Core Seminars -- Marriage

Week 11 (March 20, 2022)

**Infertility**

*What if We Can’t Have Children?*

In last week’s marriage core seminar, Jamie talked about the great blessing of having children. Yet love and marriage don’t automatically lead to a baby. So this week we want to consider the topic of infertility -- what if we can’t have children? What if our fellow church members can’t have children? How do we think about that in the context of this class, and in the context of how God has revealed himself to us in Scripture?

Now as we turn to this topic, we need to approach it with appropriate sensitivity and care. We can’t look at this topic only clinically, separate from the people involved, but we must approach it with an appreciation of the deep personal, emotional, and spiritual challenges that people are going through.

So, why should you care about this?

* If you’re currently a married couple struggling with infertility, this time together will suggest guidelines for you to consider.
* If you’re a married couple who hasn’t thought about infertility before, or if you’re seriously dating or engaged, this can help you think through this topic in advance.
* If you’re a member of CHBC, please see this talk as a way that you can learn to understand your fellow church members better, empathize with and care for them, and at times mourn with those who mourn, as our church covenant calls us to do.
* For all of us as Christians, we will have unfulfilled hopes, dreams, and goals in this life, even ones that are good, honorable, and Godly. This class can be a way for you to prepare yourself to handle a similar situation of hope deferred in your future.

Our goal this morning is to offer a Biblical framework as we consider the topic of infertility. Our outline for today, which you will see in your handout, will be:

1. Biblical principles regarding childbirth and infertility
2. Challenges Infertility Poses in a Marriage
3. Assisted Reproductive Technologies (ARTs)
4. Adoption
5. Summary Considerations

Despite all that we’ll cover today, this is just a starting point, so if you have further questions, feel free to talk to me or one of the other elders. There are couples in the church who have experienced infertility who are willing to talk with those having similar experiences. If that would be useful to you, please let us know and we can put you in touch with church members who have lived out these issues.

**1) Biblical principles regarding childbirth and infertility**

First, how do we see childbirth portrayed throughout the Bible? Beginning in Genesis 1, God commands us to be fruitful, multiply, and fill the earth. His desire is for His glory to be displayed over the whole world by people, human beings who reflect His glory. So Adam and Eve are to have children and populate the world.

Yet they sin. And part of the resulting curse was that childbirth would become difficult. At the same time, the creation itself was subjected to frustration; and infertility is an example of that.

We see multiple examples of infertility in the bible, as trials for God’s people. In 1 Samuel, we read that Hannah cried bitterly and would not eat because she didn’t have any children.

There were two ways that the people of God dealt with infertility. One was by sinning and not trusting in God. For example, Abraham, though married to Sarah, had a child with his servant Hagar. Or another sinful response was Israel’s worship of Asherah, the goddess of fertility. It’s incredible how persistent this worship of Asherah was, from the time of Moses through Gideon through kings both in the nations of Israel and in Judah. Even after the exile, the people of Israel still served Asherah (see Micah).

The other way Israel responded to infertility was by trusting God and crying out to Him. Genesis 25:21: “21 Isaac prayed to the LORD on behalf of his wife, because she was barren. The LORD answered his prayer, and his wife Rebekah became pregnant.”

And God answered Isaac’s prayer. God didn’t need to provide children, but in this instance He did. But even when the Lord’s answer is “no,” or “not yet,” He calls on us to trust Him and call out to him with our prayers.

Then Jesus comes. Jesus clarifies the concept of the family of God from one of biological kinship to a spiritual one. He tells Nicodemus in John 3 that he must be born again. On the cross, Jesus pays the penalty for all who have ever repented from their sin and trusted in Him, underscoring this new importance of a family of faith. This is not to minimize having biological children; Adam and Eve were commanded to be fruitful and multiply. Jesus welcomed little children and loves them. However, a greater calling is to be part of this family of faith. And beyond that, to share the gospel and to disciple—extending this spiritual family.

Therefore, when considering infertility, we are to remember the overarching storyline of the Bible. Having a child, as much as it is a very good thing, is not an ultimate goal and cannot be something that’s pursued at all costs. Instead, we must think first about how we glorify God. We do that in two ways: 1) We obey his word and trust his faithfulness in all the trials of our lives, including infertility 2) We place our identity in Christ as children of God -- we not in secondary issues such as whether we have children or not. Regardless of whether you have children or not, you are complete in Jesus Christ.

