



**miscarriage
support**

with angie weigelt

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About Angie

Angie Weigelt and her family have been missionaries with All Nations in Romania for 11 1/2 years. She has been married for 20 years to her husband Kevin. She is a homeschooling mom to Kasey and Ethan and looks forward to meeting her other three children who she lost to miscarriage in 2000 and 2010. She is passionate about Jesus and being authentic and compassionate as she loves on and encourages the people around her. She loves cooking nutritious food, hiking the Carpathian Mountains that surround her city, photography, reading and doing puzzles.

Dear Friend,

Recently your loved one took a very important step in coming to a miscarriage support group. She probably did this with very mixed emotions, yet recognized a need for healing and a resolution of her grief regarding the loss of her child due to her miscarriage. She is in a very vulnerable place and your role in the coming weeks is very crucial.

What is your role in this process? In your own loving way, give her the support that only you can give. Initial reactions to grief are often very intense. Know that this is a season and that your loved one will not react in this way forever. ALLOW her this time. Let her cry. Hold her if she wants you to, but don't try to "fix it". Encourage her to work through her feelings. Be willing to listen without judgement or condemnation if she wants to talk. And if she doesn't want to talk, let her know that this is okay with you for the time being.

Towards the end of the group we will be having a memorial time and we will be dealing with how your loved one feels about the child she lost to miscarriage, this will likely be a very difficult time for her. Be especially tender and understanding with her as she grieves the loss of her child (children). If you've never been pregnant, it may be hard for you to understand how a woman can get so 'worked up' over something so tiny and that happened in the past. We suggest you invite her to explain these feelings when the time is right.

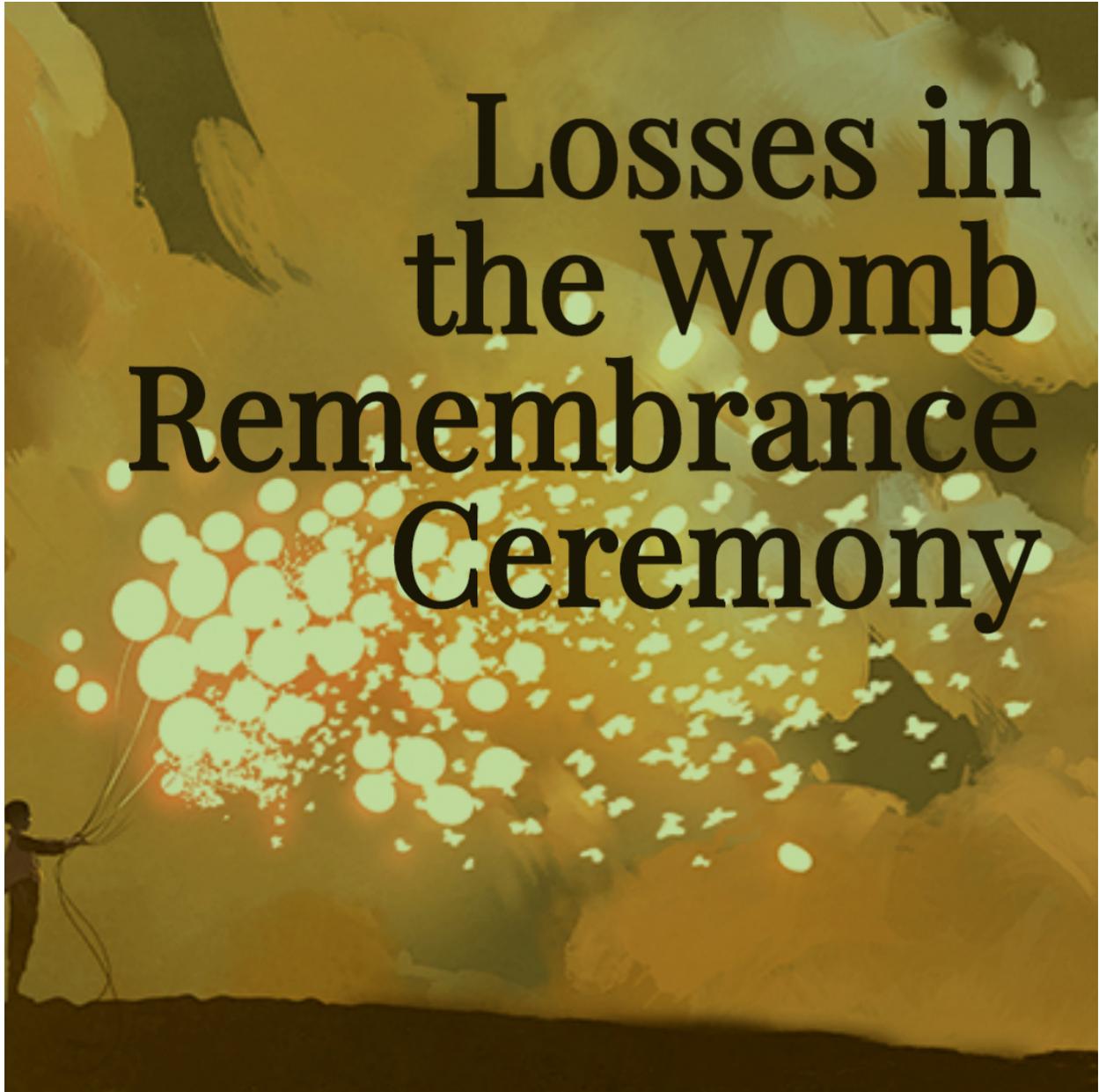
We wish there was a magic wand that we could wave over your loved one to "make her all better". The truth is grief is a process and the task of healing is often a long journey. You can be a tremendous source of encouragement and understanding for her in the coming weeks. Pray for your loved one daily as she struggles with the loss of her child. Even though there will be ongoing memories of this child for her, the goal of this group is to help her find healing and bring resolution to her loss. I pray that your home and family will be richly blessed as a result of her working through this issue.

We realize that you too are grieving the loss of this child and if during this time you have any questions or concerns or if there are aspects of your grief and memory of the miscarriage that you would like to talk to someone about, please do not hesitate to email me at we4weigelts@gmail.com.

Warmly,
Angie Weigelt
Group Facilitator

Losses in the Womb Remembrance Ceremony

In this special edition of Crowned we hold a ceremony to name and remember the children lost in the womb. The ceremony is for all families who have lost a child through miscarriage, abortion, or stillbirth—recently or in years past. This simple yet profound ceremony will create a moment in your family history that honors the life of the child you never got to know. It is a celebration of life that hopefully will add another layer of healing to your journey. You can find this audio in the Losses in the Womb album at sistersofthecrown.org/audio



Miscarriage Support Group Guidelines (for those desiring to facilitate a group)

(Taken from SHARE guidelines and ground rules and Pregnancy Counselling Centre guidelines for support groups).

-The goal of this group is that for the next seven weeks, we find a safe place to share about our losses and find support and healing.

-A sense of trust and safety is built by confidentiality – please share only **your** feelings and experiences outside this group. (We want to encourage you to talk with your spouse about your feelings and experiences, we want to increase communication, not create a communication gap.) If you feel unable to commit to this level of confidentiality, then for the sake of the group, it would be best if you refrained from attending until able to do so.

-Each person's experience is unique and valid. No one is here to criticize or analyze.

-Feel free to share or not share your feelings and experiences in the group. You have the right to speak or to be silent and the right to ask questions and the right not to answer them.

-In order to create safety in the group, please refrain from giving advice, interrupting or judging other members of the group. Please accept others just as they are.

-You are free to take notes on information you learn in the group so long as your notes respect the confidentiality of group members.

-It is ok to cry – there are tissues available. Please be sensitive to your neighbor's needs. 'Rescuing' will limit the grief and reconciliation process. If you are hurting with someone, simply tell her. I ask your permission to cry too.

-If you need to leave the group at any time, please inform the facilitator and feel free to go.

-If you wish to share about a bad medical experience, please refrain from using the names of doctors, nurses or hospitals.

-After a short presentation each week feel free to respond to the topic discussed or anything else you wish to bring up. I encourage you to respond to each other.

Teachings Week 1 - 6

Week 1 - Common Reactions to a Loss Caused by Miscarriage

When a woman experiences a miscarriage, it is more than just a loss of tissue or a medical process. She has lost her baby, and the hopes, dreams and future with that child. She has lost seeing her baby take its first steps, ride a bike, graduate from high school. Unfortunately society does not always recognize this loss and instead invalidates the woman's experience with comments like: "it's all for the best", "you are young, you can have another", "at least you didn't know the baby very well", or "you have other children already, some people have none". These comments further invalidate the woman's experience.

As a result, many women feel very alone with their responses to their miscarriage experience and keep their experience to themselves. This often results in further feelings of isolation and the feeling that you are "losing it" or "going crazy".

The goal of this support group is to help you to recognize who and what you have lost and to get in touch with and process in a healthy way your feelings about your miscarriage experience(s) and the baby(ies) you lost. Following are two lists of how perinatal or miscarriage loss can feel and typical responses of women who have had miscarriages. In reading these lists it is my hope that you will feel 'normalized' and validated in your miscarriage experience(s) and in your reactions and feelings towards your miscarriage(s).

Miscarriage Loss Feels Like . . .

(taken from the Perinatal Bereavement Society of Ontario website www.pbso.ca)

- a bad dream...is this really happening to me?
- a video of the whole experience keeps playing in my head.
- I'm cold & numb...there is a feeling of emptiness & coldness in my chest, as if my heart turned to stone.
- I've been "ripped off"...I feel cheated...it's not fair!
- a gray world without my baby.
- I'm overwhelmed...I feel out of control...feelings come out of nowhere and wash over me...I feel torn up and raw.
- desperate loneliness...nobody really cares.
- nobody understands that I really had a baby and that I want that baby back.
- constant anger...I feel angry at the baby for not growing properly...I feel angry at all the unfeeling people around me.
- People are judging me and watching my responses...I'm centered out & on parade.
- My baby is still kicking inside of me...I hear my baby crying...my arms feel empty, my arms ache, I still feel pregnant.
- a failure...I've let everyone down.
- I should get pregnant and have a healthy baby right away to prove that I can & to make this pain go away.
- incompetent...and less than a woman/man.

