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Infant Loss & Bereavement: A Journey for Families and Health Care Professionals

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Infant Loss & Bereavement - A Journey for Families and Health Care Professionals

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Loss...

- Perinatal loss includes infertility during the preconception period, fetal death during pregnancy and infant death in the first year of life.

- Losing a wished-for child is startling and unexpected.

- Responses to this loss range from disappointment to life-changing anguish (Woods & Woods, 1997).
Types of Loss

- Ectopic pregnancy
- Elective abortion
- Fetal death
- Infertility
- Miscarriage (spontaneous abortion)
- Neonatal death
- Stillbirth
- Sudden infant death syndrome (SIDS)
- Sudden unexplained death in infancy (SUID)
- Therapeutic abortion
Historical Perspective

• America’s perspectives on death are evolving (SLOOWLY…)

• Although losses in pregnancy and birth were seen as real possibilities in the 18th and 19th centuries, families still mourned these losses (Hoffert, 1989).

• Birth moved from the home to the hospital in the early 1900s.

• Pain relief efforts left women unaware of their pain and of actual birth, whether stillborn or live (Leavitt, 1986).

• The stage was set for hiding death from women and their families; a shroud of silence grew around perinatal death.
• Acknowledgement and integration of loss into care began slowly, but it has persevered.

• The need for this approach forms the basis for training for nurses, bereavement counselors and research into best-care practices.
Theories of Attachment

• Klaus and Kennel (1976) describe behaviors that demonstrate a bond between mother and baby before birth.

• Peppers and Knapp (1980) show that attachment begins when planning a pregnancy.

• Bowlby (1969) was the first to identify and discuss human attachment.
Rubin’s Tasks of Pregnancy

• The mother: (Rubin, 1984)
  1. Ensures safe passage for self and baby
  2. Ensures social acceptance of self and baby
  3. Binds-in to the baby
  4. Gives of herself

• Rubin’s framework helps nurses identify how women are affected when pregnancy tasks are incomplete.
Pregnancy as a RITE of Passage

Each rite of passage has three stages:
1. Separation
2. Transition
3. Incorporation

A woman separates herself from her old status when she announces her pregnancy.

The transition takes place during the 9 months of pregnancy.
Investment

- Ultrasound
- Genetic Testing
- Fetal Monitoring
- Elective termination
Swanson’s Theory of Caring

Through inductive analyses, Swanson (1991) identified five caring processes:
1. Knowing
2. Being with
3. Doing for
4. Enabling
5. Maintaining belief

The more we invest the more we care....
The “Fetus” is a Person

- The issue of fetal personhood is complex with social, religious, legal and ethical dimensions.

- Bereaved parents have assigned some degree of personhood to their baby; therefore, their loss is real, for a real person who would have been a part of their life and their family (Côté-Arsenault & Dombeck, 2001).
Tentative Pregnancy Anticipatory Grief

- Rothman (1986) found that women withheld their emotional bonds for the pregnancy and baby until after they received test results.

- Anticipatory grief is the preparation for death during or prior to an inevitable loss (Hynan, 1986; Rando, 1986), as opposed to grief after a loss.
Grief and Bereavement

• **Grief** is an emotional response to the loss of something or someone held dear; it is the internal response to loss.

• **Mourning** is a public or external response to the death of a loved one.

• The period of time during which grief and mourning occur after a death is called bereavement.
Grief and Bereavement cont....

• No two people respond to the same event or loss in exactly the same way; grief is individual and depends on how loss affects each person.

• Intense and continued distress symptoms beyond 6 months to 1 year that interfere with one’s ability to function and enjoy life should be evaluated by a mental health professional (Morrow, 2009).

• While severity of loss is often related to the stage of pregnancy when loss is experienced, this is not always the case.
Normal Grief Reaction

- Anger
- Sadness
- Numbness
- Aching Arms
- Guilt/ “what if? “
- Ruminating
- Bargaining
- Isolation or fear of being alone
- Dreams
- Wanting to end the event or prolong it
Be aware of

- Anger, frustration, or resentment of existing children
- Suicidal ideation
- Poor or non-existent support network
- High-risk home environment
- Prior history of loss
- **True lack of acceptance of loss**
- History of high risk behaviors
How we handle the initial news is critical to grief formation & bereavement

- Shapes parent’s experience forever
- Can have lasting impact on younger children
- Normalizing and being present is important
- Be aware of gender differences in grief
- Age appropriate for children
- Empower planning, control, and participation whenever possible
- Help parents anticipate what’s coming
- Things to say and not to say
Readiness

• For grief materials
• To discuss options (know what they are)
• To hold the baby, or not
• To receive visitors & phone calls
• Offer chaplain/ prayer/ baptism
• Photos & mementos
• Emphasis on self- preservation
• Encourage acceptance of help
Personal Awareness

• Your own history with Loss

• How comfortable or not are you with discussing

• Personal emotional triggers

• The art of Presence
Resources

- www.bereavementservices.org
- http://www.childrensdayton.org/cms/bereavement
- https://www.nowilaymedowntosleep.org
- www.babylosscomfort.com/grief-resources/e-cards
- Faces of Loss Support Group (See handout)
- Shades of Blue Support Group (MVH uses)