With all that in view, let me propose two biblical principles to guide our discussion:

1) Life begins at conception:

There are a number of Scriptural passages that refer to life beginning at conception, one of which is Psalm 139:13-16.

***“For you created my inmost being; you knit me together in my mother’s womb. I praise you because I am fearfully and wonderfully made; your works are wonderful, I know that full well. My frame was not hidden from you when I was made in the secret place, when I was woven together in the depths of the earth. Your eyes saw my unformed body; all the days ordained for me were written in your book before one of them came to be.”***

Since life begins at conception, the command to not murder applies from the moment of conception.

2) Heterosexual monogamous marriage is the only relationship ordained by Scripture for the creation of children.

As Genesis 2 states, **“For this reason a man will leave his father and mother and be united to his wife, and they will become one flesh.”** Marriage is a particular relationship ordained by God between a man and a woman. It is this relationship in which children are exclusively created. This link between marriage and childbirth is underscored in Malachi 2, when God denounces Israel for faithlessness in marriage and the marriage covenant, and instead desires children to some from marriages: ***“And what does the one God seek? Godly offspring. So be on your guard, and do not be unfaithful to the wife of your youth.”*  (Malachi 2:15)**

Therefore, there is a God-ordained link between marriage and having children.

[QUESTIONS?]

**2) Challenges Faced by Couples Experiencing Infertility**

No two couples’ experiences with infertility will ever be exactly the same. The point of this section is to acknowledge the experiences of anyone here currently struggling with infertility and provide insight to others about how they might relate to couples facing this trial.

We’ll talk about these issues in two broad categories. First, we’ll talk about the potential impacts to the individuals in the marriage. Second, we’ll talk about the potential impacts to the marriage. First, for the individuals, infertility can create feelings of profound loss. This may be especially true for the wife.[[1]](#footnote-1) For both, reminders of this loss can be everywhere. It can be the sound of a crying baby or seeing a pregnant woman walking across the street. It could be seeing a parent with an older child at a game, or movie, or doing anything the husband or wife always envisioned doing together with a child.

As we seek to mourn with those who mourn as we’ve covenanted together as a church to do, it’s also worth noting that even church can be a challenging place for a couple facing infertility. In God’s kindness, He has blessed our church with many children and, at times, many expectant mothers. We should thank God for this, but also bear in mind that coming to church can be a challenge for couples experiencing infertility, though none of us should neglect the gathering of ourselves together, as our covenant also says.

Second, infertility can have a significant impact on the marriage.

First, the wife and husband may face different kinds of grief, or process their grief differently. This could create conflict if, for example, one member of the couple seems more affected than the other, or one wishes the other wasn’t as impacted as he or she is. Second, a couple’s intimacy (physical and emotional) can be affected when so much attention must be given to the couple’s fertility. Third, if the infertility is determined to be the result of medical issues faced by one member of the couple, this can create potential issues of blame or guilt. Fourth, couples may have different opinions and desires related to how to treat the infertility. Again, these are just examples. Of course, every couple will struggle in their own way. But it’s important to acknowledge that marriages can be affected by infertility in ways that go beyond the infertility itself.

One final point to keep in mind is that the pain of infertility does not necessarily disappear if the couple is blessed with a child or even multiple children. For some, the sharp pain from the hardest days may lessen, but the loss and heartache of infertility endures.

*Any questions?*

**3) Assisted Reproductive Technologies**

There are multiple reasons that infertility may happen: 1) medical issues with the man (e.g., the sperm may not be of the right quality to fertilize an egg); 2) medical issues with the woman (e.g., she might not release an egg regularly); 3) other reasons that sometimes can’t be medically determined (e.g., there might be multiple miscarriages).

At this point, a couple may approach a clinic to explore Assisted Reproductive Technology treatments, which I’ll call ARTs.

This is a complicated topic and the suggested course of treatment for any couple’s infertility will vary. Let me share with you three common treatments, and then we’ll talk briefly about some principles we must keep in mind if we pursue these treatments.