Interview responses of women regarding their miscarriage experiences in order of more to less common:

(taken from Allen and Marks' book, *Miscarriage: Women Sharing From the Heart*, see Appendix C pages 247-248)

- feelings of loneliness
- that a part of them had died
- confusion about their emotional and physical experiences
- feeling out of control emotionally and/or physically
- that they had caused the death of their babies
- feeling internal chaos or disorder
- that their miscarriage was experienced as the death of their children
- experienced their babies as whole and living human beings
- consciously visualized their babies during their pregnancies
- felt that pain would never completely go away
- had illogical or strange thoughts
- changes in their sex drive
- feelings of devastation
- thought of themselves as mothers to their babies
- dreamt about their babies after their miscarriages
- created mementos of their babies
- felt a sense of closeness or contact with their babies after their miscarriages
- had a sense of the sex of their babies
- doubted they would ever get through their grief
- felt concern for their sanity
- had nightmares
- had yearnings to do odd or irrational things
- experienced panic attacks
- felt a sense of searching for their babies
- had thoughts of their own mortality
- named their babies
- experienced conflicts of reality about their babies
- had thoughts of suicide

**Read through or give participants to take home "Shells Poem" and "Sisterhood of Sadness" handouts found in the Appendix at the back.

References

Allen, M., & Marks, S. (1993). *Miscarriage: Women sharing from the heart*. New York, NY: John Wiley and Sons, Inc.
Perinatal Bereavement Society of Ontario. accessed on January 6, 2005.

Week 1 - Questions to Consider

From this week:

-Did/do any of the descriptions of miscarriage describe your experience(s)? How so? How was/is your experience(s) different? If you find it helpful, journal about your experiences.

-Did/do you find yourself experiencing any of the responses to miscarriage listed above? Which ones? Did you have different responses? What were they?

-Did your experience(s)/response(s) change over time? In what ways?

To prepare for next week:

-As you think about your miscarriage experience(s) what have YOU specifically lost? (your baby, hopes, dreams, etc.)

-What is your current understanding of grief and the stages/seasons of it?

-Have you felt changes in the way you view/experience your miscarriage? Can you describe these changes and the different emotions/experiences that you have had?

Week 2 - Understanding Grief

Understanding the grieving process is crucial to those who have experienced a loss as it allows them to feel 'normal' at a time when they feel a variety of emotions with varying intensities. It also gives them permission to acknowledge and grieve the losses they have experienced. It is crucial that these feelings be processed and worked through, as stuffing them or refusing to face them will cause these feelings to surface in other physical or emotional ways that can be detrimental to the health of the bereaved.

Emotional and Physical Aspects of Grief

(taken from Allen and Marks' book, *Miscarriage: Women Sharing From the Heart*, see pages 135-143)

The grieving process is a very individual experience and includes a variety of emotions with varying intensity and duration. The following list of emotions and aspects of grief can help you to recognize and give language to what you are feeling. This list can be used to help you realize that what you are feeling is a normal part of grief. It is not necessary to experience all of these emotions. Some emotions may be experienced at different parts of the journey and some not at all.

Emotional Aspects:

- Confusion: shock or disbelief; confusion and disorganization; conflict; craziness
- Depression: loss; withdrawal; elevation of mood; energy, sleep, appetite, and sexual disturbances; despair; self-destructive thoughts and feelings
- Inadequacy and Loss of Self-Esteem: helplessness; purposelessness; failure; embarrassment; guilt
- Trauma: devastation; irrevocable injury; loss of control
- Hurt: betrayal; violation; abandonment; self-pity
- Anger: irritability; bitterness;
- Anxiety and panic attacks
- Longing for Closeness: loneliness; searching; grasping; spiritual connection
- Other: idealization; bargaining; nightmares or unusual dreams; preoccupation; jealousy; frustration
- Healing: relief; reorganization; recovery

Physical Aspects:

- chest: pain, heaviness, tightness, heart palpitations
- head: aches, migraines, faintness or dizziness
- throat: pain, tightness, feeling smothered or choked
- back: aches or tightness
- stomach: aches, nausea, diarrhea, indigestion, or empty feeling
- mouth: dryness, numb & tingling lips, repeated yawning
- muscle: tension, aches or weakness
- sickness: colds, flu or frequent illnesses
- sex: decreased, increased or no interest in sex

-miscellaneous: shortness of breath, sighing, accident prone, lack of strength, changes in menstrual periods, allergic reactions, panic attacks, cold and hot flashes, tingling in fingers and feet, sweating, shaking, blurred vision or numbness

Stages/Tasks of Grief

To bring some shape to the vagueness of the grieving process, experts have identified stages of grief. One expert believes that there are four stages of grief:

- (1) shock and numbness
- (2) yearning and searching
- (3) disorganization
- (4) reorganization (Davidson, 1984, p. 78).

Another identifies five stages of grief:

- (1) denial and isolation
- (2) anger
- (3) bargaining
- (4) depression
- (5) acceptance (Kubler-Ross, 1969, p. 38-137).

Other authors prefer to see the grief stages in terms of tasks that need to be fulfilled or 'grief work' as this gives the bereaved a sense of active participation in the reconciliation process rather than a passive event that 'happens to them'. One author lists four tasks that are required to do grief work:

- (1) To accept or admit the reality of the loss.
- (2) To experience or acknowledge the pain of grief.
- (3) To adjust to a different environment in which the deceased is missing.
- (4) To withdraw and relocate emotional energy by investing it in other relationships and moving on with life (Worden, 1982, p. 37-51).

Breakdown of Grief Process

(taken from Lamb's *Starting Your Own SHARE Group* (5th ed.), see pages 4-8 and 4-9)

Following is a breakdown of the phases of grief, including a timeframe and how you may be feeling during each phase. As with all the emotions, phases, stages etc. of grief listed above, it is important to remember that the grieving process is a very individual and unique one and is also very normal and necessary. The phases listed below may overlap or occur at different times. It is also important to note that every parent will grieve differently. Communication is the key.

Phase 1: Shock and Numbness

- initial phase that may last 48hrs – 2weeks
- controlling emotions may be difficult; you may experience fear, anxiety, guilt and depression
- you may have difficulty making decisions
- you may feel exhausted and not be able to sleep or may sleep all the time
- lack of appetite is common
- friends will be supportive at first, but after a month or so may feel you need to 'get it together'. This is due to a lack of understanding of the time it takes to heal from a loss.

Phase 2: Searching and Yearning

- may last for months
- anger against the doctor, nurse, hospital and God is common
- feelings of restlessness and impatience can occur
- don't be ashamed to express what you are feeling. Holding anger in may cause it to turn inward and result in depression and feelings of guilt.

Phase 3: Disorientation and Disorganization

- this phase reaches its peak in the fourth to sixth month
- depression is the strongest emotion felt
- a lack of motivation is common
- you may show signs of overeating or the inability to eat and you may lose interest in your appearance
- withdrawal from outside functions and family gatherings can occur

Phase 4: Reorganization

- tends to begin in the 18th to 24th month and does not occur quickly
- a sense of release and renewed energy may be felt
- improved judgement occurs
- you will be able to enjoy yourself and have a good time without feeling guilty
- your child(ren) will never be forgotten, however, you will be able to look forward to the future and go on with your life.

Read through or give participants to take home "Glass in the Knee" handout found in the Appendix at the back.

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- Allen, M., & Marks, S. (1993). *Miscarriage: Women sharing from the heart*. New York, NY: John Wiley and Sons, Inc.
- Davidson, G. W. (1984). Understanding mourning. In T. Moe, *Pregnancy care in pregnancy loss: A ministry long needed*. New York, NY: The Haworth Pastoral Press.
- Kubler-Ross, E. (1969). *On death and dying*. New York, NY: The MacMillan Company.
- Lamb, J. M. (1991). *Starting your own SHARE group* (5th ed.). SHARE: Pregnancy and Infant Loss Support, Inc.
- Worden, W. J. (1982). Grief and grief therapy. In: B. Webster, *Grief journey: Finding your way after a loss* (p. 37-51). Canada: Greenleaf Consultants.

Week 2 - Questions to Consider

From this week:

-Which of the seasons or aspects of grief have you experienced?

-Which one(s) are you currently experiencing?

-What is it that you are _____ (angry, guilty, shocked etc.) about? How much of your time/energy is taken up by this emotion/season of grief? How much is taken up by the other emotions/seasons?

-If it would be helpful, write the pattern or stages of grief that you have experienced. It can be similar to or completely different from the ones listed above.

To prepare for next week:

-How did the circumstances of your miscarriage inhibit or make the grieving process difficult for you?

-Where there any ideas/myths/or social stigmas that inhibited or took away your permission to grieve or process your loss(es)?

-Was there anything said to you during your miscarriage experience(s) that made it more difficult for you?

-As you think about your grief journey and who you have lost what insights do you have as you anticipate the memorial service?

-Did you know the sex of your baby(ies)? If not, some women say they had a 'sense' of what sex their baby(ies) was. Did you? Some women have found it helpful to decide and remember their baby(ies) as a boy or a girl. Would this be helpful for you?

-After your loss did you choose to name your baby(ies)? If not, would you find it helpful to do so now?

Week 3 - Circumstances and Social Stigmas/Myths that Inhibit/Prevent Grief

There are many circumstances and societal messages and myths surrounding miscarriage that when experienced all together can be a very overwhelming experience. The first is the message that babies in early pregnancy are not really babies or even 'fetuses', but rather only 'embryos'. The value of the baby and the extent of loss are seen as increasing with the age of the developing baby - the loss of a full-term baby is greater than that of an embryo. A miscarriage is looked at as 'no-big deal' by a society that discards and incinerates miscarried babies. The reality of the baby and the legitimacy of the loss in a miscarriage are often invalidated by what women have learned from society.

