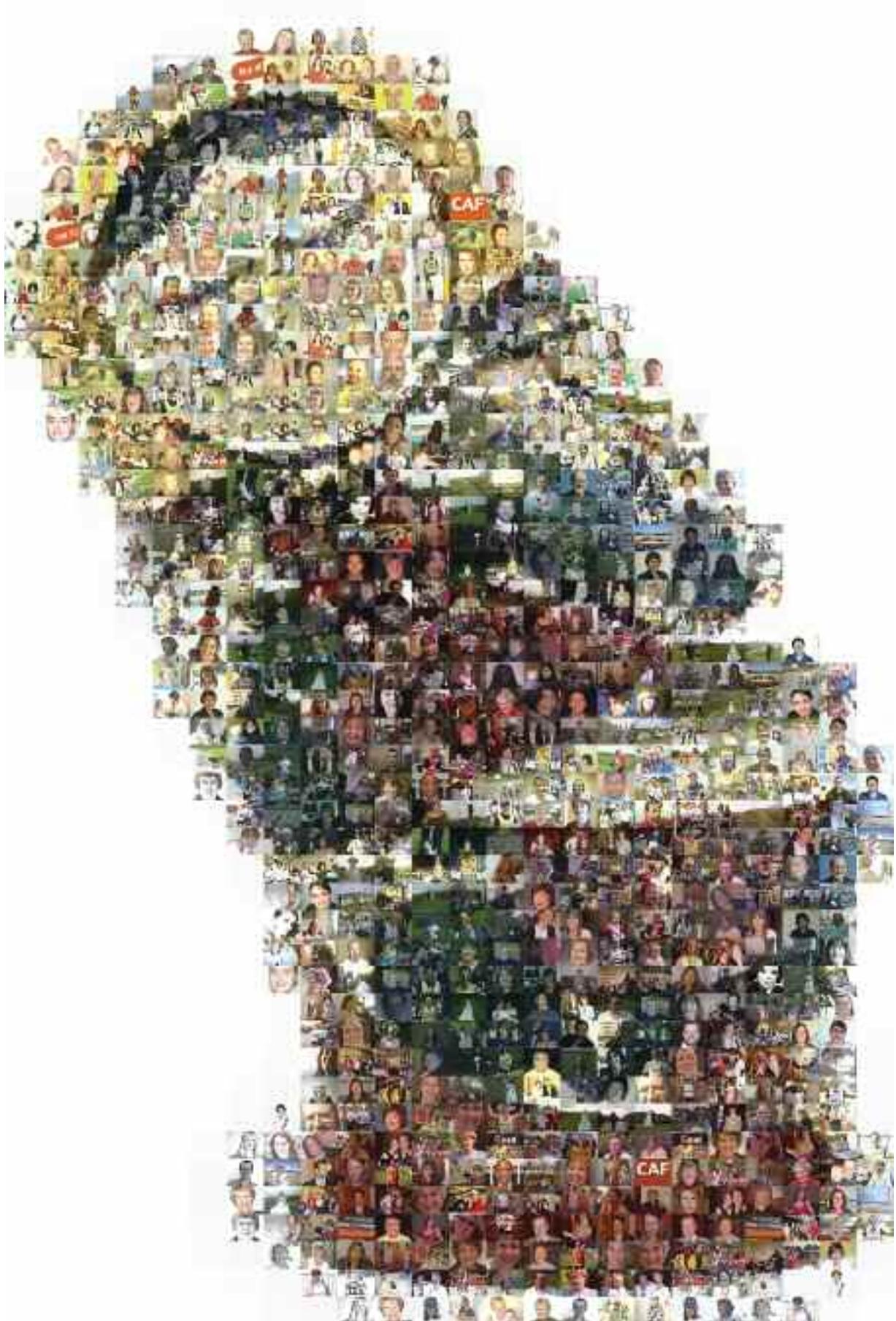


# The Miscarriage Association

ANNUAL REPORT 2008–2009



**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.**

# **The Miscarriage Association**



acknowledging pregnancy loss

c/o Clayton Hospital, Northgate, Wakefield, West Yorkshire WF1 3JS  
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**[www.miscarriageassociation.org.uk](http://www.miscarriageassociation.org.uk)**

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 (3779123)

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# Foreword



**Synergy** (from the Greek *syn-ergos* meaning working together) describes a situation where different entities cooperate advantageously for a final outcome. Simply defined, it means that the whole is greater than the sum of the individual parts (Wikipedia).