1. An initial approach could be hormone treatments if the wife has medical issues. This means that she may need to take some pills or inject herself regularly with particular hormones in order to stimulate regular releasing of eggs.
2. In a situation where the husband’s sperm may have some issues, they may consider IUI (intrauterine insemination). What happens is that the fertility specialist takes sperm from the man and injects it into the woman’s uterus when she is ovulating. In this situation, the woman may also have been receiving hormone treatment in order to establish a regular releasing of eggs.
3. Another type of treatment is IVF (in vitro fertilization). What happens here is that the fertilizing of an egg occurs not in the woman’s uterus but in a lab, after both egg and sperm have been collected from the wife and husband. Then, after the fertilized egg has developed into an embryo, it’s transferred to the woman’s uterus. Since the success rate for this (i.e., the times that a transferred embryo is born) can be mixed, and since the cost for a cycle of this treatment is very expensive, fertility specialists often recommend attempting to create multiple embryos (let’s say 5). Then, after they see how many embryos are created, they may transfer several embryos at one time. The remainder would then typically be frozen for use in the future, if needed.

ARTs can be a greatblessing to families struggling with infertility. Many couples in our church have used ARTs and, like any other medical treatment, they can be used sovereignly by our good God to address medical impediments to a couple having children. There is nothing inherently sinful about ARTs as a category. However, as you can see, this whole issue becomes quite complicated very quickly, and I would strongly encourage couples considering ARTs to speak with an elder and, if possible, a Christian couple who has used ARTs.

Very briefly, though, let’s talk through some of the moral and theological issues presented by ARTs.

*Implications for ART*

Given our Biblical principles- obedience to God, trusting God, and resting in our new life in Christ as our ultimate hope and identity -here are 4 implications that the elders developed after spending time considering this issue:

1. **Any fertility treatments should preserve the parent-child relationship.** Currently, if a couple finds out that one or both of them are infertile or think they may be infertile, they can look for someone else to donate a sperm or egg.   
     
   The elders understand that a key implication of Scripture’s linking of marriage and children—and how it addresses alternative ways to produce children—is that marriage is the only legitimate context for creating children. Using a third party’s genetic material fundamentally alters God’s design and plan for marriage and biological children, and alters that parent-child relationship. If one spouse is infertile, this is a challenge for the marriage, not just that spouse—but a challenge that is within God’s good and sovereign Providence. That is part of what it means to be one flesh. Whatever the husband and wife may pursue, it should maintain the parent-child relationship. That means that men should not be sperm donors.
2. **Fertility treatments that involve the destruction of embryos must not be pursued.** There are a number of ways this may happen. For example, there is the concept of ‘selective reduction’, which means that during a pregnancy with multiple embryos, a fertility specialist may abort one or more of the embryos. They may do this because of potential genetic abnormalities seen in one of the embryos, or the fact that more embryos were successfully transferred than the couple wants to care for. As elders, we understand Scripture to see any such willful destruction of an embryo as the same as killing a child, which God’s commandments clearly forbid. Related to this, couples should be aware that fertility clinics may push couples to conduct genetic testing of embryos as part of IVF treatments. Preimplantation Genetic Testing (PGD) is a screening test that can be conducted on embryos prior to transfer to determine the genetic health of the embryos. From the world’s perspective, this can help couples weed out embryos with genetic abnormalities. For the Christian, there is nothing inherently sinful about the testing itself. However, if genetic testing reveals genetic abnormalities in an embryo, the clinic will strongly encourage the couple to kill that embryo.
3. **Any fertility treatments must not involve the freezing of an embryo.** You may recall that we discussed an earlier scenario where fertility specialists often encourage a couple to create more embryos than can be transferred at a time. Therefore, freezing an embryo is a pretty standard procedure.  
     
   As elders, we believe that an embryo should not be frozen. Here are a few reasons:
4. life is created so it will be born – placing life in stasis and on hold keeps that life of being what God created it to be, and takes away from the human dignity and respect that should naturally be given to any human life;
5. freezing an embryo is what we would see as the opposite of what 1 Timothy 5:8 describes as providing for our immediate family, given the very real danger that an embryo will not survive the unfreezing process.[[2]](#footnote-2)

4. **Any fertility treatments must seek to preserve life.** Specifically, couples who have created embryos have a moral obligation to give them the opportunity to be born. We believe that any embryo, including a frozen one, is a life, and thus deserves to be born. As with any such issues, this is not a simple and easy scenario to think through and respond to for couples who are in it, and we are happy to be of help in thinking through how best to follow Scripture in this regard.

*Application*

This is difficult terrain. Let me just say that we as elders want to be part of the conversation to help you think through these issues if you are thinking through using ART. Given the issues of life that are at stake, we believe it’s important that you not regard these issues as merely private but invite others to be part of the conversation. Oftentimes, it can feel very isolating to struggle with infertility, especially in a church that’s extremely fruitful. But you’re not alone. We want to help you, love you, and help you bear your burdens, including this one.