This is further complicated by the fact that in miscarriage, women do not usually know what caused the death of their baby and they are left with this crucial question unanswered and unresolved. Because the death occurs within the woman, she often sees herself as the only probable cause of the death and worries that she did something wrong. Medical terminology can also feel confusing and seem to blame the mother, i.e. 'miscarried', 'incompetent' cervix, etc.

The fact that there is no evidence of the baby - no visibly pregnant tummy, no knowledge of the sex of the baby, no body - further complicates the process and makes it difficult to validate to herself or anyone else that there ever was a baby. The absence of the normal grieving rituals, funerals, memorials etc. that bring closure and facilitate the grieving process are also typically absent for the woman who has experienced a miscarriage, further complicating her grief.

The difference in emotional responses to a miscarriage by mothers further complicates the situation as a grieving mother cannot be certain that others in her situation will share her feelings, further isolating her from the validation and support she needs. Often women who experience miscarriage believe that they are very alone in the way that they feel and turn inward with their grief. They are often the only ones who commemorate and remember the child(ren) they lost and with this comes a need to hold on to both the grief and the memories, for to let go would mean that their child is gone without being noticed or remembered.

(taken from Allen & Marks' Miscarriage: Women Sharing from the Heart see pages 12-19)

Two other factors that contribute to the circumstances surrounding a miscarriage are the fact that the baby lost is idealized because the parents did not get the chance to know this child with its flaws and imperfections. Letting go of a 'perfect' child is difficult. The other factor is that the loss of a baby is also a loss of one's self and their future. Because the baby is often imagined with aspects of the parents' attributes and is a physical part of the mother, a miscarriage can feel like a part of you is missing. The death of a baby is also the death of a part of the parents' future, their legacy, their parenthood and their family (Davis, 1991, p. 5-6). This makes getting on with life particularly difficult as the death of the future means a loss of meaning in life (Moe, 1997, p. 76-77).

Societal Myths that Inhibit Grief

(taken from Allen & Marks' *Miscarriage: Women Sharing from the Heart* see pages 165-170)

Myth: Emotions other than sadness, anger, and guilt have nothing to do with grief.

Reality: There are many emotional, physical, intellectual, behavioral and spiritual aspects to grief.

Myth: Some losses are trivial.

Reality: Comparing and trivializing losses is unhelpful and results in invalidation. The worst type of loss is yours.

Myth: We know how others feel.

Reality: Every loss is unique to each person as is their response to that loss. No one can know for sure what another person feels unless that person tells them.

Myth: We know what others need to do in order to heal.

Reality: Telling others what to do to help them heal undermines confidence in their ability to think for themselves, distracts them from what they already know about themselves and prevents them from being true to themselves.

Myth: Reminders of the "bright side" console grief.

Reality: These responses move people away from grief and encourage suppression and a reality based on platitudes that will crumble when other life crises arise. These comments prevent the working through of grief and can cause guilt and anxiety when those grieving aren't happy. "Healing is not just a positive thought away."

Myth: Grief over a great loss only last for weeks.

Reality: It is normal to grieve the loss of a loved one for years and on some levels for the rest of our lives. We do not control our rate of movement through grief and comments that question the need to 'still' grieve cause an increase in anxiety, doubts of self-worth and confusion.

Myth: Showing sadness is weak or wrong.

Reality: In our culture crying openly tends to be viewed as weak or wrong on some level. It lacks appreciation for the efficient and functional nature of grieving. By being admired or understood for who we appear to be, we are not understood as we truly are and have trouble trusting and being loved by those around us. This also brings the belief that others are doing better than we are and that we don't measure up. True expression of one's self and feelings before others can be very bonding and healing.

Myth: It's best to avoid the subject of loss. We may just upset the bereaved.

Reality: Those who have experienced a loss are already in pain. By ignoring the loss it gives the impression that one doesn't care and that makes the bereaved feel lonely or unloved.

Myth: Crying in front of the bereaved will make them feel worse.

Reality: Others' tears relate to and access the tears already present in the bereaved and make it safe for them to release their sadness.

Myth: We can best protect ourselves by altogether avoiding the bereaved.

Reality: When people are anxious or uncomfortable about topics of pain, loss or death, they avoid the bereaved in order to protect themselves and to avoid feeling embarrassed or uncomfortable. This and the fact that death causes people to face their own mortality can cause them to avoid the bereaved, leaving the bereaved feeling abandoned, rejected or deserted.

Unhelpful comments and reactions:

- "Well, it wasn't really a baby."

- "Oh well, you'll have another one."

- "You have your other children."

- "Thank God you weren't very far along in your pregnancy."

- "I guess it was for the best."

- When people react to the loss of your child in a way that devalues the unborn baby. Because others have not seen or interacted with the baby, there is little evidence of the baby's existence and it is harder for them to see the significance of the baby's death. They may end up reacting as though the person who died was someone they had never known.

(taken from Vredevelt's *Empty Arms: Emotional Support for Those Who Have Suffered Miscarriage or Stillbirth* see p. 49)

- When people 'pull grief' from you because they believe that your response at that moment is not intense enough instead of allowing you to express whatever you feel at that time.

References

Allen, M., & Marks, S. (1993). *Miscarriage: Women sharing from the heart*. New York, NY: John Wiley and Sons, Inc.

Davis, D. L. (1991). *Empty cradle, broken heart: Surviving the death of your baby*. Golden, CO: Fulcrum Publishing.

Moe, T. (1997). *Pregnancy care in pregnancy loss: A ministry long needed*. New York, NY: The Haworth Pastoral Press.

Vredevelt, P. W. (1984). *Empty arms: Emotional support for those who have suffered miscarriage or stillbirth*. Portland, OR: Multnomah Press.

Week 3 - Questions to Consider

From last week:

-As you think about your grief journey and who you have lost what insights do you have as you anticipate the memorial service?

-Did you know the sex of your baby(ies)? If not, some women say they had a 'sense' of what sex their baby(ies) was. Did you? Some women have found it helpful to decide and remember their baby(ies) as a boy or a girl. Would this be helpful for you?

From this week:

-What circumstances were particularly difficult for you?

-Which myths or social stigmas made your experience(s) difficult?

-Did you have hurtful or unhelpful comments said to you?

-How did you deal with each of the above difficulties at the time?

-How are you dealing with them now?

-If your response is different than it used to be, what allowed you to change?

To prepare for next week:

-In dealing with your loss what did you do to take care of yourself?

-Did others help to take care of you during your miscarriage experience?

-What did they do that was helpful? Unhelpful?

-What are some specific things that you would like to bring to the memorial service to honor your baby? (i.e. a photograph or ultrasound picture, artwork, a stuffed animal, a sculpture, mementos from the hospital or whatever you would find meaningful)

Week 4 - Taking Care of You and Helping Others Take Care of You

Taking Care of You

- include family and friend to share your grief and receive their support
 - ensure you are getting good nutrition
 - avoid or reduce use of alcohol and sleep medications and tranquilizers
 - get lots of rest, even if you are unable to sleep
 - get exercise and be active
 - if your mind wanders, avoid operating heavy or dangerous equipment, including cars
 - talk and/or write about your baby, your feelings and your grief
 - use your baby's name when you talk about him or her
 - talk about your medical experience and the feelings surrounding it
 - acknowledge your status as a mother or father, even if this is your first baby
 - if possible, share the first days at home with your partner
 - encourage visitors when you are ready
 - know that difficulty making decisions and doing everyday things is normal and only temporary
 - journal your feelings in a memory book and/or make a baby book from the cards, medical records etc. from your experience
 - if you find your faith wavering, talk to your clergy
 - set aside time to talk with your spouse
 - try not to make major decisions or major changes in your life until you are ready. Keep the rest of your life as intact as possible
 - read books, articles, poems etc. when you feel ready
 - call hospitals and/or support organizations, to find the support resources, people or groups you need
 - admit to yourself and others when you need help
- (the above was taken from Ilse's *Empty Arms: Coping with Miscarriage, Stillbirth, and Infant Death*, see pages 52-54)
- respect your own grieving needs and do what you need to heal
 - express your emotions (this is key to relieving pain and understanding your grief process) via talking, writing, journaling, drawing, sculpting, painting, music
 - to help you cry read sad books, listen to sad songs, or watch sad movies
 - vent your anger: rip up old phone books or magazines; beat a pillow or your bed, etc.
 - make yourself take a shower and put on nice clothes
 - get a massage, manicure, facial or pedicure or soak in a warm bubble bath
 - expect less of yourself and set short term, easy to achieve goals
 - do things you have always wanted to do
 - take care of something living like a pet or a garden
 - hold a baby and cry if you need to
 - take care of someone else by sending them flowers or a note
 - talk to God about anything on your mind, including expressing your anger

- find out where you can attend a memorial service for miscarried babies
 - go for counselling if you need to talk about anything
 - read and learn about miscarriage and grief to help you understand yourself
- (the above is taken from Allen & Marks' *Miscarriage: Women Sharing from the Heart* see pages 220-226)

Helping Others Take Care of You

- carefully choose those whom you will confide in
- let others hug and physically touch you
- encourage your friends to talk about your baby
- tell your friends what kind of help you need
- know that you help your friends when you let them share your grief
- look for people to whom you can give

(the above is taken from Rank's *Free to grieve: Healing and encouragement for those who have experienced the physical, mental and emotional trauma of miscarriage and stillbirth*. See pages 118-121)

- plan how you will share your news with colleagues and acquaintances and respect your need to decline discussing details you are not comfortable sharing
- if someone makes an insensitive remark, allow your feelings of upset to surface and if you decide, use the opportunity to educate them on pregnancy loss and inform them of how they could have responded in a more helpful way
- consider telling those close to you who are pregnant or who have small children that you may have difficulty socializing with them for a while; don't be afraid to send your regrets to celebrations you feel unable to attend

(the above is taken from Kohn & Moffat's *A silent sorrow: Pregnancy loss: Guidance and support for you and your family*)

- if you can't tell the news of your loss to others, ask someone else to do it for you
- encourage others' nurturing by telling them the specific things they do that you appreciate

(the above is taken from Allen & Marks' *Miscarriage: Women Sharing from the Heart* see pages 220-226)

Dealing with Unhelpful Comments and Blunders

There are many different approaches to dealing with the unwanted or hurtful comments of others; following are different sets of suggestions. Like many things associated with grief and loss, the way you chose to respond may vary with time and the circumstances you find yourself in.

