



MISCARRIAGE
ASSOCIATION

The knowledge to help

Communication:

the key to helping people through

Annual Report 2010-2011

**Miscarriage can be a very unhappy,
frightening and lonely experience.**

**The Miscarriage Association acknowledges
the distress associated with pregnancy loss
and strives to make a positive difference
for those it affects.**

We have the knowledge to help.



**MISCARRIAGE
ASSOCIATION**

The knowledge to help

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The Miscarriage Association is a registered charity in England & Wales (1076829) and in Scotland (SC039790)
and a company limited by guarantee, registered in England & Wales, number 3779123

Foreword



In discussions and reflections about last year's work and achievements, 'communication' emerged as a salient theme for the Miscarriage Association Trustees. While the charity has always worked hard to convey information and support in appropriate ways to those affected by miscarriage, recently it has had to think more about the many new means by which we connect with each other.

When I experienced my first pregnancy loss 10 years ago, both a lack of communication, and poor communication compounded my grief. Inappropriate medical-ese language used in hospital, lack of explanations, and well-meant, but clumsy comments from friends and family all contributed to my sense of being misunderstood and alone. Not hearing any words of condolence also stung hard. Of course words always matter, but in times of great distress, perhaps they matter more.

It was the M.A.'s success in offering sympathy, empathy and professionalism that first drew me to becoming involved in its work as a support volunteer, and then Trustee. Now, as a psychotherapist, I realise just how important these qualities are for those struggling in the wake of a loss. I had found an organisation that could be relied on to answer my questions with the best knowledge to hand, and the broadest shoulders to bear my distress.

Since its early days, the M.A. has pioneered new thinking about communication to all those affected by miscarriage. While supporting those in grief and encouraging others to recognise the importance of the losses it can bring, the M.A. has always chosen with great care the words and means to speak to its varied audience. The new motto, 'We have the knowledge to help', also reflects the charity's unique ability to communicate both expertise and sympathy effectively.

But since I first telephoned the M.A., new ways of communicating have become second nature to me. I don't make phone-calls so often anymore. Every day I will send emails, read or publish a tweet or an update from a social networking site – probably from my mobile phone. Information is at the tip of my fingers now.

The Miscarriage Association has changed too, and the imminent launch of the newly branded website, the mushrooming Facebook presence and Twitter profile speak to increasing numbers and in new ways. Its website forum also adds a valued means of support.

Effective communication has long marked the charity's excellence, and continues to do so with these new times and technologies. As a proud member, I welcome the M.A.'s embrace of all ways of communicating and hope you join me in contributing your own experience and expertise.

A handwritten signature in black ink, appearing to read 'Julia Bueno'. The signature is fluid and cursive, with a large initial 'J' and 'B'.

Julia Bueno
Psychotherapist and former Trustee

Support

Miscarriage can be a very shocking and distressing experience. It can also be a lonely time, especially if family and friends don't understand that feelings of loss, grief and anxiety about the future are normal and understandable. Along with our staffed helpline, support from others who have been through something similar can sometimes be the key to getting through these tough times and moving forward.



'The M.A. understood that this wasn't "just a miscarriage" ...I'd lost a baby.'

Amanda Buckenham

'I miscarried in November 1997. I was shocked, numb. I couldn't face how I was feeling and couldn't talk.

I was given a leaflet about the Miscarriage Association, but it was only when my husband found me crying, paracetamol and alcohol in my hands, that he made me call the helpline.

They really listened. They understood that this wasn't "just a miscarriage" but that I'd lost a baby. And they gave me the number of a local support volunteer who was such a help.

In the year it took for me to come to terms with the miscarriage, I did extra shifts as a gynaecology auxiliary nurse, supporting patients after miscarriage and offering them M.A. leaflets. And then in 1999, after a very anxious pregnancy, I had a healthy baby boy.

