



## Women's need for increased awareness and acknowledgement of the grief and loss associated with miscarriage

**Clare BELLHOUSE<sup>1</sup>, Meredith TEMPLE-SMITH<sup>2</sup>, Shaun WATSON<sup>1</sup>, Jade BILARDI<sup>2,3,4</sup>**

*<sup>1</sup>School of Health Sciences and Psychology, Federation University Australia, Ballarat, Victoria, Australia <sup>2</sup>Department of General Practice, The University of Melbourne, Melbourne, Victoria, Australia <sup>3</sup>Central Clinical School, Monash University, Melbourne, Victoria, Australia <sup>4</sup>Melbourne Sexual Health Centre, Alfred Health, Melbourne, Victoria, Australia.*

# Background

- Pregnancy loss before 20 weeks gestation
- Common – up to 1 in 4 pregnancies
- Significant psychological impacts on women regardless of length of pregnancy<sup>1,3</sup>

# Background

- Common emotional responses
  - Grief, distress, isolation, anger, sadness<sup>2</sup>
  - Clinical levels depression, anxiety, PTSD<sup>3</sup>
  - Loss of hopes and dreams for the future<sup>2</sup>
  - Doubts of ability to have children<sup>2</sup>
- Intensified by poor support experiences<sup>4</sup>

## Background

- Medical sector - routine pregnancy complication<sup>1,2</sup>
- Lack of clinical care guidelines for women's mental health
- Desire more follow-up and support following miscarriage
  - Professionals and friends/family

# Aim

The aim of this study was to explore women's social and healthcare support experiences following miscarriage.

# Methods

- Federation University in conjunction with University of Melbourne
- Qualitative study
  - 15 semi-structured interviews
  - Face to face or over the phone
- Short demographic questionnaire
- Reproductive timeline

# Methods

- Recruitment:
  - Existing networks
  - Flyers medical centres
  - Miscarriage support organisations
  - Snowball sampling
  
- Eligibility:
  - 18-50yrs
  - Miscarriage/s (>3mths - <10 yrs)
  - Good understanding of English

# Methods

- Phenomenological approach
- Interviews taped and transcribed verbatim
- Analysed thematically
- N-Vivo used for data management



# Results

- 15 women

	N % or Median [Range]
Age [range]	36 [33-43]
Born in Australia	12 (80%)
Number of miscarriages	3 [1-4]
Private health care	8 (53%)

## Results – psychological impact

- Women reported varying levels of psychological distress associated with miscarriage - for most women, the levels of distress, grief, and loss was significant.
- Some diagnoses of prenatal and postnatal depression and anxiety.

# Psychological impact of miscarriage

*“I was grief stricken. Like I really, really struggled with that, like a lot. And I remember, yeah, just crying every single day... I dunno if it was depression but it took me probably a good, it probably took me until I got pregnant with the twins to get over that miscarriage...people think there should be a limit to grief” (Anna, age 34, 2 miscarriages).*

# Social support

- Silence surrounding miscarriage
- Lack of understanding or acknowledgement of their grief and loss from friends and family
- Insensitive comments and behaviours
- Some positive supports

## Social support experience

*“People saying, ‘Oh you know, you’ll get pregnant again’, or ‘Oh it was meant to be’. You know, that’s just the worst thing to say. And so many people say stuff like that...I would say that the only thing I really found helpful was just someone being there and just acknowledging that it’s a shit situation” (Samantha, age 36, 3 miscarriages)*

## Social support experience

*“There was one particular aunty who had five losses of her own who sort of came out and said, you know, ‘come and hide out under my wing and I’ll talk to you about it’, and that was really wonderful to have somebody else because I wasn’t aware that she’d had those experiences either, because nobody talks about it. But just to know that somebody else had similar experiences, was very reassuring for me” (Carrie, age 42, 3 miscarriages)*

# Healthcare support

- Both positive and negative experiences
- Increased distress due to negative experiences
- Lack of support and sensitivity from professionals
- Lack of follow-up and support services offered