Specifically, we would like to strongly encourage couples considering ART (such as IVF) to do the following:

* Read – We have information on ART from a Christian perspective, helping you think through moral considerations.
* Consider – Think through the issues involved with a few discussion questions; and
* Meet – Meet with an elder for counseling to discuss your situation, including establishing ethical limits before you begin selecting treatments.

What if you’ve already pursued these technologies and are now wishing you’d heard all this much earlier? I don’t intend for this time to be a condemning one but rather one for discussing Scriptural principles. If there is something to be repented of, praise God that we have been saved by a Savior who has borne our sins. If there are ways you can be faithful with decisions going forward, please let us know and talk to others about how we can be of help to you.

Are there any questions?

**4) Adoption**

Another option that couples can consider is adoption. Adoption isn’t just an option for couples struggling with infertility; it can be a wonderful ministry that any family undertakes.

This is another big topic but let me help give some background and some parameters.

*Background*

Adoption is bringing a child into your family who is not biologically related to you yet raising him or her up as your child.

Biblically, this is a beautiful parallel to how God has loved us in Christ. Though we by nature are His enemies, in His love He adopted us (Ephesians 1:5) J.I. Packer has a wonderful chapter in his book “Knowing God” particularly on adoption where he states that adoption is the highest privilege that we as Christians can enjoy. Justification is essential -- to be right before God, we need to be declared righteous. However, in adoption, God has brought us into His family -- and so we read incredible passages such as Hebrews 2:11 (Jesus isn’t ashamed to call us brothers) and Romans 8:16-17**: *“The Spirit himself bears witness with our spirit that we are children of God, 17 and if children, then heirs—heirs of God and fellow heirs with Christ, provided we suffer with him in order that we may also be glorified with him.”***

As we consider adoption, here are twoissues to keep in mind:

1. Motivation -- at the end of the day, the motivation for adoption should be to love a child. It can be easy to have other motives: to fill a void in your life, to rescue a child from a potential bad life (a hero complex), or even to do something good. But that will only sustain you so long. At the end of the day, you need to love this person as your child and not as a project.
2. Biological tie -- can you love a child who is not biologically related to you? Yes. This issue is often one that prevents couples from considering adoption but it’s good to talk it through with those who have traveled this path before you.

With adoption, there are many factors to consider, such as domestic, international, or embryo adoption, the age range of the child, whether you’d consider adopting multiple children at once. And you could consider whether the Lord would have you open your lives and home to a child with special needs. The process for pursuing adoption can vary but it involves submitting paperwork to an adoption agency, getting approval from a social workers, and getting finances in order.

What are costs? Once again, it can be expensive, on the order of tens of thousands of dollars if not through foster care. There can be some grants available and there is currently a $13K federal tax credit which helps offset the cost.

For more information, there is a CHBC Google group on this topic, and there are lots of good resources out there. The Christian Counseling and Education Foundation also has several good resources on this topic.

The adoption process is not easy. The system is not without flaws, and both parties often come to adoption from a state of brokenness. Social workers and state associations can make it difficult for Christians to adopt, particularly when dealing with issues of corporal punishment. Laws and wait times vary widely by state and finances are a very important consideration as well. If you are thinking through adoption, please let others and the elders know. We would be happy to be of assistance as you consider this path.

*Embryo Adoption*

We also want to briefly discuss embryo adoption since that was mentioned above. Embryo adoption is still somewhat new but is becoming more common. Embryo adoption is when couples, after going through IVF, decide their families are complete, have extra frozen embryos, and donate their remaining embryos to those who desire more children. It’s basically adoption that occurs with embryos instead of after babies are born. The woman would undergo a frozen embryo transfer to transfer the adopted embryo to her uterus. If she becomes pregnant, things pretty much proceed like any other pregnancy. As with other forms of adoption, there are various ways to pursue embryo adoption. From legal and financial perspectives, embryo adoption is much simpler and less expensive than other forms of adoption. It can also be less expensive than pursuing IVF on your own. There are church members who have been blessed with children via embryo adoption and would be happy to talk to you.

Any questions?

**4) Final Considerations**

As a congregation, pray for each other. Listen to one another. How should you talk to one another about this? Let me encourage you, if you’re struggling with infertility, to share with others what you’re thinking. Don’t talk just with those who are in similar positions as you; involve others as well.