When we were thinking of a theme for this year's annual report and accounts, it seemed to me that The Miscarriage Association is made up of so many people doing so many different things – in synergy. Just like the picture on the front cover, individually we may only achieve a little, but together we make up a charity that is making a real difference.

Many charities work towards treatments that will cure and prevent. We have only limited options for this kind of work – at least, at present. But we can work to ensure that everyone who experiences the loss of a baby in pregnancy receives the support, care and information that they need. And that is where everyone's contribution is important, whatever it is:

- The volunteers, including support contacts, media volunteers, fundraisers
- The staff, the trustees, the professional advisers, the patrons
- The message board members, who support each other
- Those who donate their money, time or expertise
- Those who tell someone else about The M.A.

It includes those who are members of The M.A. and those who just use our services, such as the website, newsletter and leaflets. It includes both those who experience miscarriage or ectopic or molar pregnancy, and the health care professionals who care for them.

It includes those who cherish children born before or after miscarriage. It includes those who never achieve the family they wanted.

It includes those who don't know yet how their miscarriage story will end.

And it includes all those who are brave enough to talk about pregnancy loss and, in so doing, take a small step to moving miscarriage from being a hidden grief to being a sad but acknowledged part of life.

Whatever our specific contributions or perspectives, it includes all of us who care about pregnancy loss. Together, and through The Miscarriage Association, we are a whole that is greater than the sum of the parts.

Thank you for whatever part you have played in this synergy.

A handwritten signature in purple ink, which appears to read 'Barbara Hepworth-Jones'.

**Barbara Hepworth-Jones**  
Chair of the Board of Trustees

# Offering support

The loss of a baby in pregnancy can be a very distressing and lonely experience and levels of anxiety in a subsequent pregnancy are often very high. The Miscarriage Association provides support, understanding and a listening ear to anyone affected by pregnancy loss, whenever the need arises.

## Staffed helpline

a swift, sympathetic and informed response, five days a week, to nearly 8,300 letters, calls and e-mails

### Lisa Bruce, Senior Support Worker

I work on the helpline, offering support by phone and email. Just as we answer calls as they come in, we always respond the same or the next working day to e-mails and people are often surprised as well as grateful that we reply so quickly.



E-mail support is very different to telephone support. I suppose when it's written down, you have more time to think about what to say and how to say it, what information to give and how The M.A. may be able to help. Some people prefer the telephone and find it more personal, but I think an e-mail can be just as personal, if not more. It doesn't matter what time of day or night, they can just write down their innermost feelings and send it there and then.

*Thank you so much for the speedy response and advice and for directing me to the right pages on the website. It was interesting and reassuring reading them and I don't feel quite so 'neurotic' now asking for an early scan.*

## Local support volunteers

ninety telephone contacts and 30 local support groups across the UK – all people with personal experience of pregnancy loss ● 59 volunteers offer matched support on 26 specific areas of pregnancy loss ● 19 staff an out-of-hours helpline, offering support at evenings and weekends

### Elaine Strong, Support Volunteer

It sounds silly after all these years of taking calls, but I think we sometimes forget just how much difference it can make just by being there and really listening. Whether you take lots of calls or just one or two a year, that's just how important volunteering for The M.A. really is.



One caller I spoke to had miscarried several weeks into her pregnancy. It had taken a long time to get pregnant and then it wasn't clear for several weeks whether the pregnancy would continue or not. The miscarriage affected her relationship with her partner, her work and all aspects of her life and she was finding it very hard to cope. She also felt very alone: from the moment she realised that something was wrong with the pregnancy right until she phoned me, she had been unable to find anyone to talk about how she felt. We talked for quite a while and then at the end of the call, she said:

*"You have given me that chance to have the conversation I really needed to have. I could not find anyone else to have it with. Thank you so much."*

## [miscriageassociation.org.uk](http://miscriageassociation.org.uk)

a reputable source of support, information and comfort, with personal reflections and poems ● a message-board for sharing feelings and experiences ● and a place for remembrance

*I have recently miscarried our second pregnancy. At my most desperate point I found your website and was comforted immensely by the information and messages from others. I would love to include a message for our lost one in your forget-me-not meadow. I think this is a wonderful way to express our loss and to remember this most difficult time.*



# Providing information

Those who have suffered pregnancy loss are often desperate to find out why it happened and what might happen in the future. The Miscarriage Association provides clear and accurate information and we also promote further research into the causes and treatment of miscarriage.

