

What to Expect



What Should a Mother and Father Expect when Grieving the Loss of their Child?

Your path of grief will be unique. Your spouse and other family or friends who are closely involved will have a totally different experience. Neither your reaction and feelings nor theirs are right or wrong. They are different. It is important to remember that men and women grieve differently. Society and culture form the grief response for both males and females by giving or withholding permission for emotional responses. Be careful not to hold on to expectations for your spouse's behavior. His or her response will likely not be on the same path of time and emotion as yours. God designed you to be unique so you are different from any other human and your grief journey will be a unique experience, not to be measured against the reactions of others.

Mother's Loss

For the mother, the emotional assault that is combined with the physical impact of the pregnancy or miscarriage or coping with a seriously sick child creates stress that does not lend itself to words. What do you do now? Where do you go from this dark emotional place? How do you cope in silence? Do you talk about this? How do you talk about this? Jumbled responses and concern slam into reality. Sadness and confusion are the dense air that surrounds a miscarriage or an infant death.

Loss for the mother is a very intimate and personal experience. Often even close friends and family are not there to support or express care because (in the case of a miscarriage) the event has occurred so early in the pregnancy. When SIDS, infant death, or stillbirth has occurred, family and friends are also grieving. They may be unable to care for the parents when support is needed the most. Through the miracle of conception, the joining of two cells has formed a baby. There is an expectation of a baby, child, and adolescent and then adulthood as the natural sequence of life order. When that order is disrupted, the loss causes the mother to suffer on several levels.

First, the physical loss of the baby may create a need for surgical intervention to resolve the aftermath of the miscarriage. The recovery from surgery and the interruption of work or daily routines are suddenly an unavoidable reality. Clarity of thinking and ability to follow up on normal tasks become bewildering and debilitating.

Next, if there are other children in the home, they will sense that things are somehow not normal. Children may react to the changes in routine by displaying sadness or acting out. Even if they don't know about the miscarriage and what that means, they are now aware that their mother is not happy. If they had known of and were anticipating a new sibling and a stillbirth has occurred, they will also grieve the loss of a happy parent or parents. If they have been a sibling of a child who dies of SIDS or an infant death, the death is real and should be addressed with care and love.

Finally, the loss of the dreams for the child's life add to the suffering of the parents. The emotional impact of disappointment is often a burden so intense that the need to recoil from life activities and interactions is intense.

Mothers are subject to a normal reaction that may exclude others from their communication circle. Husbands, children, family, and friends can find themselves "exiled" not by intention, but from the experience of loss, which leaves the mother without energy or optimism to apply to other relationships.

It is critical that special attention is paid to communicating in an honest way with the father, with other children, and the extended family. The mother's emotional isolation can damage her and her family relationships if not carefully tended. Mothers should make sure to use what little energy they have to keep the communication lines open.

Grandparents should be included in the circle of loss as well. Their loss may include the sadness they feel not only for themselves, but the witness of the sadness of their son or daughter and spouse who are so wounded by this loss. Grandparents grieve as deeply as the parents in some cases, as they are seeing generational loss that is powerful and personal.

Father's Loss

For the father who has been actively involved in the pregnancy and/or life of the child, the feelings of disappointment and heartfelt sadness will be new and possibly so unexpected that he can hardly function. Not only is he experiencing the loss of the baby but also the recognition that the baby's mother is physically and emotionally struggling. This dual concern often creates for him an additional sense of helplessness and frustration. That combination of unexpected circumstances and emotions can lead to relationship difficulties between the parents. Careful attention to the relationship post-miscarriage or post-death are important for both the mother and father. It is important for both parents to be patient with one another, as there are no rule books or timetables that apply to the grief process.

A father often finds himself in a "role reversal" situation that is foreign to the normal relationship with his wife. Women are typically the family caretakers. They are the managers of the laundry, meal preparation, and if there are other children in the family, those tasks may include scheduling car pool and sport commitments.

When a miscarriage or death of a baby occurs, those duties fall to the father, who is also grieving. He will need to recognize that his wife is unable to carry on those types of activities for a while as she recovers. He may feel he is ill prepared to assume those tasks. More important than the assumption of tasks is the recognition that when he asks his wife what she wants for dinner, for example, she may be unable to think clearly enough to tell him what she would like to eat. His shock, grief, and loss—rather than neglect of his wife—can hinder his insight to be able to understand that a decision as simple as "soup or a sandwich" can become an insurmountable thought process for her.

