research and my interactions with the participants was profound in two ways. First, I realized my limitations as a pastor with regard to absorbing the sheer volume of sadness. While my involvement with the Doctor of Ministry began in 2016, it wasn't until the last two years that I embraced the specific topic. With that came a considerable amount of time and energy spent in the darkness of grief and the emotional upheaval of pregnancy loss. In fact, one of the participants lost a child later in pregnancy while I was navigating the topic. As her pastor, I was involved in ministering to her and her husband while surrounded by other research. It could be called on-the-job training or active participant research as an insider/outsider on the inside.

Beyond the project, the research done here could be applicable in any congregation in any setting. The liturgy developed here could be adapted and contextualized in a variety of ways. My hope is that a congregation or pastor who is looking for a way to recognize, validate, and provide compassionate care for those who are grieving a pregnancy loss could turn to the liturgy and sermon helps. As was mentioned in the introduction, the gap in resources does not mean that pastors and others in the church have not adequately ministered to those grieving the loss of children. Many pastors are wonderful at speaking the Gospel of grace and comfort in the midst of extraordinary circumstances. I appreciate the care that others have offered to my own daughter in her grief. The outcome of this project and the driving question are by no means judgements as to the care and compassion of today's church and her pastors. It is a resource to be offered. It is a tool to be employed in order to recognize, validate, and compassionately care for those who are hurting. It is my prayer that it may help someone in their time of need.

APPENDIX ONE

Pregnancy Loss Memorial Liturgy

771 Be Still, My Soul, before the Lord

Invocation

P In the name of Jesus Christ, our Savior and Lord, our comfort, our hope, and our friend.

C Amen.

Pronouncement of God's Tender Mercy and Promise

Blessed Jesus, as you comforted Mary and Martha when Lazarus died with the promise of the resurrection, so comfort us now with the same promise. Our hearts are broken and many of us have carried this burden for a long time. Hear us as we mourn, pray, and commend our little ones to you, our tender shepherd, trusting in your mercy. Amen.

Reading

Psalm 6:1-9

- ¹O LORD, rebuke me not in your anger,
nor discipline me in your wrath.
²Be gracious to me, O LORD, for I am languishing;
heal me, O LORD, for my bones are troubled.
³My soul also is greatly troubled.
But you, O LORD— how long?
⁴Turn, O LORD, deliver my life;
save me for the sake of your steadfast love.
⁵For in death there is no remembrance of you;
in Sheol who will give you praise?
⁶I am weary with my moaning;
every night I flood my bed with tears;
I drench my couch with my weeping.
⁷My eye wastes away because of grief;
it grows weak because of all my foes.

Rite of Remembrance- *(in silence) Each person is invited to light a small candle on the table in remembrance of their children.*

Prayer

Jesus Christ, you are the light of the world, the light no darkness can overcome. As we come together in faith, be with us now in our time of need. Let your light scatter our darkness and shine in our hearts. May these lights remind us of your presence with all our loved ones and remind us of your word that lights our path to life everlasting. Amen.

Proclamation of the Lord's Presence

Matthew 18:20

Jesus said in Matthew 18, "For where two or three are gathered in my name, there am I among them." Jesus Christ is among us.

Reading

Psalm 139:1-18, 23-24

- ¹O LORD, you have searched me and known me!
²You know when I sit down and when I rise up;
you discern my thoughts from afar.
³You search out my path and my lying down
and are acquainted with all my ways.
⁴Even before a word is on my tongue,
behold, O LORD, you know it altogether.
⁵You hem me in, behind and before,
and lay your hand upon me.
⁶Such knowledge is too wonderful for me;
it is high; I cannot attain it.
⁷Where shall I go from your Spirit?
Or where shall I flee from your presence?
⁸If I ascend to heaven, you are there!
If I make my bed in Sheol, you are there!
⁹If I take the wings of the morning
and dwell in the uttermost parts of the sea,
¹⁰even there your hand shall lead me,
and your right hand shall hold me.
¹¹If I say, "Surely the darkness shall cover me,
and the light about me be night,"
¹²even the darkness is not dark to you;
the night is bright as the day,
for darkness is as light with you.
¹³For you formed my inward parts;
you knitted me together in my mother's womb.
¹⁴I praise you, for I am fearfully and wonderfully made.
Wonderful are your works;
my soul knows it very well.
¹⁵My frame was not hidden from you,
when I was being made in secret,
intricately woven in the depths of the earth.
¹⁶Your eyes saw my unformed substance;
in your book were written, every one of them,
the days that were formed for me,
when as yet there were none of them.
¹⁷How precious to me are your thoughts, O God!
How vast is the sum of them!
¹⁸If I would count them, they are more than the sand.
I awake, and I am still with you.
²³Search me, O God, and know my heart!
Try me and know my thoughts!
²⁴And see if there be any grievous way in me,
and lead me in the way everlasting!

