

## Birth into Heaven

“I’m sure this birth will be everything you want it to be. “ The midwife looked up from my chart and smiled warmly. I breathed a sigh of relief as I lay back on the examining table and Sharon began the bimonthly ritual of checking and measuring.

Finally everything was in place. I had found a caring midwife and a pleasant hospital and I had a detailed birth plan. I wanted the natural childbirth experience I had had with my other two children. No drugs, no monitors, no plugs or IVs ...

In the backdrop of my reverie I realized that Sharon was standing over me with a perplexed expression on her face. She measured me again and then went to look at my chart.

“You’re thirty weeks along but you’re only measuring twenty-eight centimeters. I think we should get a sonogram.”

Oh, how annoying, I thought. I had a sonogram at twelve weeks and everything looked fine. As long as I can hear baby’s heartbeat and feel him kicking, what could possibly be wrong?

“I don’t want to know if it’s a boy or a girl,” I told the technician as she began scanning my abdomen. I looked up at the screen overhead as the technician, who had introduced herself as Laura, intoned, “Here are the legs, the arms, the bladder, the stomach, the spine ...” Here she paused and moved the scanner back and forth, “the ear.”

How cute, baby’s ear, I thought. I never thought there was anything to worry about until she continued staring at the screen with a confused expression.

“What is it?” I asked.

“I’ll be right back,” she answered shortly as she shut the door behind her.

The midwife and the technician came back in together. Sharon looked serious.

“Leah, for some reason Laura can’t find the skull bones on the sonogram,” Sharon began.

“But what does that mean?” I persisted.

“We don’t know. It could just mean our equipment is limited. I hope that’s all it is.”

“But she said she saw the ear. How can there be an ear with no skull?”

“We think you should have a level two sonogram so the perinatologist can have a look at it.”

I walked slowly out of the office and arrived home to my mom and my four-year old son and two-year old daughter. I sat down at the table. “Mom, they think something’s wrong with the baby. They said the skull bones are missing.”

For a moment she looked worried. “I’m sure it will be fine; doctors make mistakes all the time.”

I stared blankly into space as Max and Anna played surgery with their stuffed animals. I had two hours before my level two-sonogram appointment. I picked up the phone and dialed my husband’s work number. No answer. I hung up on the voice mail message. Where could he be, I thought and then realized that today was his secretary’s last day and the whole department had gone out for a farewell lunch. I strained my memory for clues to the restaurant they might have chosen. Nothing came to mind so I redialed his office extension over and over. I had no way to reach my husband to ask him to be with me in this time of uncertainty.

The time arrived for the level two sonogram. The midwife met me in the lobby of St. Luke's hospital. We sat down in the busy waiting area just as a young mother was stepping off the elevator with a screaming newborn in a car seat. I couldn't take my eyes off the tiny, pink and perfect baby.

The time finally arrived and I was led into a spacious sonogram suite. The blonde technician motioned me to the examining table. She began scanning my abdomen just as Laura had done earlier. She pointed out all of baby's perfectly formed limbs and internal organs, including a strongly beating heart. When she followed the spine up with her scanner she suddenly became quiet. She pushed the scanner deeply into my belly.

"Ow," I said.

"Sorry if I'm hurting you." She pressed firmly again and jiggled the scanner up and down as if something wasn't working properly. I was too nervous to ask what she was doing. I glanced at her face and saw a mask of quiet tension. Sharon placed her hand on mine and I gripped it tightly.

"I'm going to take these to Dr. Davis," the technician said abruptly as she ripped off a long strip of sonogram pictures and went out.

Moments later, she opened the door and stuck her head around. "Sharon, can I see you out here for a minute?"

As Sharon left the room and I was left alone, I hugged my womb and a surge of terror overcame me. I know it was not good news. What could possibly be wrong with my precious baby?

I prayed an Our Father and reached out for God's hand and felt only emptiness. Where is He when I really need him, I thought.

The midwife, technician and Dr. Davis entered together. The perinatologist gazed at me briefly with a pitying expression. "Your baby has the worst possible birth defect: anencephaly. Basically the brain and skull have not developed. There is no chance for survival. I'm sorry."

"But, but I don't understand. How could the ear be visible, but the skull absent?" I stuttered.

He pointed to the screen. "See the spine? Follow it up and . . . nothing is there. You can see the outline of baby's face. There are bones for the facial features and that is all."