What to do when bombarded with unhelpful comments:

- assume the best and realize intentions are usually not malicious
- realize that unhelpful remarks often come from ignorance and a lack of understanding
- because many people respond to death with denial, your baby's death may be treated this way as well, though not the best response, it may be all they know to do, try to make allowances for them
- accept the fact that people will want to give you advice-keep that which is good and helpful and throw out the bad
- resist the urge to hold bitterness or grudges in your heart as it will only add to your pain and lengthen the grief process

-when someone you love says something hurtful, when you feel able say, "When you said _____, I felt _____ (name an emotion). It would be really helpful if you would _____ (name what you want). Will you please?" They may feel bad and become defensive, so be prepared to assure them of your love.

-kindly tell people who give hurtful or unwanted advice, "I am not asking for your advice/input on this; I just need to get this off my chest. What I would really love is for you to just lend me an ear and try to understand."

-tell those who are nervous or uncomfortable around your tears that crying helps

(the above is taken from Allen & Marks' *Miscarriage: Women Sharing from the Heart* see pages 220-226)

The five worst comments you may hear and what to say in response:

Comment: "It happened for the best."

Response: "I know you mean to be comforting, but I don't think bad things happen to people for their best."

Comment: "Don't worry, you can have another baby."

Response: "I'm very sad about losing this baby, who means so much to me."

Comment: "You didn't really know the baby, so it's not like losing a child who has lived with you for a while."

Response: "I'm sad because I will never know this baby."

Comment: "I know exactly how you feel."

Response: "It's hard to know how this feels unless you've been through it yourself."

Comment: "What are you going to do now?"

Response: "I don't really feel like discussing that right now. I'd rather talk about the baby I just lost."

When people make no comments at all or say "I don't know what to say."

Response: "I realize you don't know what to say about my pregnancy loss, but I don't mind talking about it, and it helps me to remember my baby."

**Read through or give participants to take home "How to Help Someone You Know Who Has Experienced a Miscarriage" handout found in the Appendix at the back.

References

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Kohn, I., & Moffat, P. (2000). *A silent sorrow: Pregnancy loss: Guidance and support for you and your family*. New York, NY: Routledge.

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Week 4 - Questions to Consider

From this week:

-What are some additional things that you can do to take care of yourself that you haven't done before?

-What are some new ways that you can help others help you?

-Of the different approaches to dealing with unhelpful/hurtful comments, which seems the best for you right now?

-Are there people you need to talk with and/or forgive about things that were (or weren't) said or done that were hurtful to you?

-Are there people you need to talk to and/or thank about things that were (or weren't) said or done that were helpful to you?

-Are there people who would benefit from you giving them the handout, 'How to Help Someone You Know Who Has Experienced a Miscarriage'?

To prepare for next week:

-In what ways has the loss of your baby to miscarriage influenced your family? Your relationship with your partner? Your kids?

-In what ways have you drawn closer together?

-In what ways have you grown farther apart?

-What are some specific things that you would like to do at the memorial service to honor your baby? (i.e. read a poem or letter, play/sing a song, or whatever you would find meaningful)

Week 5 - The Influence of Grief on the Family

The Couple

Some Common Dynamics in the Couple:

- a sense of emotional bankruptcy and the inability to comfort each other as one would normally
- a discrepancy between the extent, expression and length of time grief occurs for each member of the couple, often throwing the couple out of sync
- women tend to be concerned about their partner's depth of feeling over their babies and what their partners did with their feelings
- a pattern where men seek emotional distance and women emotional closeness; the more closeness is sought, the more distance is required; and the more distance taken, the more closeness sought
- another pattern is to focus on your partner's faults to protect you from feeling your own pain
- both of these patterns are not helpful; it is important to look at our own pain and realize the struggle that your partner is having
- it is crucial to work through the pain together as a couple as it will not go away, but will go underground and color everything else in the relationship

(the above is taken from Allen & Marks' *Miscarriage: Women Sharing from the Heart* see pages 87-98)

- different grieving styles can be attributed to differences in personality, philosophy, coping styles and for women, hormonal changes
- couples may grieve alternatively and take turns 'falling apart' and being the strong and weak partner so that the household can continue to be held together

(the above is taken from Davis's *Empty cradle, broken heart: Surviving the Death of Your Baby* see pages 113-115)

A Father's Grief:

- a broad range from profound grief, to not feeling anything
- often the loss of 'the pregnancy' or 'future possibilities' is harder than the loss of the actual child
- usually they aren't as bereaved as the mother is
- generally, their grief is in direct proportion to the length of the pregnancy (more time to attach and bond with the child)
- even those who seemed not to be attached tended to feel a vast amount of intense emotions and were usually in crisis
- often saw their wives go through the medical aspects of the miscarriage without having the information needed or the opportunity to help with medical decisions
- feelings of helplessness, powerlessness, trauma, fears and frustrations are common
- men are influenced by culture and their families and are often told to play the 'tough guy' and not show emotions - this can invalidate and suppress their grief
- if there is a lack of a male role model who expresses emotions, men may not express their emotions, and they may also be completely unaware of them

-don't cry as openly or often as women, may have more words and less tears or process through their grief via work or sports rather than talking

(the above is taken from Allen & Marks' *Miscarriage: Women Sharing from the Heart* see pages 87-98)

-may feel isolation as the focus is on the mother and the father may have few friends to talk about his feelings with (taken from Davis's *Empty cradle, broken heart: Surviving the Death of Your Baby*, page 115)

Tips for Couples

-communicate your thoughts and feelings about the baby and the loss with each other and listen to each other

-accept each other's differences in the grieving process, don't judge each other, know that there is no right or wrong way to grieve and that accepting their way of grieving won't negate your own

-reassure each other of your love and commitment to one another, ask questions and offer reassurance of your care for each other and the fact that you are not blaming your partner

-if you are struggling seek counselling or a support group

(the above is taken from Davis's *Empty cradle, broken heart: Surviving the Death of Your Baby* see pages 112-120)

What Women Found Helpful:

-feeling accepted and supported in their feelings and expressions of grief – no matter what they were or how long they took

-fathers sharing their feelings of loss with the mothers

(the above is taken from Allen & Marks' *Miscarriage: Women Sharing from the Heart* see pages 87-98)

-fathers being sensitive to their needs, despite the roller coaster of emotions going on

-gently being encouraged to come out of the house for drives or quiet dinners together

-fathers being sensitive and protective of social situations that would be difficult to attend

-fathers looking after other children when they were incapable of it or had little energy

-not being blamed in any way

-being loved a time when they felt unlovable

(the above is taken from Vredevelt's *Empty Arms: Emotional Support for Those Who Have Suffered Miscarriage or Stillbirth* see pages 61-62)

What Women Found Not Helpful:

-feeling hurried along in their grief

-having their grief negated or minimized

-when fathers didn't communicate about their grief

-a lack of the fathers' presence at the hospital or doctor's office

(the above is taken from Allen & Marks' *Miscarriage: Women Sharing from the Heart* see pages 87-98)

Ways Fathers Can Care for Their Wives

-commit to growing through the grief and the difficulty with your wife

-be there for her at doctor appointments, at home as much as possible and emotionally as someone she can talk to

- acknowledge her motherhood and the baby through special mementos, especially on Mother's Day or the anniversaries of special dates
 - share your vulnerability, grief and pain with her as this allows her to feel united with you in grief
 - be sensitive to the change in her sex drive and the potential connection she has between sex, pregnancy and the loss of the baby – talk openly about sex and how you will work together to start again
- (the above is taken from Allen & Marks' *Miscarriage: Women Sharing from the Heart* see pages 231-232)

Other Children

Ways to Help Children Deal with Loss:

- share about the death, what children imagine is far more harmful to them than being told the truth
- don't try to pretend that nothing happened; children are intuitive and will know that something happened
- children will need to talk about death in order to understand it and have their fears dealt with
- let them see you cry, and let them cry with you
- don't tell them 'not to cry' or that 'it will be ok', this will teach them crying is wrong
- choose a time, when you are feeling able, to explain to them what happened
- use simple terms to describe what happened
- make sure they know that you are not upset at them, that it was not their fault and that they are loved
- use this experience to teach your child about death being a normal part of life
- simply explain what happened to the baby after it died
- disarm feelings of guilt by affirming that the baby's death was nobody's fault
- reassure children to ease their fears or guilt
- be generous with affection, both verbal and physical
- seek professional help if you are concerned

-Vredevelt's *Empty Arms: Emotional Support for Those Who Have Suffered Miscarriage or Stillbirth* (pages 64-69)

-Davis' *Empty cradle, broken heart: Surviving the death of your baby*, pages 123-136 is an excellent section that goes into more detail than can be covered here

-Allen & Marks' *Miscarriage: Women sharing from the heart* also offers a chapter (14) on children and grief and offers some ideas on helping children heal through talk and play (page 240-243)

Your Parents, the Baby's Grandparents

Common Dynamics

- they may have a double sorrow, your loss and the loss of their grandchild
- you may feel that you have to protect them from your despair
- they may not be able to give you the emotional support you are depending on because:
 - they don't understand the grieving process
 - they lost a baby and were not allowed to grieve and can't help you without facing their pain first
 - they may not recognize the baby as a grandchild, especially if there are other grandchildren
- you may be hurt when they say things that disregard your baby or when they say nothing at all
- some parents understand grief and will be supportive, sensitive and compassionate to your needs without much prompting

What To Do:

- offer suggestions instead of criticizing, they may do nothing, but you have the right to try
- if you are afraid to talk to them, write a letter or send an article on what would help
- if they cannot be supportive, focus on friends or other family members who are
- including them in the acknowledgement of the baby's life may help them be more supportive (share pictures, mementos, include them in a funeral, ask them to memorialize the baby in their own way)
- let them know that your grief will last a long time and that you would appreciate their sensitivity

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Week 5 - Questions to Consider

From this week:

-If you think it would be helpful, ask your partner to read over this week's notes with you and discuss the following questions.

