

# Empty Arms, Broken Hearts

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Early in the morning on December 4, 1992, I went into labor to deliver our fourth child. I was at home, surrounded by my family; we were excited and ready to welcome a new baby into our lives. After a very short and intense few hours, Michael Jacob Triick was born and the world came crashing down around us. Michael was born with Trisomy 13, a condition involving multiple, severe, uncorrectable birth defects. He lived for 32 hours, most of which were spent in my arms in a neonatal intensive care unit. After he died, we returned home with empty, broken hearts, numb with the pain of our grief. Our lives were shattered. They have since mended, but the scars will always be there.

Most of us will eventually find our lives touched by loss, whether it is our own tragedy, a friend's, or that of a member of our extended family. The emotions involved are intense, agonizing, and hard to face. It is difficult to know what to do, how to cope. I would like to share with you some insights I have gained from my own experience and from talking to others who have suffered the loss of a child.

Grief, like all of life's experiences, finds different expression in different people. There are no rules to follow, no set procedures that will get everyone through the devastation. It is a long, unpredictable process. Women who are in the midst of tragedy often get conflicting signals and advice from friends and family. Just as there is no one right way to mother a child, there is also no one correct way to grieve, whether the cause of the child's death was unexpected, as it is with accidents, miscarriage, stillbirth, Sudden Infant Death Syndrome, a case like Michael's, or whether it occurs after a long, drawn-out illness.

The age of the child when he or she dies is not an accurate measure of the grief a family will feel. When a newborn baby dies, it is no more or less a loss to that family than when an older child dies. Miscarriages are often grieved deeply by both the mother and the rest of the family. Many people are not familiar with the fact that not every multiple pregnancy results in multiple live births. Parents who have lost one baby in a set of twins or triplets grieve just as much as parents who have lost children in other ways. "Being prepared for the arrival of two and only parenting one is the hardest thing I have ever done," says Laura Jerbi, co-founder of the Chicago Connection for Loss in Multiple Birth. "I was trying so hard to get the nursing thing down right, was sore from the incision, tired, unnerved.... I would cry at the drop of a pin, mostly from feeling so overwhelmed from the whole ordeal, let alone any postpartum changes! The first time I tried to nurse Katie, all I kept seeing were the images in all the books of two babies at two breasts." These families are not only dealing with the death of one of their children, but they also must cope with all the stresses that accompany life with a newborn (or two). In addition, the surviving baby or babies may be hospitalized for a time after their birth, which involves its own brand of confusion and grief.

## ***Grief Is an Individual Journey***

When dealing with bereavement and loss, whatever works, whatever parents need to do (or not do) to survive the experience is what is right for them. As you trust in the inborn ability of parents to be able to choose what is right for their family in other situations, trust also that they will be able to choose better than anyone else how to get through their grief in the best way that they can.

Please don't ignore grieving parents or their tragedy. When people are confronted with bereaved parents and watch them as they suffer through their loss, they come face-to-face with their own feelings about death. This can be a very disconcerting and difficult experience. Acknowledging your own feelings and expressing your own sorrow are often far more comforting than "being strong" for the family. If you are uncomfortable or don't know what to say, a hug, an arm around the mother's waist, a sympathetic touch on the arm, will all speak volumes.

Although expressions of sympathy are always appreciated, probably far more than the giver realizes, use some care in what you choose to say. There is nothing wrong with a simple, heartfelt "I'm sorry, I feel so bad for you." However, after Michael died, I heard many things from people who I knew truly cared and were doing their best to try to ease my sadness, but which really hurt. Don't tell a mother that you know how she feels, even if you have had a very similar tragedy in your own life. It's never the same. Avoid comments such as these: "You're young, you can have more children" (I didn't want another child, I wanted Michael!); "You're so lucky, you still have three beautiful children here with you" (You can imagine how lucky I felt); or "Now you have a little angel in heaven" (I didn't want him in heaven, I wanted him alive and in my arms!). These remarks can assault the grieving heart and can cause a mother to doubt the legitimacy of her own feelings.

