

Babies Remembered

Honoring and Remembering Loved Babies Who Have Died

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Healthy Grieving - Supporting Others and Living It

"Grief is not an enemy; it is a friend. It is a natural process of walking through the hurt and growing because of the walk. Let it happen. Stand up tall to friends and to yourself and say, "Don't take my grief away from me. I deserve it and I'm going to have it," writes Doug Manning, pastor, consultant, bereavement expert, and author of many books including the one this book comes from, Don't Take My Grief Away. More profound words have not been spoken, in my opinion.

After a loved one dies, the pressure to get better quickly is intense—workplace bosses and colleagues, relatives, friends, and even strangers critique the duration and intensity of one's grief. If it goes on much past a few weeks, or beyond a month, the bereaved person must be *dwelling* unnecessarily. They must be *stuck*. They better get help or they will get depressed and become *really* 'sick'. This commonplace misunderstanding of the process of living through, and after, a loved one's death causes many problems for the bereaved and their family.

It might help to better understand what grief and mourning are and how to present this to the newly bereaved...to arm them with words and ideas for expressing their grief in a healthy manner. And if you are the bereaved person, this wisdom can help you personally face what each of us will eventually face in our lifetimes, unless we die first.

In this issue, we have invited some experts – professionals and bereaved, to share their wisdom and experiences. We are fortunate to have had a few decades of solid work in the grief and loss arena. There are many well-respected people writing, researching, and speaking out about this often misunderstood natural part of every person's life.

Our challenge then is to find ways to live it well and teach others how to also.

" Grief can be delayed,
but it can not be denied.."

Integrating Your Baby Into Your Family...Forever

"Stillbirth survivor Kara Jones explains in Grief Unseen, by Laura Seftel, "There was a time when I thought I would have to set my child aside, put him away, be 'over' his life and death before I could ever hold or love another child." As her process unfolded, she learned that healing derived not from forgetting her son, but from integrating his presence into her life. Likewise, bereavement specialists today are less likely to urge families to 'move on' and put the loss behind them. Healthy grieving is now seen as incorporating a productive ongoing relationship with the lost loved one – an attachment that does not interfere with the family's ability to adapt to their lives in the here and now."

Joann O'Leary, PhD, subsequent pregnancy expert, and co-author of When Pregnancy Follows a Loss: Preparing for the Birth of Your New Baby, writes, "When parents or others diminish the parenting relationship with the deceased baby, there can be trauma surrounding how the parents mourn this baby. In addition, by not honoring this relationship and learning to 'be' the parent of the baby who died, bonding and attachment with subsequent children can occur. "Why should I risk attaching to this baby in case he/she dies too?" Remembering the deceased baby's own visible place in the family honors the ongoing parenting role for both the living and the dead children, helping each child become a separate individual."

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Sherokee Ilse: The author of Empty Arms, 17 books/pamphlets dealing with grief and loss, and the magazine 'Babies Remembered'. "I have been helping both parents and professionals in the field of stillbirth and infant loss, as well as promoting research on probable causes for stillbirth to save babies lives for over 28 years. I am a bereaved mother and a professional. Feel free to contact me re: speaking engagements, my books, new CDs, the new CEU units for nurses, or other info. www.babiesremembered.org, info@babiesremembered.org or by phone 952-476-1303.



NEW CLINIC VIDEO

I Hardly Knew You...What Happens Next?

Babies Remembered introduces a new video to help families take time to prepare before they rush off to the hospital. This 19 minute video is the first of its kind. Once the sad news has been delivered to parents that their baby has died in utero or is dying, and before they head to the hospital...sit down and watch this compassionate video with them. You can also send a copy of it home once you have started watching it together. This offers a message from parents who have been there--they share a little about what is to come, ideas on how to minimize regrets, and they strongly support taking some time at home to calm down a bit, scream and cry if necessary, call others, read self-help materials on the upcoming decisions, pack a bag including baby items, and so much more. It is time to slow down this unfair rush to the hospital and give parents what they need to make this a special time.

Cost is \$65 for the set, and \$15 for each additional video.