-Did you and your partner relate to any of the common dynamics listed? If so, which ones? If not, how was your experience different?

-Did your partner relate to any parts of the section on 'Father's Grief'? How were his experiences similar? Different? Did hearing more of his story help you to understand his experience in a new way?

-Did you find the tips for couples, the section on what women found helpful and unhelpful and the ways that fathers can care for their wives helpful? Do you have anything that you would add? Anything that you disagree with?

-If you have other children, was the section on other children helpful? Is there anything you can do today or in the near future to help your children deal with their grief?

-What was your experience like with your and your partner's parents? Are there any suggestions that you could apply to your situation now?

To prepare for next week:

-When you think about becoming pregnant again (if you plan to do so) what thoughts or feelings do you have about it?

-Have your thoughts and feelings changed since you first experienced your miscarriage?

-If you plan to become pregnant again, what do you think will need to happen for you to feel ready?

-Are there specific people that you would like to attend the memorial service? Begin to make invitations this week inviting them to the service.

Week 6 - Preparing for/Dealing with Subsequent Pregnancies

(the following is taken from Davis' *Empty Cradle, Broken Heart: Surviving the Death of Your Baby*, see pages 158-179)

When preparing to have another baby after the loss of a baby to miscarriage, there are many questions to consider and decisions to make. Dealing with a subsequent pregnancy is also a very different experience after losing a baby to a miscarriage. As with the majority of the material covered in this support group, the decision of how to apply this information is a very individual one.

Deciding whether to try again:

-many mothers go back and forth between never wanting to go through a miscarriage again and longing for life to be inside her again and the desire for children

Deciding when to try again:

Your Doctor's Advice:

-physical considerations: your doctor's advice of how long to wait may depend on the physical circumstances surrounding your miscarriage and your body's ability to prepare for carrying a child again
-emotional considerations: many doctors advise waiting 6-12 months after a miscarriage to ensure that difficulties such as: 'replacing' the deceased baby with a new one, over protectiveness, and hesitancy to bond with the new baby do not occur. This view is changing as studies have shown that a sense of resolve for the mother can take up to 4 years to occur and many of the above struggles are normal after losing a child and can be dealt with via good emotional support.

Deciding for Yourself:

-open-ended information and advice seem to be more helpful than being told to wait a specific number of months as this allows mothers to decide what is best for her on an individual basis and gives back a sense of control which is often lost after the death of a baby. Following are some questions to consider:

- Do you want to have all of your kids before you are 30, 35, 40 years old?
- Do you want your next child to be close in age to your other children?
- Are you concerned that it may take a while to conceive and that you should start soon?
- Does having another baby as soon as possible seem helpful in coping with your grief?
- Do you need more time to heal physically?
- Do you need more time to research the cause of your baby's death?
- Do you need to find a supportive doctor to help you find the answers?
- Do you think that waiting would make you less anxious about your next pregnancy?
- Do you think that waiting may help you enjoy the new baby more, as you wouldn't be grieving for one baby and preparing for another at the same time?
- Are there any big changes coming up in your life-school, job, moving etc.?
- How does your partner feel?

Advantages to Getting Pregnant Soon:

- the feeling you are moving on to more hopeful, joyful times
- overcoming feelings of failure and being able to 'do it right'
- overcoming anxiety about possible infertility
- overcoming feelings of emptiness (not to replace the baby who died, but to meet the desire to have a baby in your arms)
- beating the biological clock
- having the new baby close in age to your other children

Advantages to Waiting to Get Pregnant

- having more time to heal physically
- having more time to heal emotionally
- having time between babies to honor their individuality and keep them separate in your mind
- being less anxious during the pregnancy
- being able to enjoy the new baby more cause you are grieving less

Trying to Conceive

This is another dynamic that must be faced by the mother who has lost a baby to miscarriage, especially if infertility is involved. The following emotions are common in these circumstances:

- hope and purpose at the prospects of becoming pregnant or frustration, anger and obsession about trying to get pregnant and waiting for it to happen
- anxiety that this baby will not replace the one lost
- frustration that you have to 'do this again' (get and be pregnant)
- worry that once you're pregnant you should have waited longer
- infertility can intensify frustration and the grieving process because of the invasive procedures, mechanical timing of sex and the month by month disappointments

Coping During the Pregnancy

Losing a baby to a miscarriage takes away innocence and the assumption that it 'can't happen to you'. Statistics that tell you that you should be fine are often not a source of comfort as last time you 'beat the odds' when your baby died. As a result, subsequent pregnancies are often filled with anxiety. Following are some ideas to reduce anxiety:

- having fears about the baby's health and development are NORMAL, even for those who haven't lost a child
- anxieties and thoughts do not have the power to harm your baby or make your fears come true
- write about your feelings and worries
- talk to someone who will listen and assure you that your anxieties are normal and likely unfounded
- reduce your stress in other ways, like setting aside non-essential responsibilities
- instead of repressing your fears, redirect them in positive ways
- information and monitoring of the pregnancy may help control emotions & fears

The following feelings and struggles are common during pregnancy:

- difficulty waiting to get past a certain point in the pregnancy
- feeling guarded optimism throughout the pregnancy
- beginning to feel a sense of safety only closer to due date
- anxiety at the time in the pregnancy of your last baby(ies)' death
- a sense of relief when you get past the anniversary date
- impatience for the due date to arrive and anxiety during, and even after birth
- fear and wondering if the baby will live to be six months, a year etc.
- hesitancy in bonding with the baby for fear of losing this baby too
- putting off setting up the nursery, purchasing clothes and having showers until after the baby is born
- bonding occurring slowly and increasing as you feel safer in the pregnancy or after the birth of the baby
- difficulty looking forward to the new baby on the way, while simultaneously looking back to grieve the baby you lost (Working through the grief allows you to heal from the baby you have lost and helps to appreciate the new baby as a unique individual, separate from the deceased baby.)
- hoping for a baby of the same sex as the baby you lost, so you can have a boy or a girl
- hoping for a baby of the opposite sex to ensure you differentiate between each baby
- Finding a doctor that is understanding and supportive is also key as you will likely need someone who is sensitive to your fears and concerns and is willing to take the extra measures needed to give you assurance that your pregnancy is going well.

Preparing for the Birth

It is not uncommon to feel the following before, during and after the birth of your baby:

Before the birth:

- extra anxiety as 'the moment of truth' arrives
- the need to keep busy to avoid worry
- an odd mixture of impatience, dread, elation, anxiety, optimism and pessimism

During labor and delivery:

- the need for a fetal monitor to assure you of the baby's well being
- if delivering by cesarean, the need to be awake or the need for general anesthetic
- fear of losing control or being consumed with grief over the baby who died
- remembering the last experience and associating it with the present one

After birth:

- intense feelings of sadness for the child lost that have yet to be worked through and the realization that they are gone forever and you can't recover them
- it is important to express and feel these sad feelings as stuffing them will prevent them and the happy feeling towards the new baby from being expressed; finding a balance between these feelings will benefit you and the baby
- instead of leaving the baby that died in the past, bring the memories with you into the future

References

- Davis, D. L. (1991). *Empty cradle, broken heart: Surviving the death of your baby*. Golden, CO: Fulcrum Publishing.
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Week 6 - Questions to Consider

From this week:

-If you are thinking about becoming pregnant again, are some of the concerns listed similar to what you are experiencing? In what ways are they the same? Different?

-As you look at getting pregnant again, do you feel more comfortable waiting awhile or trying right away? Are your reasons similar to the ones listed above or do you have different reasons? What are they?

-Did the common experiences of women during pregnancy and birth resonate with how you anticipate you will feel, or do you think you will approach pregnancy and birth differently? How so,

-Make a list of all of the things that you have decided to do and bring to the memorial service.

-As the memorial time approaches, try to set aside time to prepare yourself emotionally. Do what you have found works for you. Give yourself extra grace this week – you may be more emotional and sensitive this week as you think about the child(ren) you have lost

Appendix:

Shells Story

On the beach shells of crabs lie washed up by the waves. Some are from crabs that died; others are simply discarded – a dwelling too small for its growing occupants. That is how crabs grow bigger when their shells get too tight; they split the shell open and grow a new one.

I have never talked with a crab, but I imagine the process of splitting open a shell must be pretty painful. I am sure that until they grow a new one, they feel terribly defenseless and vulnerable. Because that is how we as humans feel when we crack open our shell.

Our shells are not visible like a crab's; however they are just the same: shells formed by years of habit, shells that protect us from other people, shells that are the roles we play as parents, children, bosses, or employees.

Every now and then we crack our shells and emerge into a new world, quivering and defenseless.

Teenagers do it when they become adults. Adults do it when they lose their job or a husband or wife dies and they have to start again alone. When investments fail, when a dream disappears, when a child is lost to a miscarriage. In all these traumas of life a shell is being broken. Like a crab, the longer that shell has been growing around us, the harder it is to break open and start again. And the more painful the breaking becomes.

Some shells may become prison shells so encrusted with barnacles of the past, so burdened with trailing weeds, so constricting that we can no longer move.

No one looks for painful experiences in life. To avoid pain we may prefer to stay locked into shells that no longer fit well, rather than risk the vulnerability of cracking them open. When a crab's shell becomes too thick, too protective, too tough to crack and start again, then the crab can't grow anymore. That is when it dies.

Chapter modified from James Taylor

Sisterhood of Sadness

"I was once a member of the Pregnancy Club, my membership card consisting of two pink lines on a stick. I was eager to pay my dues, just like all the other members. Morning sickness, stretch marks, cravings -- I welcomed them all.

But they never came. And before I knew it, my membership was revoked. No real reason -- at least none I could discern -- other than bad timing, perhaps. Or, at least, that's what everyone's been telling me. That and "God's plan."

Miscarriage is a terrible word. As if one has dropped something, or carried something incorrectly. Similar to "mistake" or "misunderstanding." How I longed for it to be either of those things when I learned my baby was gone. Surely, it was a mistake, I prayed. If they would just look again, they would learn it was all a simple misunderstanding.

