

- b) She may wish to talk about her labour, delivery and the baby's death. Allow her to do so although you may both find this painful. It is difficult for relatives and friends to understand that mothers may need to do this, over and over again, even though the baby has died.
- c) She may ask about your experience and feelings. This is an opportunity to "feed" her what you think she may be feeling, but cannot express or thinks it wrong to say. You can say "I felt and didn't realise until later how many others feel the same way. I thought I was the only one." This is the time to mention how at first when you go out all the other women seem to be either pregnant or have small children with them, and what many mothers feel about pregnant women and tiny babies. She may ask you if you have any other children, especially subsequent ones. A common feeling is that she is a failure as a woman, and she may not be able to have children again. Do not attempt to comment on medical matters, but do stress that this is a feeling most mothers have. Ask if she has been advised about future pregnancies. Mention the anxiety that inevitably accompanies them.
- d) She may say "I am fine". This is more difficult because she shuts you out, and your natural impulse may be to withdraw. She may feel that she needs to be brave and strong and not give in to "weakness". Remember that other people have backed away from her and she may wish underneath that you do not take "no" for an answer. Perhaps you can say "I couldn't let anyone know how I felt". "It's very hard - and it took a long time for me to be able to talk". She will need to mourn at her own rate, and may not be able to grieve openly until later. Go back later on, even if she does not talk then. Remember that others will expect her to get "better" very soon, and she will need understanding of her continuing grief. She may not mention physical symptoms of tiredness, sleeplessness or just not feeling well. These are common during grieving, and might be mentioned by you, particularly with women who say they are feeling "fine".
- e) She may feel angry, and immediately complain about her doctor or the treatment in hospital or antenatally, or attack you. This can bring relief to her - she can push her bad feelings on to someone else, at least for the moment. Don't get into discussing the technical problems of medical care. Remind her that she can discuss her treatment with the doctor at her post-natal appointment. Suggest she writes down a list of the points she wants to raise. Accept that most people who have suffered a loss through death have moments of intense anger. Anger can be triggered by tactless but well meant remarks. If she doesn't mention this, tell her about yours and ask her if she has experienced any.
- f) She may be consumed by guilt and feel that she is responsible for the baby's death, or she may not have wanted the baby and feel guilty, or she may mention suicide. Although everyone who loses a baby has some of these feelings, they usually change in the course of normal mourning. You may need to ask for professional help for the mother who continues to be unrelenting and bitterly angry, either with other people, or with herself.

- g) If she has other children she may mention how she resents the demands they make as a healthy child when she needs time to grieve for her dead child. She may say that she is clinging to them and over-protective towards them or, she may be doing both. You can say that these reactions are common. Tell her that children need to be told the truth simply and that they will know something of what has happened even if they are too young to speak.
- h) A difficult time for fathers is when they register the baby's birth/death and arrange the funeral. They too need an opportunity to express their pain at the loss of their baby, their grief and their feelings about themselves as father of a dead child. Not many people give fathers much time to mourn, although they need it.

There are certain times when parents need more support. Instances of these are when the mother's milk comes in; registering the baby's birth/death; the day after the funeral; when father goes back to work; mother's first day alone in the house; the date of expected delivery; the post-natal examination; when she menstruates; her first day back at work; and the anniversary of her baby's birth/death.

SUMMARY

Make clear who you are and why you are there, and try to share her feelings. Do not reassure her too quickly; do not get into arguments about her doctor or her care or how she should feel. Listen carefully and respond to how she feels. Remember that each person will react in her own way. Draw from your own experience to reassure her that you understand how she feels, and how difficult it is for her. You can assure her that the pain will ease and everything will fit into a perspective - the time varies, and it may take longer than either parent expects, but it will not go on forever - let the parents know some of the stages and symptoms people who grieve go through. The Health Education Council leaflet "The Loss of Your Baby" is helpful and so is your own experience. To know from you that the process is "normal" and expected can be very reassuring. Give parents a chance for more time if they want it. Accept the way the parents feel and your own limitations - you are befriending, not curing or counselling. Someone to laugh and cry with has a lot to offer.

Call the Stillbirth Association if you have any questions

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