If you’re not struggling with infertility, I’m not saying you should go and ask a couple if they’re struggling with infertility. That is not wise. And don’t assume that just because someone who doesn’t have kids, they don’t want them. There may be a number of reasons why they don’t have children, even if they desire to have them. Instead, let me encourage you to love and care for the whole person. They should not be defined by this one issue that they’re facing, so wait until you really know them well and have a relational context within which you can bring this up.

Book recommendations for you: Fearfully and Wonderfully Made by Megan Best; Adopted for Life by Russell Moore.

As we consider infertility, it is good for us as well to recognize God’s sovereignty and His goodness in all things. He knew us before we were born. He knows what is best for us. He is working all things for the good of those who love Him. Infertility is difficult but it is yet another area in our lives where we are called to trust Him and His purposes.

For all of us, I pray that we would be approach this topic with hope, looking forward to eternity. After all, in heaven, there will be no childbirth. In Mark 12 Jesus says men and women will not be given in marriage to each other, and so there won’t be new babies there. But more importantly, God will be glorified in all the world, as people from every tribe, and tongue, and language worship around His throne. God’s desire to be glorified in all the world will be accomplished. And we will marvel at His plan, which triumphs in spite of any frustration.

So we can have hope. The pain we experience here is real but praise God that He will use it for His glory and for our good.

**FAQs**

**What is infertility?**

The National Infertility Association defines “infertility” as the “inability to conceive after one year of unprotected intercourse (six months if the woman is over age 35) or the inability to carry a pregnancy to live birth.” They say that one in eight couples (12.5 percent) in the U.S. are affected by infertility; the Mayo Clinic suggests it may be as high as one in six (17 percent). So whether it’s ever been a subject of conversation for you and a friend or not, you know people who have struggled (or are struggling) with this trial.

**What other uses may there be for ARTs?**

Or, this technology might not even be used for infertility treatments but to let people think they have a variety of options in front of them. For example, a single woman in her late 30s may choose to get a sperm donor and have her own baby. Or, a gay couple could use it to have children.

**What are other reasons why freezing an embryo may be wrong?**

* As humans, we can never predict the future and can not guarantee that any such embryos will betransferred, even with best intentions – there are a number of situations that can arise: pregnancy with the first batch of embryos can be difficult and create health concerns for future pregnancies or advanced age can make it more hazardous to the wife to bear the child. There are so many things that can happen that we should not presume that we know what is best for a life.
* The process of freezing and unfreezing an embryo is inherently risky – it is getting better but still only about 90% viability, which means that 10% of the time, an embryo will die.

**What’s another example where clinics may recommend the willful destruction of embryos?**

Clinics may recommend the willful destruction of embryos after they are frozen. If the couple decides later that they don’t want to transfer these embryos, they face the dilemma of what to do with these embryos. Some may just let them thaw and therefore die while others may seek to donate them to research. Also, fertility clinics may push couples to conduct genetic testing of embryos as part of IVF treatments. Preimplantation Genetic Testing (PGD) is a screening test that can be conducted on embryos prior to transfer to determine the genetic health of the embryos. From the world’s perspective, this can help couples weed out embryos with genetic abnormalities. For the Christian, there is nothing inherently sinful about the testing itself. However, if genetic testing reveals genetic abnormalities in an embryo, the clinic will strongly encourage the couple to discard that embryo. From a Christian perspective, trusting God with the health of embryos avoids the dilemma of what to do if genetic testing reveals a problem.

**What might happen to surplus embryos?**

We have been talking about surplus embryos. But what if they aren’t needed in the future, either because the couple has the child they have desired or because those embryos, after undergoing genetic testing, aren’t deemed to have “high development potential”? Couples may keep them frozen indefinitely. The decision to stop freezing an embryo can be gut wrenching so keeping the embryos frozen is a way to postpone the decision. As a result, there are a surplus of these embryos scattered in fertility clinics around the US – estimated at 400,000 embryos, 10 years ago (I couldn’t find any more recent data). Thankfully, embryo adoption is becoming more common. Embryo adoption is when couples, after going through IVF, decide their families are complete, have extra frozen embryos, and donate their remaining embryos to those who desire more children. It’s basically adoption that occurs with embryos instead of after babies are born. The woman would undergo a frozen embryo transfer (FET) to transfer the adopted embryo to her uterus. If she becomes pregnant, things pretty much proceed like any other pregnancy. As with other forms of adoption, there are various ways to pursue embryo adoption. From legal and financial perspectives, embryo adoption is much simpler and cheaper than other forms of adoption.