## Staffed helpline

responding to a wide range of questions on miscarriage, ectopic and molar pregnancy, providing clear information and clarifying confusion

*I was told yesterday that my baby stopped growing at six weeks but I should be 12 weeks now and I had no idea anything was wrong. How can that happen? And is it true that if I wait to miscarry naturally it could still take weeks till it happens?*

## [miscarriageassociation.org.uk](http://miscarriageassociation.org.uk)

a well-used resource for those seeking information  
● an average of 17,000 visits per month ● ranked highly on all major search engines

### Nigel Wood, Webmaster

My wife Liz became a volunteer for The M.A. after receiving much welcome support some 20 years ago, eventually becoming the Chair. Then she volunteered me to be the Webmaster. It gave a sense of purpose to something I enjoyed doing anyway and it's the progress from clever programming to something useful that's satisfying for me. The feedback from the Forget-me-not-meadow is particularly pleasing.



*This was our first pregnancy and miscarriage (at 9 weeks) so everything was new to us – and your website provided us with easy to read, sensitive information, which was invaluable*

## Research

encouraging and supporting high-quality research into the causes and treatment of miscarriage

● member of steering committees for two clinical research trials



## Leaflets

publishing 28 leaflets on aspects of pregnancy loss, including three new titles ● one leaflet in seven community languages and in versions for people with learning or hearing disabilities ● 45,000 leaflets ordered by hospitals and individuals ● an average of 6,100 leaflets downloaded from our website each month ● all leaflets printed in clear typeface and available in large print and on our website

Three new titles:

**Miscarriage and the workplace:** a guide for employers, containing key facts about miscarriage, information on the law on pregnancy-related sick leave, and tips for employers on easing the return to work.

*If you return to work early and then go off again because you're not coping, it's classed as another episode of sick leave and HR get involved*

**When the trying stops:** a leaflet for people who are considering stopping their attempts to have a baby.

### Jane Stephens, author

It was a very difficult decision to stop trying for a baby. After five losses my husband and I knew we had both emotionally had enough. Part of me desperately wanted to carry on but the repeated losses were tearing me apart and my life seemed to be slipping away. I wanted to do something to ease the pain for people in a similar situation and help them feel less alone. That's what led to this leaflet.



*"When the trying stops" is packed with accurate insights. I would recommend it to anyone at the brink of taking this momentous step on their fertility journey*

**Management of miscarriage:** a leaflet for people who are faced with making difficult choices when miscarriage is diagnosed.

*The one thing I really wanted when it happened to me was to read about the kind of physical things to expect. This leaflet is great – concise but sensitive and informative.*

# Promoting 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. The Miscarriage Association offers tailored training and consultancy to healthcare professionals and to local lay representatives, and works with key organisations to promote sensitive care for patients who miscarry.

## Training and study days

advising on training for hospital staff ●  
developing study sessions for GP trainees ●  
support and training for service users who want  
to represent the patient perspective on pregnancy  
loss in local NHS Trusts

*We are looking for a study day on miscarriage for staff working in gynaecology. Can you tailor-make a day specific for our needs?*

## Consultancy

advising on five research proposals, eight patient information leaflets and three Department of Health publications ● advising on protocols for management of miscarriage, sensitive disposal and certification after miscarriage

*I would like to ask for your help in the introduction of medical management of miscarriage in our hospital. We really want to make sure that what we do and how we do it is right. I would be anxious to discuss the appropriate leaflets and the level of support we offer.*



## Primary care

launching a project to raise awareness of pregnancy loss and The Miscarriage Association amongst health professionals working in primary and community care

### Jen Lumley-Holmes

I volunteered to help staff The M.A. stand at Primary Care 2008 and to try and raise awareness of the support and information we have to offer.

I was surprised at the number of community midwives who didn't know much about The



## Collaboration

active links with the Association of Early Pregnancy Units, the Royal Colleges of Nursing and of Obstetricians and Gynaecologists and other pregnancy/maternity charities ● continuing work with the Royal College of Nursing to produce joint guidance on the sensitive disposal of fetal remains

### Ruth Bender Atik, National Director

The M.A. is a guest member of the Executive group of the Association of Early Pregnancy Units (AEPU) and our colleagues there were very helpful and supportive in advising on and promoting our new leaflet on the management of miscarriage.