## Healthcare support experience

*“...it was absolutely appalling, like absolutely appalling. To the extent where I’ve actually wondered if there’s anything I can do, like there’s a huge lack of services...people need help while they’re going through this... I found the doctors to be honest to be patronizing and condescending... I felt like through that whole thing I had no one in my corner” (Melanie, age 39, 1 miscarriage)*



## Healthcare support experiences

*“We had a D&C, in some respects that was okay, and it kind of makes it easier because you don’t have to wait and stuff. But you go into the maternity ward, to have it, so I was, I was, went in with all these pregnant women about to have their babies and you know the hospital cradles that they have for babies? There was one of those across from my bed” (Catherine, age 35, 2 miscarriages).*

## Healthcare support experience

*“I called my private obstetrician, because it happened at Easter, she said, ‘Why didn’t you call me?!’ and I said, ‘because it happened at Easter, you’re on holidays!’ and she said, ‘you call me anytime’. And she was so firm about it. She said, ‘... my phone number should be on your speed dial, you call me if you have a question, or if anything happens’, and she was so responsive, and yeah, like you said, she was totally on my team” (Helen, age 40, 4 miscarriages).*

# Recommendations – social support

- Sharing grieving process helped and lessened their feelings of isolation
  - Women who had miscarried before
- Women want more support physically and emotionally from friends/family
  - Don't ignore women or pretend it didn't happen

## Social Support

*“Like when you just asked me, ‘Did you grieve over your babies?’ I go, I kind of thought, that’s really strong, but the thing is I did, and for someone to go, ‘That’s okay to do that, it’s full on’, well you kind of, like you need someone, that reassurance that yes, it is valid” (Sarah, age 38, 3 miscarriages).*

## Social Support

*“If you’re pregnant at 9 weeks, like if you tell everybody at 9 weeks and you have a miscarriage at 10 weeks then it’s fine that you told everyone because you can then talk about the miscarriage and it makes it more common and it takes it a different way and it will make it less of a secret. Like a secret, secret that everybody’s got, it’ll make it more open. And I kind of wish that I did sort of talk about it more” (Alana, age 40, 3 miscarriages)*

## Social Support

*“It’s just acknowledging that it’s really painful, and that loss really meant something. Don’t just keep saying it’s common, like that’s just a terrible thing to say, because it makes it, like it minimises, like it’s like saying it doesn’t matter” (Anna, age 34, 2 miscarriages)*

# Recommendations – healthcare support

- What women want:
  - Information about risk of miscarriage from doctor in early pregnancy
  - Referral to psychologist
  - Follow up appointment with doctor
  - More acknowledgement and sensitivity from professionals

# Healthcare Support

*“Being able to offer those support services afterwards, the follow-up, touching base... even a phone call a few days later, just to say, ‘How are you going? Are you okay? Are you experiencing any physical pain? Do you need, yeah, do you wanna come and have a chat to someone?’ or something like that, yeah follow-up would be good” (Louise, age 41, 2 miscarriages).*



# Healthcare Support

*“I really think that when you go in for your initial conversation and you say, ‘Hey! Congratulations to me! I’m pregnant!’ The GP should give you something, to say like, ‘This is what you need to look out for’, because this is real, this really happens, and it’s scary because you don’t really know what’s going on” (Sally, age 42, two miscarriages).*

## Healthcare Support

*“I do think there’s a lot of room for training for them, and I just kind of talk about that not just from my experience... they could make things better, or a lot worse. And you know, I don’t think they need to be psychologists, like they’re not there to have an hour long discussion with you, but just the capacity to say, you know, ‘I’m really sorry’, and, or, or like just kind of know, like the recommended support service or something like that” (Samantha, age 36, 3 miscarriages)*

# Conclusion

- Greater support & acknowledgment from healthcare providers and family/friends of the grief and loss associated miscarriage
- Miscarriage is much more than a routine pregnancy complication – it is the loss of their baby regardless of length of pregnancy

# Acknowledgements

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## ***References***

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*“I mean the loss was both physically and psychologically traumatic... some healthcare providers and friends and family added to that trauma”*