"But the sonogram at twelve weeks looked fine."

"That's very common. Studies show this birth defect can't be detected by sonogram until around eighteen weeks."

"But we can hear a heart beat and feel his kicking. He feels exactly like my other two kids."

"Those are only reflexes." He paused briefly. "You may have some questions for Sharon and you'll need to think about your options." He emphasized this last word, and patted me awkwardly on the ankle as he left the room.

I turned to Sharon. "What did Dr. Davis mean about my 'options?'"

"Well, it's up to you," Sharon replied. "You can induce now or carry to term."

"I guess I do want to know if the baby is a boy or a girl," I said quietly.

"It's a girl," she choked on the words as tears filled her eyes. She reached to embrace me and encouraged me to let the tears flow, but I felt only emptiness. I realized that I hadn't talked to Steve since early that morning.

“I think I need to call Steve now.”

Sharon stepped out and I dialed Steve’s office number. He answered on the second ring. “This is Stephen Nguyen.”

I hated the thought of the task in front of me. Telling my husband over the phone seemed terrible, but leaving him out seemed worse.

“Steve? I’m at St. Luke’s right now –“

“How did your appointment go?”

“Not too well. There’s a problem. The doctor said our baby has a fatal birth defect.”

“What? No. Do they have any proof of that?”

“I saw it on the sonogram.”

“Maybe we should get a second opinion.”

“No, it’s really true. Please come home.”

“I’m leaving right now.”

Sharon led me out of the office. As we were getting into the elevator an office assistant looked up. Something in Sharon’s face reflected the outcome and I saw the assistant’s expression change from hope to dismay.

I crossed the street alone after refusing Sharon’s offer of a ride home. As I hiked up the asphalt parking lot the sun pounded down and my legs seemed to be made of lead. My head vibrated with thoughts from every direction: What would we say to Max and Anna? Who would use the diaper cream I bought last week? What would I tell my parents? What about my best friend expecting a baby at the same time? Would I be able to love a baby with a birth defect?

I arrived home to an empty house since Max and Anna were at my mom’s. Steve came running up to the door a few moments later. After I told him everything we held each other and cried.

We were beginning the biggest trial of our young married life, but one that would deepen our commitment to each other. Our two older children were a primary concern to us. How would they react to the news that their eagerly awaited sibling would not be the baby they expected? Our careful preparation for a new baby was little help in different circumstances. Max, four and a half, and Anna, two and a half, would be included in this child’s life as they had been thus far. We decided to delay telling them the news until we had a chance to get used to it ourselves.

After sharing our sorrow, we decided to make a visit to our parish church. As we prayed before the Blessed Sacrament, we found a quiet peace amid the tears.

I had told Steve the news that our baby was a girl. “What should we name her?” I whispered in the church.

We gazed at each other and said together, “Mary Magdalene.”

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The day after the sonogram was a Saturday and it was full of activity. Steve’s parents drove up from their town three and a half hours away. We spent the weekend with them and our extended family.

We were consoled by their sympathy and their desire to help us, but I felt overwhelmed by the decision that faced us. I wanted this pregnancy to be as normal as the others, but we had just been told that our baby would die. How could I face two more

months of a pregnancy with no baby to love and cuddle, no future, and as I saw it then, no hope? When Steve's parents gently told us the right thing to do was to carry our baby to term, I felt an impulse to resist.

A battle was being waged in my soul. I just wanted to wake up from this very realistic dream and find I was happy and full of life, healthy life. I knew instinctively the right thing was to carry our baby to term, but for the first time in my life, doing the right thing was very difficult.

I went to bed that evening feeling sadder for myself than for my baby. Why did this have to happen to me? I ate a healthy diet, exercised lightly, and received regular prenatal care. I drank filtered water, didn't smoke or drink alcohol and worried about standing too close to the microwave. I tried to be a good mother to my children and lead a life close to Christ and the Church. Didn't I deserve a healthy baby?

The next day we telephoned some friends, Allan and Carol Morris, and told them about our situation. When I mentioned that I wasn't sure I could handle two more months of pregnancy knowing the outcome, Allan replied, "If you try to hasten things you will probably regret it. Never run from the cross."