Three months later I became a telephone support volunteer for the M.A. and later I began leading a miscarriage support group at Hinchingbrooke Hospital under the M.A. umbrella. I joined the hospital's 'Bereavement in Pregnancy' group, then the Maternity Services Liaison Committee (MSLC) where I was asked to represent patients with pregnancy loss. I felt that finally, people were able to see that pregnancy is not always a happy event.

I continued to receive support from the M.A. during a period of infertility and several more miscarriages and went on to have two healthy baby girls, completing my family.

Twelve years on I am still a support volunteer for the M.A.. I'm also Chair of the MSLC and I've won an NHS award for my services to people going through pregnancy loss.

I believe that good communication is the key to making sure people receive the care and support they need after miscarriage. In the NHS, that means listening properly and giving clear information in simple, sensitive language. And in the wider community, it's making sure we talk about miscarriage, so that it stops being a hidden grief.

“When they told me they couldn't find a heartbeat, I think my heart stopped too. I was full of the joys of being pregnant, only to feel I had been hit by a train head on.”

Helping people through:

staffed helpline

- a swift, sympathetic and informed response, five days a week, to over 7,000 letters, calls and e-mails

support volunteers

- 100 telephone contacts and 28 support groups across the UK – all people with personal experience of pregnancy loss
- matched support on 26 specific areas of pregnancy loss (e.g. recurrent miscarriage and ectopic pregnancy)
- an out-of-hours helpline, offering support at evenings and weekends

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- a well-used website – a popular and reputable source of support, information and comfort, with personal reflections and poems
- a support forum – a safe space for sharing feelings and experiences, good news and bad
- a place for remembrance with an electronic forget-me-not meadow; and a link to our Facebook page for instant peer support

accessibility and equality

- all support materials available in large print and on our website
- all staff familiar with RNID's Typetalk service for deaf and speech-impaired callers
- staff and volunteers able to offer support in 10 languages other than English



Information

Those who experience pregnancy loss are often desperate to know why it happened and whether there's anything they can do to reduce the risk next time. Having written information that's accurate, understandable and takes account of feelings as well as facts can make a positive difference.



'I have spent many sleepless nights searching the internet for answers.'

Angie Pollard

Since I first heard those words 'I'm sorry, there's no heartbeat', I've been trying to get my head around things. The hospital gave me the usual 'these things happen' explanation, but that isn't nearly enough when your world is suddenly shattered by the loss of your baby.

I have spent many sleepless nights searching the internet for answers and always found myself back at the Miscarriage Association's leaflets. They are the only organisation that cares enough to explain the medical stuff fully and clearly. That's really important when you're in pieces and have to make a choice between having an operation or medical management after a silent miscarriage.

Unlike the hospital, the M.A. understands the importance of discussing how I might be feeling emotionally too.

They've also been there for the little things that can be really upsetting – like warning you when a film or television storyline features miscarriage. I was getting bombarded with stuff from baby clubs so the M.A. told me about the Baby Mailing Preference Service to help stop this.

When I was diagnosed with antiphospholipid syndrome (APS), I just got a letter from the hospital with no real explanation. I read the M.A.'s leaflet on it so many times that when Ruth asked for quotes to go in the revised leaflet I was happy to help. I really like the way the new version breaks up the medical stuff with quotes of people's thoughts and feelings.

The future is scary when your plans to start a family go wrong. I have lost all three of my babies and had several other major traumas over the last four years. I am so grateful to all the M.A. staff and volunteers for their on-going help through leaflets, phone calls, the support forum and now even Facebook!

Recently I ran a 10k in aid of the M.A.. I'm no athlete (major understatement!) but it was worth it to help them to be there for the next unsuspecting girl like me.

“I did everything I should have – healthy diet, no alcohol or smoking, taking folic acid etc. I know there's no order of how things happen in life, but after doing everything right, it just feels so unfair.”