But the tests showed otherwise.

1 out of every 5 pregnancies ends in miscarriage, say the books. That statistic terrified me when I was pregnant. So many lost babies, I thought. How can I keep mine from being one of them? But now that mine is one of them, that 1 out of 5 seems awfully small.

Or, at least, it did. Until soft-speaking female voices started whispering to me in my grief, "It happened to me, too." Their eyes told me the stories of the pain that we shared, the pain that only a woman who has carried a child - and lost it - could know. For some, it was fresh pain. For others, it was dulled by healthy babies since born.

A sisterhood of sadness.

It's a silent group, this new club of which I have recently become a reluctant member. Our membership cards are the scars we will always carry on our hearts. Our dues are paid in blood and tears. It is a painful initiation, and one never ceases membership. Because one never forgets.

I am joining, not because I want to, but because I wasn't given the choice. But at least I know I'm not alone. At least I know there are hundreds of thousands of women with me, however silent and invisible, quietly holding my hand."

"Glass in the Knee"

(taken from "Resolving Sexual Abuse" by Yvonne M. Dolan)

When I was a little kid, I liked to ride my bicycle up and down the street where I lived. The road was gravel, and I like to ride my bike very fast. This resulted in my falling off the bike a lot when it skidded on the gravel. Since I wore heavy denim pants, the occasional spills usually resulted in nothing more than mild bruises.

But one day, I had some bad luck. I happened to fall off the bike right on top of a broken Coke bottle. The glass from the bottle went right through my pants and into my knee. I went home and my Grandma and I very carefully and thoroughly cleaned all the glass out of my knee and put some disinfectant on the wound. I didn't enjoy the process, but even then I knew it was necessary, so I endured it. A few weeks later it had completely healed.

Then summer came and I went swimming a lot in the nearby lake. One very warm afternoon, after spending hours and hours in the water, I noticed a funny little bump on my knee as I was drying off. It felt really odd, and it hurt some as I rubbed it. As I continued to rub it, a piece of glass gradually worked its way out. I thought for sure that must be the last piece of it. But then that winter, after skiing and taking a long hot bath, I had a similar experience. Another piece of glass worked its way to the surface.

This continued on and off for several more months, and I have always wondered if even as an adult someday I may feel a funny little bump on that same knee, only to release yet another little piece of glass. My Grandma and I did a good job of cleaning out that wound; we took care of every piece that we could reach at that time, but sometimes pieces get buried so deeply that it takes a long time for them to finally reach the surface where they can be released.

How to Help Someone You Know Who Has Experienced a Miscarriage

- don't assume you know how she feels, ask her and treat her and her loss as an individual
- be a good listener by asking if what you think you heard her say is correct, "Sounds like you felt misunderstood." or "So you felt lonely?" or "You must have been so angry."
- don't judge her, offer her solutions or talk her out of how she is feeling, be someone safe that she can talk with
- validate her loss by:
 - using the words 'baby' and 'died' rather than 'tissue' or 'no longer viable'
 - send flowers or a sympathy card
 - tell her it is ok to be sad and cry
 - remind her that talking about her feelings is helpful and healing
 - ask her if she would like to have a memorial service for the baby
- honor her baby and her motherhood
 - remind her that she is a mother
 - ask if she preferred to name the baby and if so, use the name when you talk about her baby
 - if she knew the baby's sex, use 'him' or 'her' when you talk about her baby
 - send a card on Mother's Day
- express your care:
 - tell her that you care; that she is in your thoughts, prayers and heart; that you love her
 - don't be afraid to be vulnerable about your sadness of her loss, it will help her accept her vulnerability
 - express your care at a time, place and around people that are safe for her
 - show your affection through touch
 - write a note telling her what you appreciate about her
- help her function:
 - instead of saying, 'let me know if there is anything I can do to help', offer to do a few specific things and let her choose.
 - clean her house, do a load of laundry, some yard work, run errands or go grocery shopping for her
 - cook her a meal or have pizza delivered
 - offer to take her other children somewhere fun for the afternoon/day
- give her a gift
 - flowers, a plant
 - a craft item you have made for her
 - a certificate for a massage, facial, pedicure, or manicure
 - a poem – either written by you or someone else
 - make a donation in her baby's name
 - a CD of peaceful music

- refrain from 'fixing' – trust her ability to heal
 - recognize that she has the inner resources and the capacity to heal and encourage that capacity in her instead of trying to fix her grief
 - provide her with a place where she can find resolve and the room to heal
 - listen and let her find and develop her own solutions and views
 - encourage her to be herself, this is a time where her way is the best way
 - give her time
 - be available in the following, days, weeks, months and years for her to talk about her miscarriage – this will help her move through her grief more easily and quickly
 - remember her as time goes on
 - throughout the time that follows her miscarriage, send cards or notes asking how she is doing and let her know you are thinking of her and the baby she lost
 - remember her on the anniversary of her baby's death, her due date and Mother's Day
- (the above is taken from Allen & Marks' *Miscarriage: Women Sharing from the Heart* see pages 220-226)

Dos and Don'ts of Communication

Do:

- Say you are sorry about their pain and what happened to their child.
- Allow them to express their grief as they are feeling it.
- Allow them to talk as much as they need about the child they lost.
- Give special attention to the child's siblings as they are also confused and hurting and may be in need of attention that their parent are unable to give them.
- Reassure the parents that they did everything they could, that their medical care was excellent and whatever else you can tell them that is true and positive.

Don't:

- Avoid the bereaved because you are uncomfortable, this only adds to their pain.
- Say, "You ought to be feeling better by now." or anything that implies your judgement of their feelings.
- Avoid mentioning the name of the child in fear of reminding them of him or her. They have not forgotten.
- Say anything about the medical care being inadequate. Doubt and fears already abound and don't need to be encouraged by others.

(the above is taken from Peppers and Knapp's *How to go on living after the death of a baby*. See pages 112-113)

The Five Worst and Best Comments You Can Say

The five worst comments you can say:

- “It happened for the best.”
- “Don't worry, you can have another baby.”
- “You didn't really know the baby, so it's not like losing a child who has lived with you for a while.”

-“I know exactly how you feel.”

-“What are you going to do now?”

The five best comments you can say:

-“I’m so sorry. I know how much you wanted to have that baby.”

-“It’s ok to cry.”

-“Would you like to talk about it?”

-“Is there anything I can do for you?”

-“May I call in a few days to see how you are doing?”

(the above is taken from Kohn & Moffit’s *A silent sorrow: Pregnancy loss: Guidance and support for you and your family* see pages 157-158.)

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Mother's and Father's Day

Surviving "Parent's Days": 101

Mother's Day, Father's Day, and all the other special days from April to July (Easter, Memorial Day, graduations, the Forth of July) can cause so much pain. The Parent's Days of May and June serve to remind us of another year of emptiness gone by; emptiness of the womb, of the cradle, of the heart! The other days are child-oriented as well, with Easter bonnets, school holidays, landmark events, picnics, and fireworks. Parent's Days alone may cause enough trauma to make couples want to yell out "May Day! May Day!" (another Spring landmark day) and feel as if we are indeed "going down with the ship" in utter distress. It is easy to let ourselves become depressed and focused on who we are (grieving or unfulfilled parents), or on what we do not have (our children), but there are some strategies to make these highly overrated days more tolerable:

1. FOCUS ON YOUR PARENTS.

If your parents are still living, try to focus the Parent's Days celebrations on them. Ask God to help you be thankful for what you have in your parents rather than dwelling on what you do not have in a child. If you do not have a good relationship with your parents, pray for God to use this year as a time of forgiveness, reconciliation, and restoration so that healing may begin. If your parents have died, ask God to send a "spiritual mother or father" to you as a friend and mentor in the things of God, then do something in special honor of them.

2. BE HONEST WITH YOURSELF.

What can you really handle? Will attending church on Parent's Days bring you closer to God, or add another brick to your wall of hurt, bitterness, anger, self-pity, sorrow, or pain? If you feel you need to be in church, by all means go! If you feel that attending a service that might focus on the virtues of parenthood could damage your spiritual walk, ask God to show you an alternate way to spend your Parent's Days that will draw you closer to Him rather than pushing you farther away. I know some couples who need the comfort of a church service the most on painful days such as Parent's Days. On the other hand, Rick and I "boycotted" Mother's and Father's Days last year and took those days to do special things together as a couple. For me, sitting in church on those days is too emotionally painful and spiritually damaging. (The same is true of baby showers for me. In three hours at a baby shower, I can temporally damage all the healing and peace God has established over the months and years of infertility.) It is not worth the health of my relationship with God to intentionally expose myself to the temptations of bitterness and self-pity.

3. PLAN AHEAD!

The surest way to let a holiday destroy you is to not be prepared. Do you have extended family or friends that you will be sharing these days with? Will you encounter pregnant women, new babies, nieces, nephews, cousins or other children that you may or may not be eager or prepared to see? Yes, it is natural to love a child deeply, and yet be hurt by being around them.

Take time to think about the circumstances of these days and do your best to mentally prepare yourself for whatever may come. You cannot know exactly what will happen, who you will encounter, what will be said, or

how you will react to every circumstance, but by taking the time to plan ahead, and praying for God's comfort, wisdom, peace, and strength to help you on these special days (and every day), you will be able to relax and enjoy (or at least better survive) whatever these celebrations hold for you. Leave yourself an "out" - a reason or way to leave early or to take a few moments by yourselves away from the crowd. The less "trapped" you feel, the better.

4. TREAT YOURSELF.

Plan something special that does not focus on kids. Go away together for a night. Have a romantic picnic. Reestablish an old tradition from your courtship, when you were totally enthralled only with one another and the stresses of infertility or the grief of losing a baby were the farthest things from your mind. If you can't get in the spirit of celebration, keep it low-key, but do something, anything, that is a treat, and make your marriage the priority for just one day without bringing the "baby issue" to the forefront. Our cats are our kids. Every Mother's Day, Father's Day, birthday, or other gift giving occasion, our furry children present "Mama" and "Daddy" with some little gift.