Rite of Remembrance- *Each person is invited to write the name of their child in the book. If the child was unnamed, they may write a word of special importance to them.*

Prayer

Precious Jesus, we believe that our names are written in the Lamb's Book of Life. We believe that our names are inscribed on the palms of your hands. We believe that your name has been placed upon us. May these so named here be with you always through your divine love and grace. Amen.

Proclamation of A Place for All

Psalm 84:1-3

How lovely is your dwelling place, O Lord of hosts. My soul longs, yes, faints for the courts of the Lord; my heart and flesh sing for joy to the living God. Even the sparrow finds a home, and the swallow a nest for herself, where she may lay her young at your altars, my King and God.

Homily

649 Blest Be the Tie That Binds

- 1 Blest be the tie that binds
 Our hearts in Christian love;
 The fellowship of kindred minds
 Is like to that above.

- 2 Before our Father's throne
 We pour our ardent prayers;
 Our fears, our hopes, our aims are one,
 Our comforts and our cares.

- 3 We share our mutual woes,
 Our mutual burdens bear,
 And often for each other flows
 The sympathizing tear.

- 4 When here our pathways part,
 We suffer bitter pain;
 Yet, one in Christ and one in heart,
 We hope to meet again.

- 5 From sorrow, toil, and pain,
 And sin we shall be free
 And perfect love and friendship reign
 Through all eternity.

Text: John Fawcett, 1740-1817, alt.
Text: Public domain

Rite of Remembrance- *Each person is invited to hold the hands of those around them.*

Prayer

Lord Jesus, You gather the lambs of Your flock into your loving arms and bring them home. Comfort us and all who mourn with the promise of the resurrection to come. Help us to bear this burden and sorrow together as the church which is Your body. Give us all strength for the days ahead that, through faith, we may enjoy peace unto life everlasting. Amen.

Proclamation of Hope

Isaiah 60:4-5

Lift up your eyes all around, and see; they all gather together, they come to you; your sons shall come from afar, and your daughters shall be carried on the hip. Then you shall see and be radiant. Your heart shall thrill and exult, because the abundance of the sea shall be turned to you, the wealth of the nations shall come to you.

Blessing & Benediction

Romans 15:13

May the God of hope fill you with all the joy and peace in believing, so that by the power of the Holy Spirit, you may abound in hope.

The Lord bless you and keep you.

The Lord make His face shine on you and be gracious to you.

The Lord look upon you with favor and give you peace. Amen.

718 Jesus, Lead Thou On

- 1 Jesus, lead Thou on
Till our rest is won;
And although the way be cheerless,
We will follow calm and fearless.
Guide us by Thy hand
To our fatherland.
- 2 If the way be drear,
If the foe be near,
Let not faithless fears o'ertake us;
Let not faith and hope forsake us;
For through many_a woe
To our home we go.
- 3 When we seek relief
From a long-felt grief,
When temptations come alluring,
Make us patient and enduring.
Show us that bright shore
Where we weep no more.
- 4 Jesus, lead Thou on
Till our rest is won.

Heav'nly leader, still direct us,
Still support, console, protect us,
Till we safely stand
In our fatherland.

Text: Nicolaus Ludwig von Zinzendorf, 1700–60; tr. Jane L. Borthwick, 1813–97, alt.
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Brief Explanation and Notes Concerning the Pregnancy Loss Memorial Liturgy

Reason for the service- A loss of any type is accompanied by grief over that loss and the subsequent changes and challenges that arise. This is especially true when it comes to the loss of life. While the loss of a loved one who has lived to a ripe old age will be followed by grief, there is nothing unusual or shocking about it. There are plenty of resources and a tried-and-true funeral service that can be performed. In fact, there is a pattern to this process. However, when it comes to pre-natal loss in the cases of miscarriage, stillbirth, or even an abortion, there exists no specific pattern or script to follow. Even though according to the numbers, about 1 in 5 pregnancies end in such a loss the church has not developed a rite or ritual to aid in the process of grief. Yes, there are some prayers that are specific to these events, but there is no formal ritual that can be included. Not only has the church stumbled through these times of loss, but those also who have personally suffered have been left to stumble along. This particular service will serve as a blueprint for others as a more specific ritual is needed. This is not a sacrament nor a service in which the sacraments should be administered. Therefore, there is a certain amount of creative freedom that can be exercised in tailoring this service.

