

## Pregnant After a Loss

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## Parenting Experience of Loss



- Parents are unable to complete the normal tasks of pregnancy.
- The maternal identity a woman (*and paternal identity of the partner*) holds for that child does not disappear.
- If loss was the parents' first baby it is easy for others to deny the role of parent

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## At the Time of Loss: What Parents Hear

.You can always have another one

• At least you didn't know the baby

• Grief is often not recognized as a family tragedy and the baby as a significant family member

(Fernandez, et. al, 2011)

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## Remembering: Grief vs. Trauma

- Grief is remembering the deceased as part of the course of adaptation, reorganization and recovery.
- Traumatic memories may be overwhelming and sufficiently stressful that they cannot be integrated without assistance.
- Memories caused by trauma are non-declarative, stored as **sensory experience** in the most primal part of the brain.
- They do not have time punctuation, are not fully cognitive in nature and often are un-recallable unless triggered by sensory experience.

"Upsetting. Every ultrasound I've had...lying in the darkened room, on the bed and they're going to do an ultrasound, just brings back the memories of Ashley's last ultrasound...It's reassuring at the time but I know also how quick things can happen...Death happens in a second."

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## Three process that can develop into complicated grief

- Insufficient integration of the loss into ones autobiographical knowledge base—relationship not recognized
- Negative global beliefs & misinterpretations of grief reactions
- Anxious & depressive avoidance strategies  
(Boelen, van den Hout, et al, 2006, Neimeyer, 2006)

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## Grief verses Depression

- There is a conceptual difference between grief and depression  
(Ritsher & Neugebauer 2002)
- Depression requires treatment
- Grief requires reassurance and support (Shear, 2012)
- Grief is less likely to become "pathological" when others acknowledge the **parenting** experience of their loss.



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“The sorrow which has no vent in tears  
may make other organs weep.”

Henry Maudsley, British psychiatrist (1835-1918)

O’Leary, J. & Warland, J. (2013). Untold Stories of Infant Loss: The Importance of Contact with the Baby for Bereaved Parents. *Journal of Family Nursing*, pp. 1-24 DOI: 10.1177/1074840713495972

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### The Need for Attachment Focused Intervention

- Unresolved histories of early relational trauma often remain actively dysregulated in the intra-psychic mind of a parent and may become a powerful source for prenatal stress (Thomson, 2007)
- Adults born after loss can have ingrained personality traits which are difficult to uncover and resistant to change (Findeisen, 1992; O’Leary & Gaziano, 2011)
- *We went back into the womb and the birth. There was a sense of being all alone and being unaccepted.*
- *I’d always felt like my mother and I weren’t really connected. That played out in my own life as feeling like I was a disappointment.*
- *I never felt “good enough.”*

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### Subsequent Pregnancy/Child

*It’s about grief management, because being pregnant again is the biggest reminder of the greatest loss a mother will ever experience*

Perinatal period revives earlier experiences, especially unresolved emotional issues (Chez, 1995; Raphael-Leff, 2004; Creedy et al. 2000; O’Leary, 2004)

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### What We Already Know about PAL

- Delay attachment fearing another loss (Cote-Arsenault & Marshall 2000, O'Leary, 2008; Robertson & Kavanaugh 1998)
- Subsequent child called 'replacement' 'vulnerable child,' under influence of 'Ghost' or 'penumbra baby', may be subject to increased risk of psychopathology including attachment disorders (Ainsfield & Richards 2000, Kempson, Conley & Murdock 2008, Fonagy, 2000; Heller & Zeanah, 1999; Hughes, et al., 2002 O'Leary 2008; Powell 1995, Reid 2007, Sabbini 1988)
- Overprotective parenting style and poor parent/child affectional bonds can impact on children's later mental health (Armstrong, Hutti, & Myers, 2009; Armstrong & Hutti 1998, Lamb 2002, Pantke & Slade 2006 Parker 1983, Shoebridge & Gowers 2000)
- Higher post-traumatic stress, depressive symptoms, and pregnancy anxiety

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### Developmental Tasks of Subsequent Pregnancy

- Working with the fear of another abnormal pregnancy
- Avoiding attachment for fear of future loss
- Moving past the unwillingness to give up grieving out of loyalty to the baby who died.
- Grieving the loss of self-the self that is parent
- Attaching to the unborn child separately from the child who died (O'Leary & Thorwick, 1994)

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### Parental/Fetal Prenatal Relationship

- The *relationship* between the mother/father and the fetus is not always assumed. They think *pregnancy* but not "baby" until birth.
- It is different than prenatal care-giving (Walsh, 2012) as one can take care of self physically during pregnancy but not necessarily embrace a baby within.

*I had never been pregnant. I didn't really know what was going on. I didn't really associate the baby with me or as a baby, as a person. I just wasn't having my period anymore. It was just what was going on in my body, something biological.*

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• Unless parents are able to find meaning and understand their continued bond and attachment to the deceased baby, this “ghost” baby in the past may interfere with their ability to pay attention to the physical and emotional needs of an unborn baby that follows.