Helping to answer the questions:

a staffed helpline

- responding to a wide variety of questions on pregnancy loss, providing clear information and clarifying confusion

leaflets

- a range of 29 leaflets on aspects of pregnancy loss; seven in bilingual format and two produced for people with learning or hearing disabilities
- the complete revision of our leaflets to make them clearer and easier to read
- all leaflets available free of charge on our website and available in large print
- 36,500 leaflets sent by request to hospitals, health centres and individuals

miscarriageassociation.org.uk

- a well-used resource
- averaging 19,500 visits and 4,600 leaflet downloads per month during the year
- ranked highly on all major search engines
- a completely new design, content and build for launch in June 2011

research

- active involvement in a range of research studies and a member of the Early Pregnancy Clinical Study Group
- advised on eight research proposals
- served on steering groups for three clinical research trials and provided patient representatives for two research projects

Good practice

The quality of care given to women in hospital and general practice can have a major impact on their experience and their memories of pregnancy loss. But it can be difficult to get it right for everyone. We offer training and consultancy to healthcare professionals and work with key organisations to promote sensitive care for patients who miscarry.



‘There are still times when it is hard to find the right words’ Jan Birrell

My nursing career has spanned over 30 years and has been predominantly focused on women’s health. As a Ward Manager I identified the need to develop a specific service for women experiencing problems in early pregnancy. As a Clinical Nurse Specialist I developed and implemented a nurse-led patient-focused service. The service has

transformed the patient experience and received a Service Modernisation Award from the strategic health authority in 2005.

Even though I have worked within this field for many years, there are still times when it is hard to find the right words to support someone at a very difficult and emotional time. Reactions to loss and grief are extremely individual and we all perceive things differently.

Despite the information and technology available to us, we can’t always give an immediate and definitive diagnosis. This can cause distress to parents and prolong their perception of being in ‘limbo’, waiting to find out if their pregnancy will continue or not.

Early detection of the pregnancy hormone brings its own challenges as you often find the test has gone negative by the time the bleeding starts, which means that a biochemical loss has occurred. Some women find it helpful to think of this as having had a few cells which have tried to develop but then come away as a heavy period, whilst to others this is very much the loss of a baby. Either way they are mourning the loss of their hopes and dreams and they experience and display a wide range of emotions.

It is my normal practice to recommend the Miscarriage Association as they can provide information and support to parents and carers at the time of the loss and afterwards. I think the new leaflets are excellent and I’m also glad they took up my suggestion of providing small business cards for patients who don’t want to walk out of the scanning room carrying a miscarriage leaflet.

I have also found the M.A. to be a valuable resource to support my practice, particularly in caring for couples who have complex issues. Likewise as professionals, we too need support on occasions and it is reassuring to know we can access this service in confidence.

“The session really made me more aware of the emotional side of miscarriage and I will be cascading the information to our outreach team.”

(Sure Start outreach worker)

Encouraging good healthcare practice:

training and awareness

- delivered training to GP trainees, to student midwives and to six groups of Sure Start staff
- wrote the script for a teaching video on breaking bad news, for the RCOG’s online tutorial programme
- exhibited at the UK’s largest Primary Care conference, raising awareness of miscarriage and the M.A. amongst GPs and community healthcare staff

collaboration

- launched a three-year project to improve the care of miscarriage patients, developing collaborative links between local NHS providers and M.A. volunteers
- active executive member of the Association of Early Pregnancy Units
- active links with the RCOG, the Department of Health and other pregnancy/maternity charities

consultancy

- provided peer reviews for two RCOG publications, had a paper accepted for publication in *Primary Care Women’s Health Journal* and advised on a leaflet on state benefits after late miscarriage
- advised a Scottish government working group and two NHS trusts on policy and practice regarding disposal of fetal remains
- advised on the key issues to be included in forthcoming NICE guidelines on pain and bleeding in early pregnancy



“Breaking bad news” tutorial

Awareness

Miscarriage is, sadly, an all-too-common experience, yet it remains something of a taboo and its emotional impact is often unrecognised. The Miscarriage Association works to raise public awareness of the feelings as well as the facts of pregnancy loss, to help people make sense of news stories and to ensure that bereaved parents know where to turn to for help.