How often- At first glance, this service could be done as often as needed. When such a loss occurs, the community can gather to support and comfort the grieving. It is perhaps better done as a yearly service. Choose a time in the church, outside of Lent, when time can be set aside and marked for the occasion.

Length of service- The service should run no longer than 30-45 minutes. The serious nature of the service can become overly emotional for some. Good pastoral practice would guard against a lengthy service.

Music- Music has a very cathartic quality. Its inclusion in this service can be soothing to an anguished heart. Congregational singing also has the quality of lifting up the voice while the grieving may stay quiet.

The Service Parts and Explanation

Opening Hymn- a hymn should be chosen that is focused on the grace and comfort of Christ and doesn't dwell too long on the Law of God and Sin. As those present have been experiencing the Law directly through their grief and loss, they needn't be reminded of that.

Invocation- obviously this is not the Triune Invocation that we are used to. Again, the focus of this service is on comfort and to use an invocation that mentions the qualities of God, of Jesus, or of the Holy Spirit is helpful in guiding people in the process of grief.

Opening Collect or Pronouncement of the Promise of the Resurrection- as a collect does, this one maintains the focus of the service and includes those gathered for a particular reason.

First Reading- Here is where the service can be tailored. I found the Psalms to be very beneficial in expressing difficult emotions. The range of emotion offered in the Psalms can encompass much of what the grieving may not be able to express. This allows for the hearts of those present to echo what they feel in the midst of Scripture. However, if a particular Epistle of Paul or Gospel reading is more appropriate to the congregation, then they should be used.

Rite of Remembrance. Often in grief, having a tangible practice or motion can enable some to make meaning from their emotions and loss. Here the candles symbolize those who are remembered. The candles remain lit throughout the service and each candle would be lit by the individual. The candle should be a votive size, not a tall taper. If the candle is in a glass holder, a

label could be affixed to the glass with the date and occasion written on it and the participant could take the candle with them as a remembrance.

Prayer- This is adapted from the Evening Prayer Service in the LSB along with The Holden Evening Prayer Service. This serves as a conclusion to the first symbolic action and reminder of the light that shines in the darkness, Jesus Christ.

Proclamation Verse- Using this verse from Matt. 18, we are reassured of the presence of Christ as we gather in His name.

Second Reading- Again, I chose the Psalms because of their ability to express difficult emotions. Here in Ps. 139, the depth of the presence of God is seen and the promise that there is nowhere we can be where God cannot. For those who have lost little ones, this is reassuring God has been with the child even if Baptism was not possible, that they were known by God from the very beginning.

Rite of Remembrance- The writing of names. In a register-type book, the names of the little ones can be written. This book should be kept at the church along with the other official records, such as baptisms, weddings, confirmations, and funerals.

Prayer- a prayer reminding us that no one is ever forgotten by God. The image of names being written are used a few times in the Scriptures notably in Luke 10:20 and Rev. 13:8. This prayer also expresses the power of a name to God.

Proclamation- Here Ps. 84 is used to evoke an image that even these who died before they could be born have a place in the Kingdom of God. As swallows and sparrows have places, so do all of the children of God.

Homily- (see Chapter 3 and Sermon Structures)

Hymn- Again, a hymn of comfort and trust would be proper. The hymn should be

comforting, not sullen and dark as to avoid worsening the grief some may be feeling. Also, this hymn includes the theme of connection and togetherness. This may aid some who feel isolated or alone in their grief.

Rite of Remembrance- Holding hands while praying. To this point, the actions have been done by individuals for themselves. Here, the walls of isolation are removed and connection between fellow human beings is established. No one should be forced or coerced into holding hands, only offered and invited. Some may still not be ready to do so. As pedestrian as holding hands may seem, to some it is an act of intimacy that may be too much to handle.

Prayer- while holding hands, the prayer can be said in unison or by the pastor if needed. The prayer expresses the connection between one another and Jesus. Also include a request for strength to meet the days ahead.

Proclamation- Using Isa. 60, the hope of better days ahead is expressed. The promise of Scripture that we will one day see our loved ones again, even these littlest ones can be comforting and uplifting.

Blessing and Benediction- like any of our services, it is proper to end with a blessing and/or benediction. Here, the words of Paul from Rom. 15 focus on the hope, peace, and joy that is ours through the Holy Spirit. These are not empty words or platitudes, but blessings from God. The standard Aaronic benediction is used since it is the way that God places His name on His people and assures them of the continuing presence of Jesus.