To order the parent and the staff Video (CD or DVD) contact
Info@babiesremembered.org or 952-476-1303.

Therefore, the message to parents is that you are encouraged to understand there is a bond with your baby who has died. Keeping that love alive and thoughtfully integrating them into your lives may very well help you be a more healthy mourner with a more healthy family.

The Cure for GRIEF: To Medicate or to Grieve?

Far too many doctors are quick to offer or insist that drugs are necessary to help parents cope with death or other serious losses. Maybe it is prompted by our 'quick fix' society who wish to be *healed and over it* within days or weeks. Too many have the belief that the pain is not to be *borne and dealt* with, but rather *eliminated*.

Whether it is the pharma commercials that motivate parents to ask for medication or the physicians' desires to make it better, or both... it seems that more and more bereaved mothers are being given prescriptions for anti-depressants or anti-anxiety drugs, often while still in the hospital before or after the birth. This is a frightening turn of events--one we worked hard to attempt to eradicate a mere few decades ago. Normal grief, which is painful and has a lasting impact, is NOT an illness. Medication may dull things for awhile, but grief pain does not magically disappear. Where are the studies that show drugs are the cure for grief?

Normal grieving will mimic depression, but it is not. There are physical, emotional, and spiritual aspects to grief...parents may experience sleeplessness or the need to sleep all the time, sighing, crying, aching, confusion, memory loss, questions of God and faith, empty feelings in the body and in life, deep despair, sadness, anger, and more. These feelings can be overwhelming, especially if not expected and understood. When you love someone and they die too soon, the natural instinct is to miss them, feel anguished, and have many intense emotions. These are a sign of love...it is the tough grief work that naturally happens *because we love so deeply*. As we have heard over and over, "Grief can be delayed, but cannot be denied."

Taking the time and energy to *feel* the emotions of grief, to *deal* with them, and to *work* towards being healed, are worth it. This is the Rx for feeling better. Grief is a process of trying to cope with your loss and making meaning out of life without one's baby. Grieving is not easy. It is long, unpredictable, and requires much energy. But it is necessary if you are to work through the pain toward healing. Stuffing one's pain and emotions inside a trunk in the attic or seeking to be cured with medication, only delay the inevitable.

Is it better to do the work early, when you might have your community's support, or to wait till it knocks you over at some unsuspecting time in the future? Who will be there for you then? There are many resources to help parents understand and experience their pain. Finding and using these resources is far better than taking a prescription

(See **Is Grief A Mental Disorder** on pg 4)

Common Messages Parents Hear And How to Respond

The baby has been LOST

"She 'lost' her baby."

"Mom, if you lost the baby, don't you think you should go find it?" (Message - You 'lost' it and you make me find my toys when I lose them, what's wrong with you that you can't find our baby?)

According to the dictionary and thesaurus:

Lost, v.tr. 1. To be unsuccessful in retaining possession of; mislay; He's always losing his car keys.

Synonym – misplace, mislay Antonym – to find, hold on to, keep, maintain

This common phrase does not bother everyone, but does cut deeply for many. Not only did the baby die under mom's 'watch,' but now she is subtly being accused of having lost or done something to lose the baby. Guilt and shame abound. These words could be easily avoided.

Instead, *"Her baby died."* This is more to the point and honest, nothing guilt producing about the words themselves.

Can't measure love by the size of a body or the length one has known them

"It would have been worse if he had been 2 or 10 and then died."

(Message: Little babies aren't as important as older children.)

Love does not work this way, nor does grieving. If this were really true, then parents would love their oldest more than the younger children and spouses in longer marriages would love their partner more than newlyweds. When you love someone, you love them to the capacity you can at the time. Yes, love changes, but does it really grow in amount as a child grows up or the longer one is in a relationship?

Instead, *"Having a baby die must be horrible. All those hopes and dreams and the future you had built. You will miss her deeply from now on."*

God had a role

"God must have wanted her more than you."

Or *"God needed an angel."* (Message: You are not a fit parent, so God choose yours to fill heaven with angels.)