### Roy G Farquharson, Consultant Gynaecologist, Liverpool Women's Hospital and Chair of the AEPU

*The AEPU has forged a close alliance with The M.A. in supporting women and their partners at a distressing time.*

*The M.A. contributed to the development of our guidelines for health care professionals working with early pregnancy complications and these in turn have informed the standards published in 2008 by the Royal College of Obstetricians and Gynaecologists in conjunction with the AEPU. Their input has been invaluable.*



M.A., saying that they mainly saw mums after 12 weeks of pregnancy. How about late miscarriages? Or the times they contact someone who has miscarried before her first appointment? It was great to have the opportunity to talk to them and many took leaflets and posters for their clinics.

*I went to the Primary Care Exhibition last week and took some leaflets to show our team of midwives. We found them so useful, especially the ones that have been translated into Polish. We have a large Polish population in the Malvern area.*

# Raising awareness

Even though an estimated one in four pregnancies ends in miscarriage, this is still something of a taboo subject and the hidden nature of their loss can make those who go through it can feel alone and unsupported. The Miscarriage Association works to raise public awareness of the facts and feelings of pregnancy loss, to correct myths and misunderstanding and to ensure that bereaved parents know where to turn for help.

## News & features

providing expert information, comment and case studies in response to 89 requests from print, broadcast and online media ● helped by 48 media interviewees who contribute personal reflections and experiences ● further assisted by public figures and journalists who promote our work

### Sarah Oliver, journalist

I have never understood why miscarriage is a silent subject. We live in an era when every aspect of modern life is acceptable dinner party debate yet this pain often remains hidden, even from immediate family and friends.



Perhaps that's because it is not a proper bereavement: the loss of an unborn child is felt only by its parents. Perhaps it's because miscarriage raises a spectre over healthy pregnancies. Perhaps it is because there is no political or moral dimension, unlike abortion which is widely discussed. Who knows?

But what I do know is this: the hurt miscarriage causes is only compounded when others shy away from talking about it as if it were impolite or somehow damaging. Grief shared is grief eased, if not assuaged. We don't want pity but sympathy and understanding would be nice. Common acceptance would be even better.

### Laura

I have completed an interview for Grazia magazine on why miscarriage is such a taboo subject. It was hard to do and brought back a lot of feelings, but I really do hope that doing the article will open people's eyes to miscarriage and the hurt and grief behind the smiles



*I just wanted to say thank you for the Grazia article. It really spoke to me. I have had two miscarriages and all the issues you mentioned made me realise I am not alone with the thoughts I have had about how other people feel towards miscarriage and how it is treated.*

## Profile

launching our short film *Acknowledging Pregnancy Loss* on the Community Channel and online ● exhibiting at *Health & Wellbeing at Work*, a perfect setting to highlight the issue of miscarriage and the workplace ● promoting National Babyloss Awareness Week, together with four other baby-loss organisations ● over 90 supporters taking part a range of fundraising events and raising awareness of the charity as well as funds

### Sally Roberts

*Helping out at Health & Wellbeing was really worthwhile and rewarding for me personally too. It will be nine years this August since my first miscarriage and not one day passes when I don't think about what might have been. But when I volunteer for events like this, I feel I am honouring my baby's memory.*



## Music online

promoting two songs about miscarriage, donated for our use: *Miracle*, by Travis from Station2, written in memory of his miscarried baby; and *Little Soul*, by Tom from Oswald, expressing a bereaved father's grief and loss

## Excellent internet profile

maintained an excellent internet profile, with links from other websites, so that we feature highly on the largest search engines

# Abridged accounts

1 April 2008 – 31 March 2009

	General funds £	Designated funds £	Restricted funds £	Total
<b>Income:</b>				
<b>Donations &amp; similar income:</b>				
Membership fees & donations	15,673	-	860	16,533
Government grants	10,000	-	-	10,000
Other donations & grants	44,626	-	5,715	50,341
Branch income	-	-	8,014	8,014
<b>Activities to further the Charity's objects:</b>				
Sales	37,546	-	-	37,546
Members' Day fees	255	-	-	255
<b>Activities to generate funds:</b>				
Fundraising activities	54,801	-	-	54,801
Sales	2,383	-	-	2,383
<b>Interest received</b>	<b>11,272</b>	<b>-</b>	<b>-</b>	<b>11,272</b>
<b>Total income</b>	<b>176,556</b>	<b>-</b>	<b>14,589</b>	<b>191,145</b>