**Notes about why people might not agree:**

1. **First, it can be an emotional topic.** Infertility has been around since the beginning of the world; in Genesis, Rachel says to Jacob, “give me children or else I die” – and the desire for children, which is a good desire, is arguably the strongest desire that we as human beings have.
2. **Second, Christians disagree on these topics.** You’ll find believers with different opinions. My call for us is for us to be gracious and to love other members even if we disagree. That being said, I am grateful that on the essentials, there is much agreement and we can be thankful for that.
3. **Third, the world provides very skewed thoughts on this topic.** Distorted ideas about life bleed into this discussion on ARTs. Infertility treatment specialists are incentivized to make you use whatever treatment is possible in order to have a baby. Fertility clinics also report statistics of success to the Centers for Disease Control and Prevention, so it’s in their best interest to make you go through all the fertility treatments. Any advice a treatment center gives needs to be weighed against a Biblical worldview. If you table your cynicism, then you might say their highest goal is help you have a child. As Christians, our highest goal is to glorify God and enjoy Him forever. Those are different goals that may lead to a very different set of decisions.
4. **Fourth, it’s good to note that we living in America are living in one of the most unregulated countries in the world when it comes to ARTs.** For example, whereas countries such as Sweden and the UK have legal restrictions to the number of embryos that can be transferred to the women’s uterus, America has none. That means that fertility clinics in the US are more likely to adopt an anything goes approach to fertility treatments than even in other places in the world.

**Birds and bees question?**

Let me briefly give you a description of what needs to happen for childbirth. Typically, every month or so, a woman ovulates, that is, releases an egg. The egg lives in her uterus for 12-24 hours, during which time if a sperm fertilizes it, a life starts. This is called conception. As the fertilized egg, called a zygote, grows, it becomes an embryo. For the next 9 months or so, the embryo grows into what’s called a fetus and a baby is born. That’s if everything goes well.

**Why is private adoption not recommended?**

Legally risky. Easy to fall through. Birth parents can take adoptive parents' medical support for months and then decide to parent. Also no counseling. No support system. No guidance. Emotional minefield. Also easy to make legal mistakes that could bring the validity of the adoption into question

If later a birth parent claims they signed away their rights under duress there is no agency to rebut the claim or document that everything was done proper.

**What about adopting a child from a different ethnicity?**

In Christ there is no Jew and Gentile and we should be open to doing so. At the same time, I personally think that adopting a child of a different ethnicity requires the parents to understand potential challenges that the child may uniquely experience given his or her ethnic background.

**What was Asherah?**

Basically, worship of a fertility goddess involved a doing things for her that, in return, would lead to fertility broadly defined, from pregnancy and childbirth to also having a good crop harvest. It is incredible how persistent this worship of Asherah was – it basically tracks the whole history of the nation of Israel, from the time of Moses through Gideon through kings both in the nations of Israel and in Judah. Even after the exile, the people of Israel still persisted in serving Asherah (see Micah).

**How is the timing for adoption?**

In some instances domestic adoption is faster than international adoption, but there are many variables for both.

**What other considerations are there for domestic option?**

Domestic adoption sometimes has what is called “open adoption,” where there is on-going contact with the birth parents -- and associated on-going obligations. There is also wide variety among open adoptions. Most domestic adoptions today involve some degree of openness.

**Should singles adopt?**

We believe that the Biblical model is for a child to be raised by a married man and woman. There are lots of ways singles can care for the widow and the orphan (e.g., mentoring a child who does not have one or both parents, supporting/sponsoring a child through responsible organization, supporting work that helps keep children in their families such as anti-trafficking organizations). Singles can also help support adoption by helping a couple in the adoption process or by helping them care for the child.

**What about rejoicing with those who rejoice?**

Should we add to the manuscript?

1. Chapter 1 of When Empty Arms Become a Heavy Burden: Encouragement for Couples Facing Infertility by Sandra Glahn and Dr. William Cutrer has a helpful discussion of how and why men and women often react differently to infertility. [↑](#footnote-ref-1)
2. 1 Timothy 5:8: “If anyone does not provide for his relatives, and especially for his immediate family, he has denied the faith and is worse than an unbeliever.” [↑](#footnote-ref-2)