Supporting Parents at the Time of Perinatal Loss

Offering Grief Support in the Hospital

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Disclosure

I have no actual or potential conflict of interest in relation to this program/presentation.
Learning Objectives

- Summarize grief related needs of parents experiencing perinatal of infant loss.
- Identify three ways to verbally support parents experiencing perinatal or infant loss that will support them on the trajectory of healing.
- Identify three ways to practically support parents experiencing perinatal or infant loss that will support them on the trajectory of healing.
- Describe the unique role health care providers have in supporting parents at the time of loss.
Perinatal Loss Bereavement Care IS

A REAL NEED

- Miscarriage (<20 weeks) effects 10 to 15 percent % of known pregnancies. [https://www.marchofdimes.org/complications/miscarriage.aspx](https://www.marchofdimes.org/complications/miscarriage.aspx)

- Stillbirth (>20 weeks) effects about 1% of all pregnancies, and each year about 24,000 babies are stillborn in the United States. [https://www.cdc.gov/ncbddd/stillbirth/facts.html](https://www.cdc.gov/ncbddd/stillbirth/facts.html)

Perinatal Loss Bereavement Care IS

A SERIOUS ISSUE OF PUBLIC HEALTH


- grief increases rates of premature death, gain/loss of weight, sleep disturbances, addictions- all of which have an impact on public health [https://www.nextavenue.org/bereavement-researcher-grief-stricken/](https://www.nextavenue.org/bereavement-researcher-grief-stricken/)
Perinatal Loss Bereavement Care IS

A RESPONSIBILITY AND A DIFFERENCE MAKER

• “Bereaved parents never forget the understanding, respect, and genuine warmth they received from caregivers, which can become as lasting and important as any other memories of their lost pregnancy or their baby’s brief life.” Leon IG. Perinatal loss: A critique of current hospital practices. Clin Pediatr. 1992;31:366–74.

• What happens in the hospital sets the stage for the family’s entire grieving process

Perinatal Loss Bereavement Care IS

AN OPPORTUNITY AND A PRIVILEGE

• to be invited into intimate moments of a family’s heartache

• to witness the profound love of parents for their children
First Things

• Remember that you are the one of the first people parents will meet in their new world of loss. Meet them with compassion, honesty, patience, and generosity.

• How do I support the bereaved parents that I am about to meet?

• What have these parents lost?
  • a future for their baby and their family, lost hopes and dreams
  • a sense of their own parenthood
  • for mom, a loss of being pregnant, a loss of physical connection with fetus
  • a sense of possibility

Talking to Parents

• Remember that you are caring for both the parents and their baby*, however far along the pregnancy was

• Remember that this is an experience of grief, but also of trauma. Let that inform your care.

• Be accessible

75% of families losing even an early pregnancy referred to the woman as “mother” and the products of conception as “baby.” Limbo & Kobler, Am J Matern Child Nurs. 2010 Nov-Dec;35(6):116-21
Always remember:

Words carry weight and bearing in the life of others. Choose them wisely.

Robin Dance

What to Say?

• Say what you are going to say, say it, then say it again. Simple, honest, and straightforward. Use real words, e.g. death, but avoid medical jargon.
• Speak to both parents, if possible, or find a support person.
• Assure parents of that it is possible to survive this type loss.
• Assure parents that you will stay with them and will not abandon them.
• Validate the loss, and point out memorable features.
• Tell parents what to expect, both in the hospital and when they leave.
Turns of Phrase

HELPFUL

• “I wish things would have ended differently.”
• “I’m sorry.”
• “You have a beautiful baby.”
• “We can talk later.”
• “Your baby is well loved.”
• “May I just sit here with you?”

LESS THAN HELPFUL

• “It was a blessing.”
• “You have other children to think about.”
• “It could be worse.”
• “Time will heal.”
• “At least …”
• “This is God’s will.”

Talk About the Baby!

• Ask about the baby’s name. How did they choose it? Was he or she named after anyone? When did they decide on a name? (Then use the name.)

• What did the baby like or dislike before she was born? Did you get a sense of personality? Tell me about him.

• Who does the baby look like? Does anyone else in your family have long fingers like that? “His eyes look like perfect little blueberries.”
Every baby is beautiful.

Parents see with eyes of love. They see their beautiful, much loved babies.

What to Do?

- Honor parent(s)’ need to be detached sometimes.
- Listen, listen, listen.
- Give parents time to process.
- Give parents all the information and access they want and need.
- Support the presence of family, including siblings, grandparents, etc..
- Explain resources to parents.
So much of what connects parents to babies they have lost is searing pain. Use the precious time you have with them to help create memories that are more than painful.

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Making Memories

- Suggest, discuss, help with photographs
- Support parents in helping to create mementos
- Assist parents in tending to baby—bathing, dressing, swaddling, reading, etc.
- Offer options, not orders. Let go of your own agenda.
Facilitate Holding* and Spending Time with the Baby

- Be creative
- Demonstrate holding the baby
- Lay baby on pillow
- Have parent hold baby in a basket
- Make repeated offers, not demands
- Explain and offer Cuddle Cot, if available

-100% of bereaved mothers who delivered macerated or malformed infants found that seeing and holding the baby after death was helpful. Sexton PR, Stephen SB. Postpartum mothers’ perceptions of nursing interventions for perinatal grief. Neonatal Netw. 1991;9:47–51

Saying Goodbye

- Talk through options with parents.
- Support their choices, even if they are not the choices you may have made.
- Learn about their culture’s customs, their personal beliefs.
- Invite spiritual leaders- blessing, baptism, baby naming ...
- Grant privacy, but do not abandon parents
- Go through resources.
Following Up

- Essential to help maintain the healthy grieving they started in the hospital.

- Ideally, the person who follows up should be a person who is most involved with the parents in the hospital.

- The connection with someone who knew their baby is powerful and healing.

- Allows caregiver feedback regarding the final outcome for the parents, and can energize the provider moving forward.

GRATITUDE

Special thanks to those parents who generously share their stories of heartache, loss, and profound love, and to those who so willingly share memories and photographs of their beautiful babies.
PARENT PANEL

OLIVER PATRICK