‘My personal mission is to talk openly and frankly about our experiences’

Paul Sweet

After an uneventful first pregnancy, we were delighted to find that Sarah was expecting our second child. Everything seemed to be going to plan but at 14 weeks, Sarah’s screening blood test showed a high risk of Edward’s Syndrome.

We took the tough decision to have further screening to confirm the diagnosis, but sadly on that day they could see our baby had no heartbeat.

We were faced with heart-breaking decisions about how to manage the process of miscarriage and felt as if we had entered a world in which we were lost and disorientated. And we had to break the news to our family and friends – many of whom did not really understand the depth of our loss.

With information from the hospital and from the Miscarriage Association, Sarah opted to miscarry naturally and 3 days later, in October 2009, we lost our tiny son.

In the weeks and months that followed, Sarah felt very isolated and alone with her grief. I found it doubly difficult knowing how to communicate with her whilst at the same time coming to grips with my own sense of loss.

I felt I needed to do something positive in a bleak time, and organised a sponsored bike ride, cycling with two colleagues from Horsham to work in London and back – a total of 100 miles. It felt like a good way to remember our baby and I’m delighted that we managed to raise £2,000 for the Miscarriage Association.

I hope that the bike ride also helped to raise awareness of miscarriage, especially amongst the people who sponsored us. I’ve been struck by how much of a taboo subject miscarriage still appears to be, especially given how common it is.

The M.A. reached out to us during a very dark time in our lives and helped enormously. My personal mission is to talk openly and frankly about our experiences, although it’s not always easy and it was often clearly uncomfortable for others to hear. I want to help break the silence, to ensure that other people who lose a baby, know there is help and support out there for them.

Two years on, we are now fortunate enough to be expecting another son, due in October. Delighted and blessed though we are, the pain of losing our other child is still with us. We both feel that there will always be ‘one missing’ from our family.

“I really like the new logo – the way the shapes of the “M” and the “A” are close to each other, almost leaning on each other. ...That links with the warmth and support I associate with the M.A..”

Reaching people:

news & features

- seen by the media as an expert resource for advice, information, comment and case studies
- responded to 108 requests from the broadcast, print and online media for expert information, comment and case studies
- helped by 57 media interviewees who contribute personal reflections and experiences

profile

- drove forward a major project to review and refresh the M.A.’s image and communications; and launched our new brand at UK conference *Health and Wellbeing at Work*, featuring our leaflet on miscarriage and the workplace
- recorded 36 ‘expert’ video clips which feature on parenting website imama.tv
- further developed our online presence with Facebook pages for support and for our London Marathon teams
- continued collaborative work with other baby-loss charities, especially for International Babyloss Awareness Day
- over 120 supporters taking part in a range of fundraising events and raising awareness of the charity as well as funds
- maintained an excellent internet profile, with links from other websites, so that we feature highly on the largest search engines



Abridged accounts

1 April 2010 – 31 March 2011

	General funds £	Designated funds £	Restricted funds £	Total
Income:				
Donations & similar income:				
Membership fees & donations	14,545	-	949	15,494
Government grant	-	-	28,500	28,500
Other donations & grants	54,900	-	1,000	55,900
Branch income	-	-	4,418	4,418
Activities to further the Charity's objects:				
Sales	35,333	-	-	35,333
Training fees	2,090	-	-	2,090
Activities to generate funds:				
Fundraising activities	52,896	-	-	52,896
Sales	2,812	-	-	2,812
Interest received	3,316	-	-	3,316
Total income	165,892	-	34,867	200,759

Expenditure:				
Cost of generating funds:				
Fundraising	31,161	-	70	31,231
Charitable expenditure:				
Service provision	86,535	36,059	16,967	139,561
Governance	37,679	-	990	38,669
Total expenditure	155,375	36,059	18,027	209,461
Net surplus/(deficit)	10,517	(36,059)	16,840	(8,702)

