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Perinatal Loss and Grief

by Diane Youmans, RNC, MSN

Nearly every person working in healthcare has been affected by a perinatal loss in some way either through a family member, friend or perhaps as a personal loss. These events include pregnancy loss by miscarriage, stillbirth, neonatal death, adoption, and unexpected outcomes of pregnancy such as prematurity or birth defects. These experiences and their resulting grief response affect women and their families for a lifetime.

Sensitive and compassionate bereavement support by healthcare providers can help families move through the grief response in a positive and healing fashion. However, we often find ourselves at a loss for words and actions. Our own fear of saying the wrong thing gets in the way of our desire to be helpful. Here are some useful strategies for

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attacking your inner fear and facilitating a healthy grief response for your families.



Acknowledge the loss by first learning about the meaning of the loss: "I am so sorry; can you tell me your story? I really want to listen." Listen attentively to the story and avoid adding your own dialogue. Listen for clues about the meaning of this pregnancy.

Break things up into smaller pieces for this family so they are not overwhelmed. "What concerns you the most right now?" "Is there something I can do for you right now?" Repeat this process as this family moves through this journey. This allows you to slow down and prevents the family from being overwhelmed with details.



Connect with the meaning and help make positive memories. Memory making is the single most helpful activity we can provide. Grief is about remembering, not about forgetting. However,

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families are often too devastated to consider how important memory making can be for their grief process. We may have to lead them slowly down a path filled with renewed pain as we help them create memories.

Examples of memory creation include naming and using the name, holding and seeing, pictures, foot and hand prints, bathing and dressing, baptism or blessings. Making final disposition plans are also a form of memory making and should not be rushed. If there is no tangible baby to see and hold, families can be offered an item that will evoke a memory such as a card, a pair of booties or a copy of an ultrasound.



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