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*We are not destroyed by our suffering. We are destroyed by suffering without meaning.*

*Carl Aikin*

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**The Continued Bond and the Parenting Experience of Loss**

- Death ends a life but not the parental relationship
- Deceased baby remains part of the family and the siblings story.
- Fetal cells enter the maternal circulation during most pregnancies (Khosrotehran, et al, 2003; Williams, et al, 2009)
- How grief and the emotional content is operative in regards to fetal cells remaining may not be known but should not be discounted in a mother’s continued grief response (personnel communication, E. Gazinao, MD).

Khosrotehrani, K., Kirby, L., Johnson, K., Lau, J., Dupuy, A., Cha, D., & Bianchi, D. (2003). The Influence of Fetal Loss on the Presence of Fetal Cell Microchimerism: A Systematic Review. Arthritis & Rheumatism, 48(11), 3237-3241.

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## Grief through the Lens of Attachment

- Bereavement occurs due to the prior formation of attachment bonds and without attachment there would be no bereavement
- Trauma around loss threatens the attachment process and can inhibit new coping strategies and activate affectional bonds (Bowlby, 1989; Kesternbaum 2011).

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## What Defines a Relationship?

- When attachment definitions include an element of time, there is the potential risk of minimization of a perinatal loss (Bowlby, cited in Balk 2011 , p. 48).

*Attachment and investment are separate but linked processes; attachment is concerned with the development of feelings for the baby, whereas investment is a more active process of involvement in the pregnancy* (Moulder, 1994, p. 66).

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## Embodied Grief

*Pain lives in the flesh as well as in words* (Desjarlais, 1992)

- *The voice of the body in grief has been considered inconsequential and even bizarre. Thus it has largely been silenced as it does not fit the dominant story of grief as psychological* (Gudmundsdottir, 2009, p. 255)
- Provides one explanation for changed parental behavior both after a loss and in the pregnancy following loss

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## Continuing Bond/Attachment Based Intervention

- Grief is resolved through the creation of a loving, relationship which recognizes the new psychological or spiritual dimensions of the relationship.
- The goal is not to sever parent's bond with the deceased baby but to help integrate the deceased baby into their lives and social networks (Klass, 2001; Jonas-Simpson, et al, 2006)
- Continued bonds stresses adjusting to the new reality & sustaining a level of connection to the deceased (Roen, 2009-2011).
- Examining loss from a prenatal attachment framework helps keep the deceased baby part of the family in order to attach to the child that follows.

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## Men and Grief

- Measurement of grief itself is biased because of gender stereotypes and scales focus on emotional reactions.
- Due to cultural norms, men's requests for help may go unrecognized.
- May be more angry and aggressive
- Increase use of alcohol
- Drown themselves in work
- Lack of control
- Some studies have found men more heavily affected by grief than women 12 to 15 years after the loss.

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## Men's Themes

- Recognition  
*They want to see how's mom doing. Well you know its affecting me too*
- Preoccupation  
*I can't concentrate at work*
- Stoicism  
*How can I tell her things are going to be okay? I don't know. Nobody knows.*
- Support  
*I don't let her know I'm just as scared as she is so feel like a hypocrite*

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## Is There a Difference between a Loss Group and a Pregnancy After Loss Group?

- The work of the pregnancy after loss group is learning to trust the process of pregnancy again and embrace the new unborn baby
- Physical needs being met by care provider; emotional needs are not necessarily met
- Do not want to burden family: *Family takes on your pain because they love you so much. Strangers in the group can take in on, understand it and know it's normal and family doesn't necessarily understand that.*
- Families begin to understand and process:
  - Finding a place for their grief for one baby while attaching to a new baby
  - process the trauma of their loss and PTSD symptoms

O'Leary, J. (2009). Never a simple journey: Pregnancy following loss. *Bereavement Care*, 28(3), 12-17

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## Helping to Restore Trust in Self as Parent

12-24 Weeks

*My womb killed my last baby so it's not comforting to know the baby is in there.*

- Assess understanding of tests offered
- Be prepared for questions to be repeated; the trauma of loss often interfered with understanding what happened

"...the crucial task is not to uncover, to piece together, and to understand the past, but to use the past for the help it offers in understanding the individual's mode of relating to others in the present" Yalom (1985)

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## Use of Journaling

- Loyalty to the deceased baby may be strong
- Begin helping them separate the babies
- The prenatal relationship between parent and unborn baby: Is it attachment or prenatal care giving/caretaking? (Walsh, 2010)
- Listen to this mother, now at 36 weeks gestation

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## Trust

Using Technology to Know Their Baby

### Limitations of Technology

- It can impersonalize the relationship
- Technology can add to the questions but it is the baby who will offer us the answers.

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## Protective Parenting is Normal

It is common for parents to worry about the safety of all living children



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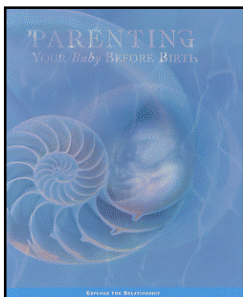
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## Foundations of Support and Intervention



- Reflective practice  
Listen to their stories!
- Understand the continued *parenting* relationship with the baby who died while helping them parent the surviving children

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