BALANCE SHEET

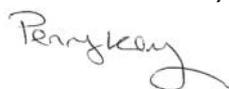
Fixed assets	316
Current assets	207,622
Total liabilities	(10,002)

Net assets	197,936
Represented by:	
Brought forward from 2009/10	206,638
Net surplus/(deficit) 2010/11	(8,702)
Balance carried forward	197,936

This financial statement has been agreed by Mazars LLP as being consistent with the full financial statements for the year ending 31 March 2011. These were prepared in accordance with the Statement of Recommended Practice Accounting by Charities (revised 2005) and receive an unqualified audit opinion.

These summarised accounts may not contain sufficient information to allow for a full understanding of the financial affairs of the charity. For further information, the full annual accounts, the auditor's report on those accounts and the Trustees' annual report should be consulted. Copies of these can be obtained from the Miscarriage Association, 17 Wentworth Terrace, Wakefield WF1 3QW.

The full accounts were approved on 10 September 2011 and have been submitted to the Charity Commission and the Office of the Scottish Charity Regulator.



Signed: Penny Kerry (Chair and HonTreasurer)

Auditors & accountants

Mazars LLP
Mazars House
Gelder Road
Leeds LS27 7JN

Bankers

Cooperative Bank
Providence Street
Wakefield WF1 3BG

CAF Bank
Kings Hill
West Malling
ME19 4TA

Yorkshire Bank
Northgate
Wakefield
WF1 1TA

Reviewing our finances

The Miscarriage Association continued its policy of managing its resources wisely in the year ended 31 March 2011, prioritising the need to maintain high-quality services.

We had anticipated a continuing financial challenge in 2010/11. We were therefore pleased to see overall income increased by 23% although this does reflect the grant income from the Department of Health, which is recorded in restricted funds. Core income saw a modest increase of 7%. Overall expenditure increased by 7%. Restricted funding which was unspent at the year-end was carried forward to 2010/11.

The small but welcome increase in general income was a result of several trends. Despite continuing NHS cutbacks, income from leaflet sales to hospitals began to recover during the year. Donations from members, other individuals and groups increased by 20%, continuing the trend we first noted in 2009 – a very impressive result in these difficult times.

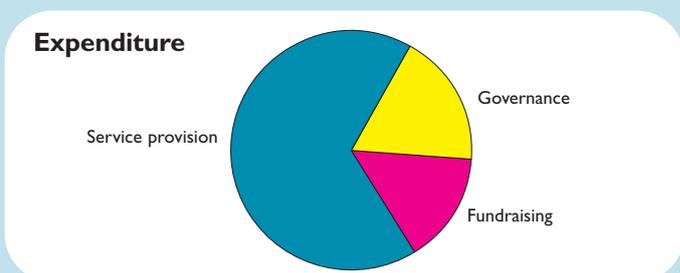
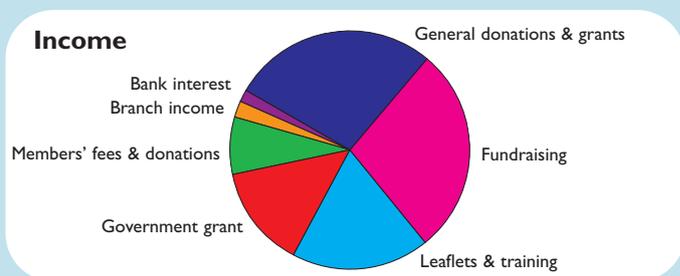
Fundraising income, notably the London Marathon, remained steady, while income from companies and trusts increased slightly. As in 2009/10, we received significant gifts in kind from two corporate partners who assisted us with the re-branding of the Miscarriage Association. Their pro bono contributions helped us to carry through what is normally a very expensive process at a relatively low cost.