While this is a common one, meant to offer comfort, it can actually add to parents' feelings of guilt. They may wonder if God knew something about their heart or future that meant they would be an unfit parent. They may view this death as a punishment for past sins or thoughts (we all have them.) It is better not to venture a guess as to what role God might or might not have played in this tragedy.

Stillbirth Survey

Please help us spread this survey around regarding

Symptoms and Possible Causes of Stillbirth

If you have had a stillbirth and wish to participate in the Survey that could provide valuable information for future pregnancies, do so at:

<http://www.surveymonkey.com/s/XC38QPF>

Instead, *"Are you angry with God? Many people are. Many of us believe that He can handle our anger."* If they are a Christian, one could say, *"Some people have said that they are convinced that God is sad and knows your pain. After all, his only son suffered and died on a cross."*

Another baby or other living children should bring gratefulness and healing

"You can always have another baby" or *"At least you have two other children."* (Message: so go ahead and stop crying and being sad. Another child will replace this one.)

Of course, we know this is not true. No loved one is replaced by another one. Each person, and in this case, each baby, is unique and special for who THEY were. They need to be grieved long before loving another new baby can happen. And as for other living children, each one matters, is loved, and would be sorely missed. This kind of deep pain is not easily lessened because other children exist.

Try this one instead with people and see if they notice how crazy their statement was, *"Well, that's like saying so someone shortly after their loved one's death...I am so sorry your husband just died, but you can always find another. When will you start dating again."*

A Death Has Occurred

*A death has occurred and everything is changed.
We are painfully aware that life
Can never be the same again,
That yesterday is over,
That relationships once rich have ended (and dreams once dreamt).
But there is another way to look upon this truth.
If life now went on the same,
Without the presence of the one who has died,
We could only conclude that the life we remember
Made no contribution, filled no space, meant nothing.
The fact that this person left behind a place
That cannot be filled
is a high tribute to this individual.*

*Life can be the same after a trinket has been lost,
But never after the loss of a treasure.*

-Paul Irion

Is GRIEF A MENTAL DISORDER? No, BUT it May BECOME ONE!

Ron Pies, MD, ronpies@massmed.org

“When it comes to grief, I prefer the terms ‘Productive Grief’ and ‘Non-productive Grief’. You can also think of these as ‘*Healing Grief*’ vs ‘*Corrosive Grief*,’” respectively.

Earlier in the piece Dr. Pies wrote, “Let me be clear. Most people who experience a major loss or setback do not develop a major depressive episode. Even most people who have lost a loved one are more likely to experience ‘normal’ grief—I’ll have more to say on ‘normal’ in a moment- than to develop clinical depression. Most will recover with simple support, kindness, and empathy from friends and family. Uncomplicated grief is not a disease, nor does it require medical or professional treatment.

But a certain small percentage of the bereaved do not travel this benign path of ‘natural healing.’ ... Recently, Dr. Naomi Simon and her colleagues have described a syndrome that closely resembles pathological mourning, termed *Complicated Grief* (CG). This condition follows the loss of a loved one, lasts at least six months, and consists of:

- A sense of disbelief regarding the death
- Persistent, intense longing, yearning, and preoccupation with the deceased
- Recurrent intrusive images of the dying person
- Avoidance of painful reminders of the death.

CG is chronic, debilitating, and associated with the development of medical problems, reduced ability to work and suicidal tendencies. Yet, most patients with CG don’t meet the full criteria for a major depressive episode... the person who experiences *Non-productive* or *Corrosive Grief* experiences a kind of shrinkage of the self. He or she feels not only deep sorrow, but also a pervasive sense of being ‘eaten up’ by their grief. Try as they might, friends and loved ones do the person no good. Their efforts at comfort and support are rebuffed, or are experienced as intrusive. The person with *Non-productive* grief usually prefers to be alone, and resents attempts to bring her out of her shell of self-involvement. Often, these unfortunate souls feel worthless, guilty, or ‘not worth keeping around.’ Many of these individuals would probably meet Dr. Simon’s criteria for Complicated Grief, and some will develop a full-blown episode of major depression.

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