Hymn- This hymn should be forward looking, but not blindly optimistic. We're not here to say that all grief should now be over and it's time to move on. No, we are here to say that we know there will be rough times ahead, but with Jesus and with His church, we are held in comfort and hope.

APPENDIX TWO

Qualitative Research Questions

To be used to encourage the interviewees to share their lived experience of pregnancy loss.

1. Please share with me your experience of pregnancy loss.
2. What was life like for you leading up to the loss?
3. How were people responding to the news of your pregnancy, if you had shared? If you hadn't shared yet, why hadn't you?
4. How did people respond when you told them of the loss? Were any of their responses particularly meaningful for you? If you didn't tell people of the loss, why not?
5. Was there a particular response from your church or church family at the time? Was it helpful and healing?
6. What was your connection to God like at the time? How did the pregnancy loss effect that connection?
7. Do you recall any particular scriptures, prayers, or hymns that were meaningful for you at the time? How about since?
8. Did you do anything to mark the event or the anniversary of the loss? Do you still mark the anniversary today?
9. How do you feel after sharing the story with me? Do you notice any difference in how you view the loss after sharing the story?

APPENDIX THREE

Sample Bulletin Announcement

Pastor Joe's Project on Grief and Pregnancy Loss- I will be conducting the experiential part of my project this summer. It consists of an interview, a worship experience, and a post-interview. I would like to talk with 7-10 women in the congregation who have experienced a pregnancy loss, including miscarriage, multiple miscarriages, stillbirth, or abortion and are willing to share their experience. All information gained will be for the use of my project and kept confidential. All are invited to participate in the worship service which will be conducted on ___TBA___ evening, June/July ___TBA___ 2022, at ___TBA___pm. After the worship service, I will contact those whom I initially interviewed to hear about their experiences during the service. The hope is that through our efforts, we can develop a more open recognition, validation, and support for those who have experienced such losses. And perhaps, at the end, we'll have something to share with other worshipping communities around the country. Contact Pastor Joe at his Seminary email, baumgartenj@csl.edu or on his cell phone @ 907-687-1189.

APPENDIX FOUR

Sample Sermon

This is an occasional sermon written to accompany the service in memorial of little ones lost during or immediately following pregnancy. It is loosely based on Ps. 6, Ps. 139, and John 14:1–3. The structure is poetic and lyrical in nature with the repeated phrase, “There is a place.” The emotional expression of lament is identified in the recognition of mourning, grief, and pain. The sermon works with Nieman and Rogers frame of displacement and Doka’s disenfranchised grief and overcomes those struggles with the promise that Jesus has a place for the hearers whose mourning is valid. The sermon includes the hope of the resurrection to come where we will see Jesus face to face along with our little ones.

As a preacher, I have found this poetic and lyrical structure to be quite effective in proclaiming the promises of God in the midst of suffering and mourning. A repeated phrase, driven by the Gospel of Christ, holds the sermon together and provides a hook for the hearer to hold onto. Part of this project was to provide recognition, validation, and compassionate care for those who had experienced pregnancy loss. This sermon recognizes the loss of a child, validates the grief as substantial, and cares for the hearer with the comfort of Jesus.

There is a place for you here.

I know that sounds like an obvious thing to say, given that this particular service is special and set aside.

There is a place for you here.

This is the place for those who are hurting, even if it has been a long, long time.

This is the place for those who mourn. It is for those who, as the Psalmist says, cause their

bed to swim in their tears and can barely catch their breath from sighing.

This is the place for those who feel as though they are missing something. Those whose smile always seems to be qualified with grief right behind their teeth.

This is the place where tears, sadness, yes, even anger, can be expressed to a God who hears us, whose ears are tuned to the cries of His children.

This is the place where our Jesus sits down beside us, puts his arm around us, and bows his head with us.

This is the place where, together, we come into the presence of God who knows us better than we know ourselves, who loves us more than we love ourselves, who created, formed, and shaped us, and cares for us better than we can care for ourselves.

Look around you. This is the place for you.

I am not saying that this place will fix all your problems, will calm all your fears, will make you feel carefree and wonderful. Because we know that it doesn't work that way.

What I am saying to you is that God is here for you, that Jesus is here for you, that the Holy Spirit is here for you, and that the body of Christ gathered together is here for you.

Hear the words of the Psalmist in Ps. 139- talking to God, "You hem me in, behind and before, and lay your hand upon me." Sometimes that hand is heavy. The heavy hand of grief sits upon us and covers us in darkness.