Sadly, investment income continued to drop. The combination of continuing low interest rates and fewer funds to invest resulted in a decrease of 23% (£975) in this income stream.

As always, the generously donated services of all of our volunteers enabled us to keep the costs of providing direct charitable support relatively low saving an estimated £56,600 over the year. We greatly appreciate the financial and moral support provided by our donors, members, supporters and friends. We are fortunate too in the dedication of staff and

Trustees who manage the Association's limited resources with great care. It is this sound financial management that enables us to hold down costs without compromising our services.

The Trustees are very conscious of the need to increase income to further secure our future. We chose to invest in developing the Miscarriage Association's brand and communications not as a purely cosmetic exercise, but as part of a long-term strategy of attracting and engaging more users and supporters. In the coming year, therefore, our policy will remain one of careful budgeting and fiscal monitoring as well as striving towards generating more income for the charity. We anticipate that with the continuing support of our friends and the positive impact of our re-branding on fundraising, the Miscarriage Association will be in a stronger position to be able to provide its services during a period of continued economic difficulties.



... and thanking our supporters

The Miscarriage Association would like to express our thanks to all those who have contributed to our funds this year. Grants, sponsorship, individual donations or the proceeds of fundraising events – every contribution, large and small, is greatly appreciated. While we are unable to list all our donors here, we would like to express special thanks to the following supporters who helped us maintain and develop our services in 2010-11:

Individuals and groups

Andy Chadwick
Leah Chinnery
Estate of the late Grenville Ellison
Paul Gemmill
Greenbank Church Young Women's Group
Paul Lumley-Holmes & the Snowdon Challenge team
John Quinton-Barber
Jon Shenton
Paul and Sarah Sweet, Adrian Phipps and Dave King
Emma Swift
Susan Trinnaman
Our London Marathon teams

Charitable trusts & companies

Bounty Charitable Trust
Duncan Norman Charitable Trust
Greene, Tweed & Co
Shop Direct Home Shopping Ltd
Vitabiotics Ltd

Gifts in kind

Activ Computer Services
Landau Morley LLP
LIDA
Pumpkin
RAP Spiderweb
Sterling Events

Making a difference 2010-2011

The Miscarriage Association would like to thank all those who have been involved in providing our services during the year.

We are very grateful to our volunteer telephone contacts and support group organisers and helpers. Women and men with personal experience of pregnancy loss, they help to provide a national network of comfort and support to others in a similar situation.

Our thanks also go to the people who help to select and support volunteers; our media volunteers; those who help us raise funds; and all those who have informed and contributed to our leaflets.

Our advisors and other volunteers who provide specialist advice and help are also indispensable. They have helped us answer medical queries, develop electronic communications, update our leaflets and plan for the future. Their contribution is strengthened by the support and commitment of the Trustees and our staff team.

We are very grateful to all those who provided feedback regarding the Association's visual image, which was the basis of our rebranding project. And we especially appreciate the contribution and commitment of PR, media and marketing company Pumpkin and direct and digital agency LIDA, who provided their expert services completely free of charge.

We would like to express particular gratitude to the following people for generously sharing their time and skills:

- Sarah Owen, Partner/Owner of Pumpkin
- Lisa Thomas, CEO of M&C Saatchi Group
- the members of our Professional Advisory Board
- our patrons
- Peta Harrison, editor of our members' newsletter
- Nigel Wood, our webmaster

Patrons:

Tania Bryer
Nigel Martyn
Anna Raeburn

Professional advisors:

Dr Christopher Everett
Mr Roy Farquharson
Ms Diana Hamilton-Fairley
Dr Sheila Kitzinger
Dr Marjory MacLean
Prof Lesley Regan
Prof Gordon Stirrat
Prof James Walker

Trustees:

at 31 March 2011

Barbara Hepworth-Jones
Kerry Addison
Christine Moulder
Penny Kerry
Beverly Boyle
Nicola Caplan
Karen Dalton
Alison de Verteuil
Madeline Jones
Helena MacLaren
Sheila McPherson