<b>Expenditure:</b>				
<b>Cost of generating funds:</b>				
Fundraising	30,808	-	5,042	35,850
<b>Charitable expenditure:</b>				
Service provision	89,910	29,783	11,005	130,698
Governance	39,512	-	100	39,612
<b>Total expenditure</b>	<b>160,230</b>	<b>29,783</b>	<b>16,147</b>	<b>206,160</b>
Net surplus/(deficit)	16,326	(29,783)	(1,558)	(15,015)

## BALANCE SHEET

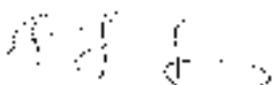
Fixed assets				800
Current assets				257,561
Total liabilities				(19,185)

<b>Net assets</b>				<b>239,176</b>
Represented by:				
Brought forward from 2007/08	136,524	103,224	14,443	254,191
Net surplus/(deficit) 2008/09	16,326	(29,783)	(1,558)	(15,015)
Transfer between funds	(663)		663	
<b>Balance carried forward</b>	<b>152,187</b>	<b>73,441</b>	<b>13,548</b>	<b>239,176</b>

This financial statement has been agreed by Mazars LLP as being consistent with the full financial statements for the year ending 31 March 2009. These were prepared in accordance with the Statement of Recommended Practice Accounting by Charities (revised 2005) and received 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, c/o Clayton Hospital, Northgate, Wakefield WF1 3JS.

The full accounts were approved on 21 September 2009 and have been submitted to the Charity Commissioners.



Signed: Barbara Hepworth-Jones (Chair)

### Auditors & accountants

Mazars LLP  
Mazars House  
Gelderd Road  
Leeds LS27 7JN

### Bankers

Cooperative Bank  
Providence Street  
Wakefield WF1 3BG

CAF Bank  
Kings Hill  
West Malling  
ME19 4TA

Birmingham Midshires  
Pendeford Business Park  
Wobaston Road  
Wolverhampton WV9 5HZ

Yorkshire Bank  
Northgate  
Wakefield  
WF1 1TA

# Reviewing our finances...

The Miscarriage Association continued its policy of managing its resources carefully in the year to 31 March 2009. Despite a difficult financial climate, we were able to maintain and develop high-quality services and to make some provision for the future. This was achieved both through the support of our donors, members and friends and by the dedication of staff and Trustees who manage the Association's limited resources with great care.

We were pleased to see a significant rise in donations from individuals, companies and trusts during the year. Restricted grant income also increased, including a project grant to enable us to promote The Miscarriage Association at the UK's largest Primary Care conference and exhibition. Income from fundraising activities, particularly the London Marathon, increased slightly and these activities carried the added benefit of raising the charity's profile. In contrast, income from leaflet sales was significantly lower than in 2007/08 and we also noted a reduction in membership fees and donations.

We worked hard to continue to maximise the value of our funds, moving funds between banks to maximise interest and minimise risk in a particularly difficult year. We could not be completely immune to the widespread fall in interest rates, however, and investment income from reserves fell by 11%.

Overall income shows a small decrease compared with last year, but this is entirely due to a reduction in branch income. We report those funds in our accounts, but they are held and used by those branches alone.

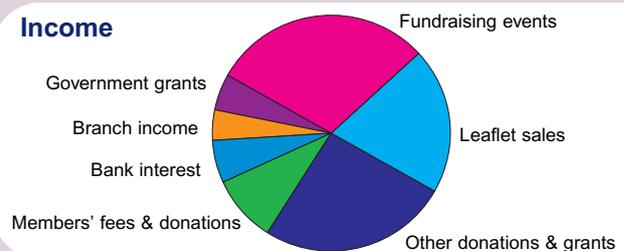
As always the generously donated services of all of our volunteers enable us to keep the costs of providing direct charitable support relatively low, saving an estimated £54,963 during the year. Spending on fundraising increased slightly as did the costs of governance, including legally required meetings, reports

and accounting. Overall expenditure rose by three percent, roughly in line with inflation.

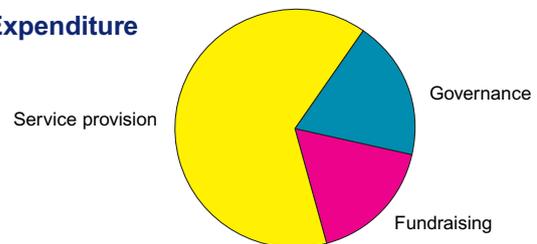
The accounts show a surplus of general (unrestricted) funds for the year, which has enabled us to increase our General Reserve Fund, while designated reserves are being used as planned. The restricted fund reserve constitutes branch funds only.