5. DON'T LET OTHERS RUIN YOUR DAY.

Well-meaning friends or family often say the wrong things. You may hear a lot about when you are going to "start your family" (aren't husband and wife a "family"?), or how to get pregnant (vacation, relax, adopt, sexual technique, and so forth). Remember that usually your loved ones are only curious or truly trying to help. It can be painful and frustrating, but try to take the questions and advice in the spirit they were intended. If the situation allows you to politely explain why their words are hurtful, take some of these opportunities to educate your loved ones.

6. LET YOURSELF GRIEVE.

Whether you have conceived a child or not, you do have a valid reason to grieve! God understands your grief! Jesus was "...a Man of sorrows and acquainted with grief... Surely He has borne our griefs and carried our sorrows..." Isaiah 53:3-4 (NKJV)

Before I had experienced miscarriage, I almost envied couples who had miscarried; not that I wanted to share their pain, but for the fact that they had at least experienced a pregnancy, however brief, and that they had the knowledge of a child awaiting them in Heaven. I felt guilty for feeling that way, realizing that I would never wish to achieve a pregnancy only to have my baby die, but I envied them their grief, for at least they seemed to have a valid reason to grieve in their loss.

Let me assure you that INFERTILITY is a valid reason for grief. Allow yourself the tears without guilt! Grieve the death of your plans, hopes, dreams, and the death of your innocent acceptance that a baby "just happens." Every cycle that passes without achieving pregnancy is another "death" that must be faced. Rather than feeling that you are not parents, it may help to think of yourselves as "unfulfilled parents," "waiting parents," or "parents-at-heart."

Now, on the other side of things, I must admit that there is a measure of joy and comfort for me in the knowledge that our Noel awaits us in Heaven. It is a comfort to know that I am a mother and no one will ever be able to take that title away from me now. Let me also tell you that I didn't have any idea how painful miscarriage could be. Even if no one else acknowledges your pain, you have a right to grieve! You have a right to name your child, to talk about your baby, and to memorialize your baby in some way. Do not let your dead child become an idol, but let yourself express your grief. Ask God to help you find a healthy way to commemorate the gift of the child He granted you for such a short time (only 17 days in the womb for us). I find great comfort in keeping a journal about my thoughts of Noel and my journey through infertility. Others have held memorial services for their children (even years after the fact). We also would be happy to print a memorial like this one for your baby here in "Hannah to Hannah."

IN LOVING MEMORY OF - *Grace or Grason Emllet, miscarried October 11, 1993, your name was chosen in reminder of God's grace.*

IN JOYFUL CELEBRATION OF - *Corrie Anna Emllet, born December 16, 1995, named after Corrie Ten Boom and Anna the prophetess, Luke 2:36-38 - Bill and Yvonne Emllet have been dealing with infertility for about 10 years.*

A failed adoption attempt deserves a time of mourning as well. Even among the infertility circles, those who loose a child by way of an unsuccessful adoption attempt seem to get left out. Watching dear friends go through a failed adoption this past week, after great emotionally investment and thinking they would be holding their baby by the Parent's Days, I realize even more fully that loosing a child in a serious adoption attempt is as devastating as loosing a child to death. What make it even harder, in a sense, is the inability to memorialize the child who is not dead, but goes on to live with his birth mother or another family.

7. GIVE IT TO GOD (AGAIN).

This is the most important advice I can give, and the hardest to follow. Daily (often by the hour or minute) I must recommit my desire for a child to God. The hurt is too BIG for me to deal with alone; praise God that He is a BIG GOD!!! I realize now that all those times I thought I was committing the "baby issue" to God before Mother's Day '94, I was bringing my heart-ache to Him, but I was never fully relinquishing my right to my pain. I wanted to still have some control. *"In the day of my trouble I sought the Lord... My soul refused to be comforted... I complained, and my spirit was overwhelmed."* Psalm 77:2-3 I was afraid to fully trust God lest He keep me from ever being a mother. It was only in letting go of my "right" of motherhood, that my Heavenly Father could show me that He knew what it was like to be childless when His only Son died for my sake! God does more to bring children into His family than we ever will in ours!

Other Parents' Days ideas include:

- ≡ send a card of encouragement to an infertile friend
- ≡ sponsor a needy child from another country
- ≡ do things with other childless couples
- ≡ volunteer at a retirement home
- ≡ get a pet

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Surviving "Parent's Days": 101 was first published in the Spring 1996 issue of *Hannah to Hannah*

Am I a Mother? Am I a Father? Preparing for Mother's and Father's Day After the Death of a Baby

by Sherokee Ilse

A miscarriage. A full-term stillbirth. Marama and Brennan William. My only two children, yet one look at me and it appeared there were 'no' children. Mother's Day 1982 was a confusing and lonely time. No acknowledgment came, but the pain and love was there.

The next year after Brennan's death, Kellan David was born - alive! Mother's Day 1983 was extra special. I had a son to mother, to hug and to show off. Out of kindness and thankfulness, my mother sent me a card on that special day. Its bittersweet words still stand out in my mind, "Congratulations on your FIRST Mother's Day." I know she cared and was doing what seemed right to her, but it hurt to think that she didn't admit or acknowledge that I already was a mother. That was what I was expecting or what I needed. I tried to be understanding of my mom. She was so happy for us, and she was trying, yet this wasn't my first Mother's Day or David's soon-to-be first Father's Day. We'd experienced the worst initiation a mother or father can bear, the death of our children, and never could we go back and NOT be their parents.

The death of a baby puts a strain on a family, especially during family times like Mother's and Father's Day. Whether you now have no living children or you still have some living children, you may be hurting as you approach this special day. You may also be confused about how you will (and should) be treated and about whether or not to focus on your parenthood of this beloved baby.

Usually the weeks leading up to the day are worse than the day itself. The mounting fears of what people will say, or not say, of what will happen on the day, can lead to out of control feelings and anxiety.

Where possible, take control, be clear and be direct. What do you hope will happen? What do you need and want to happen? You have every right to celebrate your parenthood and to remember your child, even if you still have other living children. Below are some brief suggestions to consider as you plan for this holiday and others that will follow:

- Examine your attitudes and expand your thoughts and options. What are you worried about, what do you hope will happen?
- Speak up. Acknowledge your feelings. Don't wait for people to "guess" what you need.
- Take care of your physical health.
- Seek support from people within and outside your family, as you also take care of your emotional and spiritual health.
- Be realistic and plan ahead. Don't overdo, do take some control.
- Be open to change, yet maintain some meaningful traditions.
- Be patient with yourself and keep the memory and spirit of your child alive in your heart.
- Think of ways to reach out to others in memory of your baby.
- Look for moments of love and joy. Spend time remembering, especially the good.

- Most of all, do what is meaningful for you and your family. Don't let the pressure from others keep you from doing what you need and want to do.

Give your family specific suggestions of things you might like to happen. If telling them directly is too hard for you at this time, you can either write them a note or tell one family member (whom you trust will be open and direct with others) and ask them to pass on your wishes. You could even make a copy of this article and pass it on to them. Circle or highlight the ideas that are most appealing to you. Below are but a few specific ideas for you to explore as you attempt to determine your own needs to share with others:

- Carnations, roses or a special flower that has meaning for you
- Mother's or Father's Day Cards - they could use a blank card and write a nice message.
- Seeds and bulbs - give them to people to plant in memory of your child (one mother did this and asked people to take pictures when the flowers came up, which she then put in her baby's memory book.)
- Tell your clergy person by phone, in person or through a note what you hope for. You could write up a few sentences for the church bulletin. A number of times I sent a note to the pastor asking for it to be in the bulletin on Mother's Day. It often was, "Please say a special prayer today for all Mothers who have had a child die and all who have had a mother die."
- Brunch or lunch - go out or invite relatives and special friends to your house.
- Light a candle honoring your child.
- If it is too hard to participate in the family events this year, leave town and do something special - ignore the day if you want. If that will help you feel better, do it. Maybe next year, you will be better prepared to face the day.

Remember, people are waiting for your cues; they don't quite know how to act. Find ways to communicate with them and your partner. How will you experience Mother and Father's Day? Will you share your hopes and expectations with others so you might get the support you need? Or will you quietly keep them to yourself hoping others will read your mind or just know what to do? Only you can decide this. You can have a great influence on how the day goes if only you will make some plans and tell others what you want and need. Just remember, you are the parent of this baby who has died. No one can take that away from you. You deserve to celebrate their life, remember them and treat yourself special for the loving parent you are.

*Many of the above ideas are discussed further in the short booklet, [Coping With Holidays and Celebrations](#) by Sherokee Ilse. It is published and distributed by A Place To Remember, deruyter-Nelson Publications, 1885 University Ave, Suite I 10, St. Paul, MN 55104, 612-645-7045. Sherokee Ilse has suffered the loss of three babies and is an internationally known consultant, author and trainer on the subject of infant loss and bereavement. She has authored many books and booklets including her ever-popular *Empty Arms: Coping With Miscarriage, Stillbirth and Infant Death*. Sherokee is also the coordinator for the National Coalition for Positive Outcomes in Pregnancy.*

Dreaded Mothers & Fathers Days
by Kara L.C. Jones + ideas from Nancy Grayson (MISS Idaho Chapter)

*"Motherhood is an eternal place within your heart...a sacred place that belongs to you.
Deep within the very essence of your existence, you are all mothers,
whether you have living children or not-- you're still mothers-- beautiful and loving mothers.
And while you may not be able to care for your child/children on earth,
that sacred place of motherhood remains within you.
Remember always that the love of a mother is stronger than any other force in the universe.
The love of a mother transcends death."
~Joanne Caccitore, Founder of the MISS Foundation*

The same goes for the dads who must endure Father's Day next month, too! These dreaded "Hallmark Holidays" that happen each Spring can be so hard on bereaved parents. Those who have no other living children are likely to be forgotten all together. Those who have surviving or subsequently born, living children, will most likely be recognized for the part of their parenthood that is seen, thereby fracturing their experience of these "celebrations."