But listen, even in the darkness, which is not darkness to the God of all creation, even in our darkness, God's hand leads us through the valley of the shadow of death and holds us as our knees weaken and our breath shortens.

No, God does not make it all go away. Sometimes we ask him to.

But hear again that this is the place for you.

This won't make it all go away, but it is a place where what you feel, what you see, what you hear, and what you share is shared with Christ and with His people.

This is the place where, together, we hear who we are, who our little ones are, how precious they are in the sight of God and in His heart. Even as our little ones were being knit together, were being formed and shaped, just as we are, they are precious in the sight of God. He holds them close even now.

This is the place where Jesus meets us. Where he promises to us that one day we will all see one another again.

This is the place where we hear of life everlasting, a resurrection of all, and a glorious reunion.

This is the place where we share the peace of God which surpasses all understanding. Where we are seen for who we are, for what we've come through, and for what has been promised to us.

This is the place where we are no longer alone, but together.

This is the place where our wounds are no longer hidden, but seen.

This is the place where our worth is found in Christ and His love for us shown through His body gathered.

There is a place for you.

There is a place for your littlest ones.

It is here, in the heart of God forever and ever, amen.

APPENDIX FIVE

Participant Biographical Sketches

Qualifications for Participation

- A member or regular visitor to Grace Lutheran Church in Eugene, OR or Hope Lutheran Church in Springfield, OR.
- A woman
- Between the ages of 20 and 95
- Someone who has experienced pregnancy loss at some point in your life.
- Willing to share your pregnancy loss story with the researcher.

Seven qualified participants were available for the project

Participant 1

Age: 80

Pregnancy loss occurred: 1962

Married at the time of the pregnancy loss.

Has been divorced for 40+ years, was not sure exactly how long it had been.

Baby had Hyaline Membrane Disease or Respiratory Distress Syndrome¹ which is now a treatable condition but sixty years ago was not as easily remedied.

Baby was born through emergency c-section and lived twelve hours before dying.

Was not allowed to see or hold the baby and was never able to name the baby.

A funeral was held in the chapel of the hospital.

¹ <https://www.stlouischildrens.org/conditions-treatments/hyaline-membrane-disease-hmd-respiratory-distress-syndrome>

Was member of local congregation at the time.

Participant 2

Age: 38

Pregnancy loss occurred: prior to birth of two children

Married for about one year at the time of the miscarriage

Loss was early in pregnancy, between eight and ten weeks

Doctors advised terminating the pregnancy due to underdevelopment

Underwent procedure using vacuum extraction in same manner as abortion

No remains available for burial or funeral

Recalls feelings of guilt and depression

Was a Christian at the time of the miscarriage

Relative gave the baby a name

Participant 3

Age: Late 20's

Pregnancy loss occurred: 2020

Married at the time of the loss and currently married

Loss occurred later in pregnancy, around 20 weeks

Delivered stillborn

Was able to name child

Held small memorial and burial locally

Best able to describe emotional upheaval out of participants.

Hope in the resurrection and seeing the child again is important

Faith plays an important role in grieving and healing

Participant 4

Age: Early 60's

Pregnancy loss occurred:

Married at the time of miscarriage

Loss occurred early on in the pregnancy

No memorial or burial was held

Spoke of fear often in interview

Church had no response to the loss

Participant 5

Age: 70+

Pregnancy loss occurred: 1980

Married at the time of miscarriage

Loss occurred halfway through pregnancy

Faithful Christian

Does not remember a response from the church

Felt as though she had done something wrong to cause the miscarriage

Did have some support from friends who had likewise experienced pregnancy loss

Participant 6

Age: 55+

Pregnancy Loss occurred: 30 years ago

Married at the time of miscarriage

Experienced multiple miscarriages through life

Had one child prior to miscarriage

First miscarriage was at four months

Someone told her she “didn’t want that baby anyway.”

Second miscarriage was at six and a half weeks

Third miscarriage was between 8 and 11 weeks

Had a D&C (Dilation and Curettage) procedure for last miscarriage.

Named first child of miscarriage

Sent out “birth/death” announcements

Spoke of loneliness and isolation along with depression

Christian throughout

Participant 7

Age: 70+

Pregnancy loss occurred: 50+ years ago

Married at the time of miscarriage

Experienced multiple miscarriages

First miscarriage was early in pregnancy

Second miscarriage followed soon after second attempt at pregnancy

Was able to have two children following miscarriage with no issues

Does not remember much consolation from family

Did not tell anyone at the church

Strong faith helped endure

Raised questions of whereabouts of babies lost in pregnancy

Faith in the promise of the resurrection

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