His words took root in my soul and were watered by grace. I realized that this was Mary Magdalene's life, her whole life, however brief. I decided to make the most of the time we had been given. She would have as much love as we could give her until her natural death.

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At my next prenatal visit I met Dr. Boyd, the obstetrician responsible for my care now that my pregnancy was considered abnormal. I felt apprehensive about meeting an obstetrician and worried about my "natural" birth plan being swept away with all the changes in my care.

Dr. Boyd bounced into the room, a tiny woman with wispy red hair caught up in a ponytail revealing multiple ear piercing. She seemed close to tears as she reassured me that she wanted Sharon to deliver our baby and she would be there in the background to make sure everything went as planned.

We informed them of our decision to carry to term, and then I carefully asked, "What about feeding her? Will I still be able to breastfeed?"

"Oh, I love that. What a motherly and nurturing thing to say," Dr. Boyd mused.

Sharon quickly answered, "We're not going to let your baby starve."

Toward the end of our discussion Dr. Boyd mentioned that even if our baby was breech, she would still recommend a vaginal delivery.

"But what if she's in distress?" I asked.

Dr. Boyd moved closer, looked into my eyes and rested her hand on my knee. "Now listen. I just want you to think about you. You have two other kids at home that need you. You don't want to be recovering from a C-section on top of everything else." She paused then continued, "I mean, we'll do one if that's what you want, but I don't recommend it."

I felt a spasm of anxiety. Now what? Were we obligated to do everything necessary for her to be born alive? What if the doctors were wrong about her birth defect? What if she died during delivery and I never had a chance to meet her?

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In the midst of our moral crisis we met with our parish priest Fr. Tony. As he led us into his cluttered office, he apologized for not being able to meet with us sooner, even though we had just called him a few days ago.

We made light and (to me) meaningless conversation. All I could think about was our baby. Finally talk turned to our situation. I sat uncomfortably on the couch and tried to look consoled, even though I felt like I had swallowed a brick. No words could ever make me feel better, I thought. Then Father remarked,

“Gee, you take your vitamins, try to eat right and do everything you’re supposed to and then something like this happens. It doesn’t seem fair.”

We nodded mutely.

“But, you know, we may not understand now, but in the end everything will be revealed and there will be nothing hidden from us.”

We asked about the funeral mass, and were surprised to discover the Church’s abundant liturgies for babies and children. I was struck by the distinction between the prayers and rituals for a baptized child and an unbaptized one. My hopes for our baby narrowed to one objective: her baptism.

Now began a season of intense prayer. From the moment we named our daughter until her funeral, we lived each trial with the help of unfelt grace. We prayed a novena to St. Mary Magdalene and then one to St. Gerard Majella, patron of expectant mothers, that ended on the vigil of the Assumption. It seemed every mass we attended contained a Gospel account of a miracle or a healing. Were we supposed to pray for a miracle?

Cards and phone calls came in as the days went by and the word spread among our friends and acquaintances. One family vowed to pray to Mother Teresa for our daughter, others to St. Therese the Little Flower and many joined in our novena to St. Gerard. Yet another poured a small glass of Lourdes water for me to drink.

Does God want a miracle? I kept asking myself. In my heart of hearts I thought not. With a mother’s instinct, I felt God had prepared me for this sorrow and his will would be accomplished for some greater good we couldn’t see.

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I was relieved to speak to my spiritual director and hear that it was fine to hope for a miracle but he cautioned me not to “pretend” that one would certainly occur.

He also solved our moral crisis over the necessity of having a C-section in the case of fetal distress. He pointed out that a Caesarean section was an extraordinary means and that it would not be wrong to refuse it.

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A week after we found out about Mary Magdalene’s birth defect, we decided the time had come to tell Max and Anna. They could sense that something was going on, that we were sad, we were distracted, we were different than we had been a week earlier.

“When we went to see the doctor last week, we found out our baby is a special baby. She might now be with us for very long, so we have to give her a lot of love while she’s here.”

Max looked at me for a moment. “Does that mean she’s going to die?”

“Yes, it does,” I replied.

“How long will she be here?”

“We don’t know exactly.”

“I think she’ll only live for three days,” said Max, and then ran out of the room.

“Baby in tummy,” said Anna.

The conversation ended, and I was drained. I knew more questions would emerge in the weeks to come.