The best you can do on these days -- heck, on any day of the year -- is to be gentle with yourself. Know that it is okay to do something or do nothing. Know that you can change your mind half way through the day. Know that you can make this a "self-care" opportunity instead of a disastrous "must do" obligation. When Julia Ward Howe wrote the first Mother's Day Manifesto, it was with the goal of gathering bereaved mothers whose sons had died in the Civil War to protest for peace. Hallmark did not start this holiday. They do not own it. They are only part of it. And Julia Ward Howe's part of it is much more in keeping with the true sense of parenthood, of how we carry our children's lives and deaths with us in everything we do.

If nothing else, please know that you aren't alone on the dreaded days. Many other bereaved parents are out here hanging on, too. And Nancy Grayson was kind enough to give us the following list of ideas! Maybe one of these will spark for you, offer you an idea for how to do what is best for your on these difficult days:

What to do on Mother's Day...Ideas from Nancy Grayson

- Plan and do something for Mother's Day - A special meal or activity
- Buy yourself a Mother's Day card 'from your MISSing child' and write a note, seal it and save it.
- Plant flowers or a rose bush in your yard / garden,
- Proudly wear a corsage to church, dinner out or anywhere.
- Visit your child's grave site, or another calming place.
- Light a candle for you and your child.
- Mark this day with a keepsake; an uplifting book, jewelry, or a cozy blanket.
- Have a plan B to plan A - just in case it's too much this year. Anticipation of the 'day' seems to be harder than the actual day, allow for that possibility.
- It's OK to sit out activities and just have a good cry.
- Buy extra soft tissue and take good care.

About the Authors

Kara is a freedom fighting guerrilla artist who has recently taken to henna as a solace and form of expression. Check out her new site at:

HennaHealing.com Nancy and Peter Grayson - Joel's Mom & Dad

MISS Foundation Idaho programs: Mothers and Dads in Sympathy & Support missfoundationidaho@msn.com 208.861.2407

www.missfoundation.org

In Loving Memory

"Our memories are perceptions that can comfort or haunt us.

Our babies want us to have peace and comfort. With love and tenderness, we can move to where our memories are softer and become more sweet than bitter. Then, those memories are truly the key to our souls."

From 'Angelic Presence' book compiled by Cathi Lammert and Sue Friedeck

Moving On . . .

By Jeanie O'Bryan From 'Sharing' the Official newsletter of SHARE, Pregnancy and Infant Loss Support Inc. Vol. 11, Issue 5

Sometime has gone by

And life has resumed

To the way it was before you.

But my heart still awaits

For the piece that is missing

And it doesn't quite know what to do.

With the love that was saved

To be given and cherished

Before he was taken away.

And the dreams and the life

That we'd planned and we hoped for

Will wait until Heaven one day.

So don't expect me to

Not acknowledge his being;

He was here and he always will be.

You may think that I'm stalled

In the past and the memories

But I am moving on . . .

. . . and he's coming with me.

. . . may the memories of your babies live forever in your hearts and may you be able, in time, to move on with them. Thank you for sharing.

Singing Your Song

When a woman in a certain African tribe knows she is pregnant, she goes out into the wilderness with a few friends and together they pray and meditate until they hear the song of the child. They recognize that every soul has its own vibration that expresses its unique flavor and purpose. When the women attune to the song, they sing it out loud. Then they return to the tribe and teach it to everyone else.

When the child is born, the community gathers and sings the child's song to him or her. Later, when the child enters education, the village gathers and chants the child's song. When the child passes through initiation into adulthood, the people again come together and sing. At the time of marriage, the person hears his or her song. Finally, when the soul is about to pass from this world, the family and friends gather at the person's bed, just as they did at their birth, and they sing the person to the next life.

In the African tribe there is one other occasion upon which the villagers sing to the child. If at any time during his or her life, the person commits a crime or aberrant social act, the individual is called to the center of the village and the people in the community form a circle around them. Then they sing their song to them. The tribe recognizes that the correction for antisocial behavior is not punishment; it is love and the remembrance of identity. When you recognize your own song, you have no desire or need to do anything that would hurt another.

A friend is someone who knows your song and sings it to you when you have forgotten it. Those who love you are not fooled by the mistakes you have made or dark images you hold about yourself. They remember your beauty when you feel ugly; your wholeness when you are broken; your innocence when you feel guilty; and your purpose when you feel confused.

You may not have grown up in an African tribe that sings your song to you at crucial life transitions, but life is always reminding you when you are in tune with yourself and when you are not. When you feel good, what you are doing matches your song and when you feel awful, it doesn't. In the end, we shall all recognize our song and sing it will. You may feel a bit warbly at the moment, but so have all the great singers. Just keep singing and you'll find your way home.

-by Allen Cohen taken out of Caring Notes a professional newsletter by SHARE Pregnancy and Infant Loss Support Inc. Volume 8, Issue 11

PRECIOUS CHILD

Words and Music by Karen Taylor-Good

In my dreams, you are alive and well
Precious child, precious child
In my mind, I see you clear as a bell
Precious child, precious child

In my soul, there is a hole
That can never be filled
But in my heart, there is hope
'Cause you are with me still

In my heart, you live on
Always there never gone
Precious child, you left too soon
Tho' it may be true that we're apart
You will live forever... in my heart

In my plans, I was the first to leave
Precious child, precious child
But in this world, I was left here to grieve
Precious child, my precious child

In my soul, there is a hole
That can never be filled
But in my heart there is hope
And you are with me still

In my heart you live on
Always there, never gone
Precious child, you left too soon,
Tho' it may be true that we're apart
You will live forever... in my heart

God knows I want to hold you,
See you, touch you
And maybe there's a heaven

And someday I will again
Please know you are not forgotten until then

In my heart you live on
Always there never gone
Precious child, you left too soon
Tho' it may be true that we're apart
You will live forever... in my heart

Background Music - "Precious Child" - Karen Taylor-Good

How to Show Support After Loss

"It is most certainly a grief that is hard to explain and understand when your child inside of you dies. Where there was meant to be life, there is death and it is not external, it is INSIDE you, so deeply personal. And there is a hollow ache and emptiness that is so hard to articulate."

- Angie Wiegelt

Your friend, your daughter, your sister, your beloved has gone through a very traumatic event and she is feeling alone and isolated. Don't ever question why they are feeling so much pain over someone they have lost. Their loss is real and so is their pain. Connecting with them is vital and your support is critical. Self-care is essential no matter how long it has been. They need help sorting through complicated emotions and need to be encouraged to reach out.

Losses in the womb are very taboo in our society. No one wants to have these uncomfortable conversations. Really, so little is said, we don't have the proper dialogue to know how to navigate through these very rough waters. Women prepare ahead of time "in case." Commonly, most couples wait until the second trimester to share the news because most miscarriages happen in the first trimester. Society perpetuates this because, as a whole, it is unsupportive of pregnancy loss.

Womb loss is common, unfortunately. Women and men often suffer in silence and don't want to share about their loss. Shame is a very real emotion. "How many times am I going to fail at this?" is a very real question. Guilt, fear, confusion, isolation, and heartbreak are all common emotions after loss.

There is no connection between when the loss occurred and how much they should grieve. Grief is grief. The feeling women/men have who walk into a hospital pregnant and walk out without a baby is devastating on so many levels.

Remember, for those who have had other children after they experience the loss of their child, their children do not take the place of the children they lost. Every first with their child is a painful reminder of what they lost.

Below are a few suggestions of what to do and what not to do for the couple who is grieving the loss of their baby. Remember, it is the *couple* who is grieving. Men's grief is just as real and often overlooked.

Phrases to Avoid:

1. At least you know you can get pregnant.
"Getting pregnant is not the point."
2. Something must have been wrong with the baby. You are better off.
"I would rather have my baby with issues than no baby at all."
3. Miscarriage happens to 25% of all pregnancies. Miscarriage is common.
"Yes, and everyone who is breathing is eventually going to die. That does not make it any easier."
4. God needed another angel.
"This just trivializes the loss and is just absolutely untrue."
5. I know somebody who has had
"This is not a contest for my grief to complete with someone else's grief."
6. At least it was early and you weren't further along.
"A baby is a baby. This just dismisses the grief."

Ways to Support:

1. Keep it very simple. Send a text. "I am here." Just be there and be available. Those three little words are very powerful to someone who has no words in the moment for the level of her grief.
2. Bring something over unannounced. Drop off flowers or a simple card. You don't need to complicate things with a lot of words. Small gestures speak volumes.
3. Show up with a meal. It's all about letting the couple know they have support.
4. Reassure them how much you love them. Cheer them on and let them know they will be okay.
5. Offer to take the children in the house overnight so the couple or mother can have time alone. Offer to clean the house or do errands.
6. Give them space to share their story when the time is right.

How the Healing Process Differs

The Mother

1. Acknowledge your baby existed. You can't say goodbye without acknowledging the baby's existence.
2. Consider memorializing the baby by giving him/her a name, writing a letter to your baby, buying a piece of jewelry to remember him/her, making a donation to a charity in their honor.
3. Speak up and tell those around you what you need.
4. Realize your husband maybe in another place emotionally and may grieve differently. Communication is very important and sharing your feelings vital.
5. Talk through the steps to take to share the news with children and family members.

The Husband

1. Take time to listen to their feelings and put yourself in their shoes.
2. Allow them time to grieve in their own way.
3. Be sensitive and don't ask them to do things that would be hurtful or harm their journey to healing.

Friends and Relatives

1. Miscarriage is a socially taboo subject leaving women in isolation.
2. You can say hurtful things unintentionally, further isolating the woman and her partner.
3. Seeing others celebrate birth and pregnancy is unavoidable but can be deeply hurtful to those who have had a miscarriage. Creating healthy boundaries and open spaces for grief can help women recover from their loss.
4. Treat other pregnancies sensitively. Share the news thoughtfully, allowing the woman space to process if needed.
5. Offer to bring a meal or do domestic tasks or care for their children to show your support. Reaching out shows you care.
6. Stay in close contact with women who suffer from anxiety or depression.