Chair
Vice-chair
Vice-chair
Hon Treasurer

Staff:

at 31 March 2011

Ruth Bender Atik
National Director
Lisa Bruce
Senior Support Worker
Elizabeth Stelmach
Support Worker
Ann Collier
Support Worker
Andrea Allen
Volunteers Manager
Iain Solanki-Willats
Development Worker



Rev'd Dr Chris Swift, Dawn Sykes and Ruth Bender Atik



Dr Jayne Shillito, advisor for the leaflet Ectopic Pregnancy



Snowdon Challenge team

Planning for the future: 2011-2012

The Miscarriage Association is a small organisation with a very big mission: to ensure that everyone who experiences the loss of a baby in pregnancy receives the support, information and care which she or he needs.

We are committed to offering accessible services that are sensitive, well-informed, user-friendly and relevant to the range of people who are affected by miscarriage, ectopic or molar pregnancy. Working to meet their needs will always be our priority.

We will continue to work with health professionals, supporting them so that they can provide good and sensitive care for those who experience pregnancy loss. Along with this, we will pursue our active involvement with high-quality clinical research into the causes and treatment of miscarriage.

We will maintain our links with government and with professional organisations to ensure that they consider the patient perspective when developing policies and guidelines. And we will strive to increase public awareness of the facts and feelings of pregnancy loss, ensuring that it is recognised as a significant health issue rather than a hidden personal grief.

Despite some advances in medical research and treatment, miscarriage is still likely to affect hundreds of thousands of women and their partners in the foreseeable future. We must ensure that the Miscarriage Association continues to respond to their changing needs and expectations, maintaining and developing high-quality services that make a positive difference. We hope you will want to support us in this.

Our plans...

- maintain our staffed helpline five days a week, backed by a UK network of trained volunteers
- open our online support forums to all service users
- roll-out and promote a new image for the charity: a new logo and strap-line; the revision of all leaflets; and the redesign of our website
- develop new print and online information for teenagers and young adults
- further improve our online presence through appropriate social networking sites
- continue our project to raise the charity's profile amongst primary care professionals; and further develop consultancy and training for health professionals
- implement a three-year project to develop and pilot tailored packages of support, information and training with areas served by specific hospitals and GP practices.
- further develop consultancy and training for health professionals and to other support and counselling organisations;
- continue active involvement with the Association of Early Pregnancy Units and maintain positive links with all the relevant professional organisations, government departments, charities, hospitals and health centres to improve care for couples who experience pregnancy loss;
- maintain and promote our reputation as an expert source of information on the facts and feelings of pregnancy loss.

... and how you can help

- become a member of the Miscarriage Association
- join our UK-wide volunteer network and volunteer your time and skills
- talk to family, friends and colleagues about our work
- take part in one of our fundraising events – or organise your own
- become a Friend of the M.A. with a regular monthly or annual donation
- sign a Gift Aid declaration and make your gift go 25% further at no cost to you
- encourage your employer to implement payroll giving and join in to enjoy tax relief on your donation
- persuade your employer to become a corporate supporter, through corporate donations or gifts in kind

“ Thank you to the kind person who was there to take my call yesterday morning.

I needed to be able to ask about practical issues following my 12-week miscarriage on Tuesday, and had put the emotional side of things on hold to deal with in my own time. I could sense the lady who took my call responding carefully to the context of my call, and making it possible for me to ask the questions that I needed to, without making me feel remotely judged or assessed in any way.

I really appreciate this. It was like having a very calm controlled and trusted friend in the room with me, who knew instinctively where all the raw edges were.

At her suggestion, I have since been to the website and found the wealth of carefully organised and appropriate material of great value. It has prepared me very well for my visit to a recurrent miscarriages clinic in the next couple of months.

Thank you to your organisation for providing such outstanding support. ”