It is vitally important to know that when the stress of a miscarriage or infant death occurs, the brain actually does not work the way it should or has worked before. Both parents are impaired for a time. It is important for both mother and father to have realistic expectations of one other. During this grief-laden time, what was normal and easy becomes difficult and dynamically complex. Patience and grace toward one other are critical during the early days and weeks after the loss of a child.

After a Miscarriage

For the mother and father who have experienced a miscarriage, the emotional assault encompasses their entire being. The loss is rarely discussed beyond the immediate circle of family and friends due to the intimacy of the event. Miscarriage brings with it profound sadness, questions about the cause of the miscarriage, and feelings of brokenness. The broken dreams, broken heart, a broken body (for the mother), and wounded souls of the parents are all too often suffered in silence.

The Heartbreak of Sudden Infant Death Syndrome (SIDS)

SIDS is a devastating and mysterious death occurrence in infants. Up to the age of one (three years old is also included in some statistical reports of SIDS), a sudden death can occur and be labeled as a syndrome death. There are many theories about cause and prevention. Your healthcare professional may have shared the current thinking on the topic with you.

For some parents, knowing is important; but knowing changes nothing. A baby has died. The loss is sudden and intimate. Those two elements make the impact of the loss a very precious loss.

In fact, you may never know or be satisfied with the information you learn in research or hear from a professional. The reality is that your baby's body stopped functioning as it should. His or her tiny body made up of many parts (heart, brain, lungs, liver, kidneys, and other organs, as well as air passages, blood vessels, and skeletal frame) failed to work in concert to sustain life. There are many things in life we just don't understand. SIDS is one of those things for many families.

Whatever the cause of the death of your child or how it occurred, research indicates that there are two reactions typically experienced by the parents and/or family members. One is a crisis of faith; the second is a deepening of faith. Read about your wounded soul and map your progress in God's model of grieving that you'll find later in this book. You can find yourself content and actually happy again.

Terminology and Statistics

Illness or Congenital Abnormality

Deaths from illness or congenital abnormalities are different from the more bewildering types of infant deaths as in SIDS and stillbirth. The cause is often known. Infections or heart, lung, or kidney abnormalities take the lives of babies within hours, days, or months and create yet another type of precious loss. These deaths are so unfair and so confusing to the parents when the cause seems to render the family questioning the origins of the life-taking illness or body abnormality. Hope for sustainable life is always a desire, yet in many cases the reality of survival is clearly not possible. Infant death due to illness, genetic abnormalities, or post-birth complications will also be grouped with the SIDS topics.

Infant Death

The death of a child who was alive at birth but died soon after is under the general category of infant death.

Miscarriage

Miscarriage, also known as spontaneous abortion and pregnancy loss, is the natural death of an embryo or fetus before it is able to survive independently. It is also the term used when a pregnancy is not viable, including ectopic pregnancies where medical intervention is required for termination of the pregnancy. Research reports that 25 percent of pregnancies end in miscarriage. (This staggering statistic, especially if you are in that 25 percent group, is so much more than a number to the mother, father, and family of the baby who has not survived. This type of loss is virtually a silent wound to the soul.)

Stillborn—Death at or Prior to Birth

The shock of death instead of the expected live birth is one with horrific impact whether it occurred as an early- or late-term death. Perhaps there was an indication prior to delivery that the baby was no longer alive; or perhaps it was the delivery process that took the life of the baby. The harsh reality of a stillbirth pierces the souls of the parents.

Names had been selected, announcements made ready, nursery assembled, and showers of gifts had been received, all of which now turn to empty hopes and profound loss. Your precious one is lost to you.

Stillbirth refers to the death of a baby in the womb after twenty weeks. Prior to twenty weeks the term is miscarriage. Early stillbirth occurs in the twenty- to twenty-seven-week period; late stillbirth occurs in the twenty-eight to thirty-six-week period; and term stillborn or a stillbirth occurs at or after the thirty-seven-week period. One percent of the births in the United States, or approximately 24,000 births annually are stillbirths. Stillbirths occur ten times more often than SIDS deaths. The exact cause of death is often undetermined, even when medical examination occurs.

SIDS (Sudden Infant Death Syndrome) and SUID (Sudden Unexplained Infant Death)

SIDS is one part of a composite term of infant deaths that occur between birth and one year of age. The term SUID includes all three types of death: SIDS (45 percent), unknown causes of death (31 percent) and accidental suffocation or strangulation (24 percent). Approximately 3,500 SUIDs occurred in 2013 in the United States. SIDS will be used as a universal term in this book for the death of an infant up to one year of age, regardless of the classification listed above.