The Miscarriage Association continues to develop its services in response to both continuing and changing needs for support and information relating to pregnancy loss. We are conscious of the trust that our funders and our supporters invest in us and use our limited funds wisely. We have built up reserves to help us cope with the uncertain financial future faced by many charities and this has proved crucial in the current challenging financial climate. We will need to work even harder over the next few years to increase earned and fundraising income in order to secure the future of The Miscarriage Association for as long as it is needed.

## Income



## Expenditure



# ...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 2008–2009:

### Statutory funding

The Department of Health

### Individuals and groups

Liz Allan

Babyloss

Kate Gerbeau

Steven Harris & Benedict Crabbe

Jay Lamb

Ian Skirrow

J Stephens and M Stocks

Steve Williams

Our London Marathon team

### Charitable trusts & companies

French Connection UK

Hewitt Associates

Hogg Robinson

Hospital Saturday Fund

Iris Spink Fund

Mail on Sunday

Mazars Charitable Trust

JAH Norman Trust

Times Literary Supplement

Vitabiotics Ltd

### Gifts in kind

Activ Computer Services, for e-mail and website hosting

Gateway Broadcasting Services Limited, for hosting Trustee meetings

RAP Spiderweb, for support in design and print

Sterling Events, for exhibition support

zumyn.com, for our front cover collage

# Making a difference

2008-2009

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 are the backbone of The Miscarriage Association, providing a national network of comfort and support to others in a similar situation.

Our thanks also go to the people who help to mentor 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 would like to express particular gratitude to the following people for generously sharing their time and skills:

- 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 2009

Barbara Hepworth-Jones	Chair
Kerry Addison	Vice-chair
Beverly Boyle	Vice-chair
Penny Kerry	Hon Treasurer
Julia Bueno	
Nicola Caplan	
Alison de Verteuil	
Clare Hobro	
Sheila McPherson	
Christine Moulder	
Anne Walton	

*Ex-officio:*

Morag Kinghorn

*Co-ordinator for Scotland*

## Staff:

Ruth Bender Atik  
*National Director*

Lisa Bruce  
*Senior Support Worker*

Anne Woodhouse  
*Senior Support Worker*

Sarah Pugh-Wales  
*Support Worker*

Andrea Allen  
*Volunteers Manager*

Miscarriages are so common but you don't really think about it until it happens to you or someone close. So you don't think it'll happen to you. Everyone deals with the experience differently and I sought help and advice from the Miscarriage Association. Their support helped me in a way no one else could and now I want to give something back so they can continue to help others affected by miscarriage in the future.

# Planning for the future: 2009-2010

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 a sensitive, informed and accessible support and information service for anyone affected by miscarriage, ectopic or molar pregnancy. We will continue to work with health professionals to support them in providing good and sensitive care for those who experience pregnancy loss. We will maintain our links with government and with professional organisations to ensure that they consider the patient perspective when developing policies and guidelines. We are determined to maintain the public profile of pregnancy loss rather than allowing it to remain such a hidden grief.

Despite 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 want to 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
- produce new leaflets on molar pregnancy and cervical stitch
- publish online an illustrated book for children to help them deal with pregnancy loss in the family; and work towards its publication in print
- explore the development of producing new print and online information for young adults
- address gaps in accessibility of services and further develop electronic, telephone and text-based support and information
- continue our project to raise the charity's profile amongst primary care professionals; and further develop consultancy services and targeted in-house training for health professionals
- begin a project to update the charity's image, including printed and online text and design; and use every opportunity to promote our work
- continue active involvement with the Association of Early Pregnancy Units; and maintain positive links with all the relevant professional organisations, government departments, hospitals and health centres to improve care for couples who experience pregnancy loss
- work collaboratively with other charities to raise awareness of pregnancy and baby loss
- maintain 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

The last couple of weeks have been traumatic, to say the least. I was completely unprepared for the overwhelming grief and emptiness.

The M.A. has definitely provided the information and support I desperately needed, and reading other people's experiences has helped me realise that days of crying and a roller-coaster of emotions are completely normal. But most importantly, it's removed the loneliness and given me hope for the future.

Thank you for making this difficult journey easier to bear.