Their questions gave us an opening to talk about heaven, and admit our own inability to know it all. Even as grown-ups, we don’t have all the answers. In one conversation, Max brought up his little sister and how she would love to jump and play. I gently reminded him that she was a special baby and was missing some things she need to grow. She would never be able to jump and play here, but in Heaven she would be made whole, so she could jump and play there.

“Why didn’t Jesus give her everything she needed to grow?” He asked.

“I don’t know, honey,” I replied as tears slid down my cheeks.

The next day I found a book on Heaven and I settled Max down during Anna’s nap and began to read aloud. He listened with a curious expression and as I finished the book he jumped of the bed without comment and went to play. Fifteen minutes later he came sobbing into the bedroom. I snapped out of my midafternoon drowsiness as he jumped into my arms.

“Max, what happened? What’s wrong?”

“I don’t want to go to heaven. I’ll miss Mommy and Daddy,” he cried.

I realized I had neglected to connect the story of heaven with his baby sister. He thought I was telling him about his own imminent departure.

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We met with the neonatologist at the hospital. A tall, soft-spoken man with a mustache, Dr. Kane answered our pointed questions about Mary Magdalene and what she would be like.

Her birth defect would affect only the top of her head; with a hat she could look “mainstream.” She would not have any higher cognitive abilities, meaning she would not see, hear, smell, taste, or experience touch. She would not be able to perceive, think or develop in any way. She would have little control over her body movement, so she would most likely move in an uncontrolled way. She would have only brain stem functions, meaning heartbeat, respiration, and very basic bodily reflexes. She might cry or be able to breastfeed.

I didn’t want to pretend our baby would be healthy or normal. I wanted to know. I was not horrified at his explanation of her possible defects; I was simply numb. Would I ever be happy again?

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Although September eighteenth was my actual due date, I focused on the feast of Our Lady of Sorrows on September fifteenth. It seemed an appropriate day and I prayed hard for Mary Magdalene to be born on that day.

September fifteenth came and went with no contractions. I was deeply disappointed and I felt forsaken by God. I decided to go to mass and afterward I felt compelled to tell the visiting priest my story. As we stood outside the church and I poured out the details, he commented, "Well, God chooses certain people for these crosses to be an example to others. So, praise God!"

I wasn't sure if I should laugh or cry.

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The next week and a half drifted by in an agonizing way. As much as I desired a spontaneous birth and a natural beginning to Mary's life, and as hard as I had prayed for her to be born near her due date, God seemed to have his own ideas.

On September twenty-fifth I appeared for yet another prenatal appointment, prepared to wait a full two weeks after my due date if need be. This time as Sharon measured my belly I watched her face closely. She looked perplexed and mentioned that I hadn't grown at all. As she listened to Mary Magdalene's heartbeat she gazed at her watch. "Her heartbeat has dipped a little bit; it's 120 or so."

"What does that mean?" I asked.

"I'm not sure. It could be a normal reaction that happens just before birth, but I'm not sure what 'normal' is for her. Your placenta is aging too and it's not as efficient at getting her what she needs."

"Do you think we should induce earlier than we planned?"

"It's really up to you. Why don't you go home, ask Steve about it, and let me know."

As I walked out I felt a catch in my throat. No one seemed to care about the fate of my baby. Well, I did, and I wanted her to be born alive.

After talking to Steve about the possibility of inducing sooner or later, we decided the sooner she was born the better chance she had to be born alive. We wanted to meet our baby girl; we wanted her to be baptized, and we wanted to take her home.

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Two days later we were scheduled to arrive at the hospital at six in the evening for an induction. As we drove west into the amber sunshine, I looked out the window as if saying goodbye to everything I saw. There's no going back, when I see you I again, I will have been through this experience I am anticipating and dreading all at once, I thought as we passed trees and houses and Kaneoween decorations.

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I only had a few contractions in the night from the gel induction, so the morning brought a nurse with Pitocin and a mission: to have this baby born by early afternoon.

The moment had arrived for the IV, the monitors, the plugs, wires and tubes I hated. I felt claustrophobic: trapped in bed with no way to control the labor pains but other drugs.

By mid-morning my confidence level had increased; the Pitocin wasn't as bad as I had imagined and I could handle the contractions. The best news was that I had dilated to three centimeters.

Around noon I was hungry and anxious that little seemed to be happening very quickly. The time was dragging by and the conversations going on around my bedside seemed trivial and inane. I was so anxious for the birth to be over and to finally hold our baby.

