Death of a baby

Summary

- Miscarriage, stillbirth or death of a newborn infant is a shattering event for parents and families expecting a baby and everyone responds to this in different ways.
- If your baby died from a genetic disorder, seek genetic counselling.
- Contact bereavement services such as SANDS and SIDS and Kids for information, advice and support.

Miscarriage, stillbirth or neonatal death (death of a newborn infant) can be a shattering event for anyone expecting a baby, and for their families. Everyone reacts and responds in different ways.

Reactions to the death of a baby

Some common grief reactions include:

- **Shock and disbelief** – many people report feeling numb and empty when they learn their baby has died. Normal grief reactions include shock, physical pain, and feelings of loss, anger, sadness and guilt.
- **Guilt, anger and blame** – these are normal reactions. For example, parents worry that something they did or didn’t do during the pregnancy caused the baby’s death.
- **Isolation** – friends and relatives may not know how to handle the situation and choose to avoid the grieving parents and their families, or they may lend support for a month or two before leaving them to cope alone.
- **Family conflict** – people may grieve in different, and sometimes conflicting, ways. Parents may notice behavioural changes in their other children, or impacts on other family members such as grandparents. Men and women may cope and express their feelings very differently, which can cause friction between couples. However, contrary to popular belief, most couples stay together after the death of a baby.
- **Lack of acknowledgment of loss** – if the parents’ loss is not recognised or acknowledged, they may feel very unsupported.

Miscarriage

Losing a baby by miscarriage can be particularly isolating. If the baby dies during the first trimester, it is possible that most people didn’t even know the woman was expecting a baby. In such cases a miscarriage can go unrecognised by others.

Other difficulties include:

- **The suddenness of the miscarriage** – it may be over before anyone has time to do anything to stop it.
- **Lack of ritual** – people who experience a miscarriage don’t have the opportunity to express their grief through rituals such as a funeral and burial.
- **Understanding** – often there is no medical explanation for a woman’s miscarriage. This can leave parents feeling guilty, anxious and fearful of another miscarriage.

Sudden unexpected death in infants (SUDI)

SUDI, including sudden infant death syndrome (SIDS) and fatal sleeping accidents, is the sudden and unexpected death of a baby. Concerns for grieving parents and families include:

- Never knowing what caused their baby to die
- Guilt or self-blame that somehow they were responsible for the baby’s death
- The distress caused by police and coronial involvement
- The autopsy of their baby

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• Others’ ignorance about SUDI may lead to parents not receiving support and even being blamed for the death of their child.

Coping with the death of a baby in the long term

In the months and years ahead, parents may experience painful reminders from expected and unexpected sources, including:

• The pregnancies and newborn babies of friends and relatives
• Packing away the layette (items bought for the baby such as a cot, pram and clothes) to be stored or given away
• Special dates – such as the child’s birthday, estimated due date or death anniversary
• Family occasions – such as Christmas, Mother’s Day or Father’s Day
• For months or even years, parents may note when their child was due to reach certain milestones, such as crawling, walking and talking
• Dealing with well-meaning questions such as ‘How many children do you have?’ or ‘Was it a girl or a boy?’ when meeting acquaintances who don’t know the baby has died
• Possibly being excessively vigilant or protective over other or later children
• Feeling anxiety and fear during subsequent pregnancies or when subsequent babies are asleep or sick.

Suggestions for grieving parents

Suggestions include:

• Acknowledge painful anniversaries – such as your child’s birthday – by creating your own rituals.
• Take your time with the difficult task of packing or giving away the layette. Dealing with the physical reminders of your expectations and hopes is an important and often painful part of grieving.
• Talk to your doctor and other healthcare professionals about the cause of your baby’s death. Reassure yourself that it wasn’t your fault.
• Contact bereavement services or self-help groups such as SIDS and Kids Victoria or Stillbirth and Neonatal Death Support (SANDS) for information, advice and support.
• Seek counselling.
• Remember that grief is an individual experience and different people grieve in different ways. If your significant relationships are suffering, seek counselling together.
• Get in touch with other bereaved parents. Organisations such as those listed above have trained parent supporters and offer support groups.

Subsequent pregnancies after the death of a baby

Many parents who experience a miscarriage or stillbirth choose to try again for a child. However, pregnancy can be an anxious and bewildering time until the health and survival of the new baby is assured.

Some reactions include:

• Emotionally reliving the death of your child
• Feeling that conceiving another child will ‘betray’ the child who has died
• Anxiety that the next baby will also die
• Lack of confidence in yourself as a competent parent because you couldn’t prevent the death of your baby.

Suggestions for subsequent pregnancies

Suggestions for any further pregnancies include:

• If your baby died from a genetic disorder, try to find out as much as you can about the disorder and seek genetic counselling.
• If you are pregnant again, starting a pregnancy diary may help you work through your thoughts and feelings, both positive and negative.
• Tell your doctor and other healthcare professionals about your feelings. Ask for and expect sensitive emotional support during subsequent pregnancies.
Where to get help

- **Red Nose** (formally SIDS and Kids) Tel. *(03) 8888 1600* or the 24-hour Bereavement Support Line Tel. **1300 308 307**
- Your doctor
- **National Association for Loss and Grief (Vic)** (NALAG) Tel. *(03) 9329 4003* or **1800 100 023** – for referral to an accredited grief counsellor
- **Stillbirth and Neonatal Death Support (SANDS)** Tel. **1300 072 637**
- **Post and Antenatal Depression Association (PANDA)** Tel. **1300 726 306**
- Australian Centre for Grief and Bereavement Tel. *(03) 9265 2100* or **1800 642 066**

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