It was nearly three o'clock when I began to lose my focus. The contractions had intensified and my attempt to control them by walking around the bed tethered to the IV, and leaning over a nearby chair were of little use. I was sure I had to be dilating; I felt uncomfortable and anxious and annoyed by the people around me. When the midwife checked again, however, I was still dilated to three.

The tears started to flow as I gave in to discouragement. As much as I wanted to offer up my contractions and have as natural a birth as possible, I saw that God wanted a bigger sacrifice: that of my will. His would be done, not mine.

As soon as I decided to have an epidural everyone around me seemed to relax. I heard laughter and casual chatter amid my fear and humiliation. I disliked losing control over my body; I wanted to feel everything and offer up the experience of her birth, but I knew I was at my physical and emotional limit. As the epidural catheter was inserted I knew my surrender was total. The birth of this child belonged to God.

Three hours later our baby was still not born. The Pitocin was nearly topped out and I was physically and mentally fatigued. Emotionally I didn't think I could last much longer. Everyone left to go have dinner and I felt alone. I began to pray the Memorare and I said it over and over. Suddenly I felt a flow of blood.

"Help, help, I'm hemorrhaging," I yelled.

"Relax, it's just a little blood. It looks like you've dilated to seven."

"Praise the Lord; God is good," I whispered as I hugged the nurse. I continued praying as everyone ran in different directions. At seven o'clock the time had come for Mary Magdalene to be born.

As our extended family and a priest waited outside the door, the midwives and Dr. Boyd gathered around the bed. The midwives eased Mary out gently as Dr. Boyd stood back. I looked up to see her face covered with sorrow and dismay.

I thought, No. Our baby is dead.

I heard a tiny noise from my baby and Dr. Boyd stepped forward. "We need to get that baby out now." Then our daughter was born, beautiful to me and alive.

I reached for her slippery form and the priest came in immediately and baptized her. As our extended family joined the midwives, doctors and nurses around the bed. Everyone joined in the creed and the obstetrician ran to get a basin for the holy water. As Mary Magdalene was baptized and confirmed I felt a deep peace and lasting grace.

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Max and Anna came in and climbed up on the hospital bed. Max looked at Mary Magdalene cautiously. Anna held out her arms and said, "I rock him." We took dozens

of pictures of our three children and extended family holding our baby. It was late and everyone began leaving. Finally only Steve and I were left with our tiny baby daughter.

I had attempted to breastfeed after she was born and although she seemed to have a weak suckling reflex at first, all her movements came to a halt as her breathing became more and more irregular. The neonatologist suggested tube feeding her formula. I was crushed. Having breastfed my other two children, I had counted on nursing Mary Magdalene too. The nursery nurse brought in a pump for me to use, although she told me to expect very little milk, perhaps only a couple of tablespoons. When she returned with the soy formula, she was shocked to see I had pumped an entire bottle. Mary Magdalene was fed through a minuscule tube in her nose. With the tube in place, she was fed my breastmilk alone every few hours. I thanked God for the miracle of being able to do one thing for my daughter.

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After we had settled down for the night, I snuggled next to Mary Magdalene and closed my eyes. I awakened to the terrifying sound of gagging and coughing. I picked up Mary, who gasped and spit out a small amount of blood.

I paged the nurse frantically. When she came in she reassured me that the blood was probably from the delivery. We held our daughter as she gasped for breath. I rocked her gently as her color turned back from purple to light pink. As the nurse was leaving she turned and asked, "Do you still want to keep feeding her on schedule?"

We looked at each other. "Of course we do," I replied.

As we changed our baby's clothes we marveled at her perfectly formed fingers, little arms and legs and long toes. Her face was beautiful, even with its bruises from the delivery. We admired her features and compared them to Max and Anna's. I finally made myself look at the top of her head. I surprised myself with my lack of horror or fear. It simply wasn't as bad as we had imagined. Our daughter was beautiful.

Sleep seemed unimportant. Steve held Mary Magdalene in his arms, where she rested peacefully. We took turns holding her for the remaining hours of the night.

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In the morning all we could think about was going home. We prepared to leave but we had to fill out papers, talk to various counselors and rent a pump before we were allowed to go.

Our pediatrician came in and witnessed one of Mary's apnea attacks, which had been occurring with greater frequency in the hours since her birth. As Dr. Holden looked on, she struggled for breath, raised her tiny arms and gasped painfully. Our doctor gently informed us that death would arrive sooner rather than later. We had to get home.

Finally the paperwork was complete and I was wheeled to the car holding Mary Magdalene on my lap. The sun shone brightly and the sky was a brilliant blue. After an anxious drive home we walked in our front door and were met by Max and Anna, overjoyed to see their new baby sister. As we sat down on the couch and were surrounded by loving family members, Mary seemed to relax; she knew she was home, I

thought. The midwife came home with us to help with her feedings until hospice could arrive.

Steve was holding his daughter as she took her last breath. We had only been home for an hour when she stopped breathing. She didn't gasp that last time, or fight to breathe, she simply stopped and seemed to be at peace. Steve handed her to me and I cradled her in my arms. Sharon listened to her heartbeat with a stethoscope that seemed gigantic on her motionless chest. She told us her heart was slowing down and would eventually stop.

Her life outside the womb was sixteen hours long.

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We held her all day and even when the time came to take her to the funeral home I didn't know how I could let her go.

Steve decided to ride with Patti Lewis, from a hospice called Alexandra's house, to the funeral home. As I walked with him to the car leaves and twigs snapped under my bare feet. Steve climbed into the car and held Mary Magdalene on his lap as Patti waited patiently in the driver's seat. I asked if I could hold her one last time. I reached through the window and held her in my arms. Finally I knew the time had come. I ran into the house, sobbing, but then watched from the window as the car drove away.

Although we hadn't planned a rosary service, a priest who knew our situation offered to lead one for Mary Magdalene.

I made it through the rest of the weekend by looking forward to the next opportunity to see my baby daughter again. Saturday night Steve, Max and Anna and I went to the funeral home as a family. We had this time to be alone with our baby. Max and Anna had made handprints with finger-paint for their sister, and had each picked out a toy to put in their sister's casket. We knelt around her tiny white casket and prayed a Hail Mary together. Max started crying hard and he ran over to me sobbing, "Baby Mary!" His level of understanding struck me, and I comforted him as best I could.

Sunday evening arrived and we planned to meet our family and a few friends at the funeral home for the rosary service. We didn't plan on seeing the many friends that came to offer their sympathy and support. It was both comforting and hard to see so many people we hadn't expected. I was consoled by the lives she had touched, but I felt numb and speechless at their gestures of sympathy.

The rosary service with the accompanying sermon went by swiftly, and I remember little afterward except one reflection the priest offered, "In the eyes of God a day is one thousand years and one thousand years is a day."

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The next morning arrived bright and sunny and I put on my brown wool jumper, unsure what one should wear to a child's funeral.

We arrived at the church minutes before the mass was to begin. At the last moment Steve chose to carry Mary's casket into the church. I was deeply consoled by the funeral mass, particularly the "prayers for a baptized child." The pinnacle of her short life was her baptism, the greatest gift we have all received. Fr. Tony choked up several times during the mass.

We drove to Resurrection Cemetery and had a brief graveside service. As he left, our pastor pressed the crucifix that had lain on her casket into our hands. We were left alone at her grave. I carried the crucifix in one hand and Steve's hand in the other as we did the hardest thing we've ever done: walked away.

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Two months after the death of our daughter, I find I am still searching for someone to listen and comfort me. Steve is a great listener, but he needs comfort too. My arms hang useless and my purpose in life seems without meaning. I want to rock and hold, nourish and tend to my baby. I keep thinking, right now she would be six weeks old. Instead of cleaning under the refrigerator, I would be holding my baby close. Instead of playing "Hungry Hungry Hippos" with Max and Anna, I would be showing them their new sister's smile.

As I stood in the thin winter sunshine this morning, I was filled with an unfamiliar joy at the thought of my Mary Magdalene. Then the thought came to me: the mother cannot comfort the child, but the child can comfort the mother. And I realized the one I am seeking to comfort me is the one I miss so deeply, my own daughter Mary Magdalene can comfort me from heaven. Who remained at the foot of the cross to comfort Christ? Who was close to him in his suffering, at his death, and at his resurrection? My little Mary Magdalene has joined her namesake in heaven, and will comfort me and give me strength in this trial and in those to come.