## ***Helpful Actions***

The best thing you can offer a grieving mother is to sit with her and listen to her, if she wants to talk, for as long as she wants to talk. A mother may need to talk about her baby and his or her death for weeks, months, or even years. Suspend all judgments, offer no solutions, and don't try to talk her out of her feelings. Be a safe receptacle for her grief. Use reflective listening, restating what she has said to you and her feelings about it in a way that shows her your understanding and acceptance. In this way, you will be able to offer her a much needed respite from comments that suggest how she "should" feel. John DeFrain, in the book *Stillborn*, says, "The most helpful people were those who were not afraid to talk about death. They did not look the other way, or change the subject, or run off to some important tasks. They stayed with me. They held fast. They were afraid, but they were not so afraid that they could not be with me... Thank God for them."

One of the most important things you can do when helping a grieving mother (or anyone else, for that matter) is to ask her what she needs or feels comfortable with, because it will vary from person to person. Some women will want to talk; some will want to be left alone. Some people will lose themselves in a frenzy of activity; some will be unable to get out of bed for days on end. Many grieving mothers are so numb that it is impossible for them to think. A specific

suggestion of something you could do for her, such as bringing the family a meal, doing some laundry, or running a few errands for her, is much more helpful than a vague offer such as, "Whatever I can do to help, just call me." The grieving mother may find it totally impossible to pick up the phone and call for help, no matter how badly she needs it or how well she knows you.

It means a lot to a mother whose baby has died when people remember her little one, especially as time passes. Use the child's name when you talk about him or her. It is music to her ears. Remember the baby's birthday, send her a note, a card, or some flowers. You might make or buy a special holiday ornament in memory of the child, send a poem to the family, or make a monetary donation to a favorite charity in her baby's name. You could help the mother put together a "Memory Box" or contribute to one. Ask to see pictures of her baby, if there are any. Don't be hesitant to talk about her baby. Don't worry that you'll open old wounds or remind the mother about something that she's forgotten. She is never going to forget her child, but she may be concerned that others will. Michael was here in this world with us for such a short time, we have only a few pictures of him, and it makes me so sad to think that the rest of the world might not even remember that he existed. Don't feel bad if the mother cries when you talk about her little one. She cries anyway; you did not cause her tears.

### ***Fathers May Grieve Differently***

Remember that others are grieving, too, not just the mother. Each individual's grief is unique in its intensity and duration, and unlike anyone else's grief--even that of others grieving for the same child. Bonnie Douglas, a mother whose son died of Sudden Infant Death Syndrome (SIDS), recalls, "My husband seemed to be grieving harder than I was at first but he seemed to resolve faster. . . . I seemed to have more prolonged grief." It is common for men and women to grieve quite differently, to express their grief differently, and to have different needs during the grieving process. The father whose child has died may react negatively to something that was helpful to the mother. This needs to be respected. As Susan Borg and Judith Lasker write in *When Pregnancy Fails*, "The father who appears busy and in control often will only express his grief in private. One bereaved father, who never shed a tear in front of anyone, spent many hours crying outside in the snow by his rose bush the night his baby died."

Siblings will be devastated by the death of another child in the family, although they may not look like it. It's common to see children running and laughing at a funeral. This behavior does not mean that they don't care; their minds simply need to take breaks between bouts of grief. One of the most distressing comments I heard after Michael died wasn't even directed at me. More than one person told my oldest daughter, who was only ten at the time, "You must be strong for your mother, she needs you now." The last thing she needed at that point was to bury her own grief trying to deal with mine.

Children can be very frightened at the intensity of their grief and that of others around them. They may be confused about what has happened, they may feel guilty imagining that something they did might have caused the tragedy, they may feel isolated from their grieving parents, or they may have fears for their own safety and well-being. Children may or may not cry, and if they do, they may not choose to let you see it.

Helping children to grieve can be quite challenging. Creativity is sometimes required when helping them find outlets for their grief that they are comfortable with. Some children will tell or write stories about their brother or sister; some will play act about it. Some will cling; some will remain distant and aloof. One of my daughters was very uncomfortable talking about Michael's death but would draw pictures to express herself. Just like adults, children are all different. Let them know that you care and are there for them, but allow them their individuality.

### ***Talking with Children about Death***

In *When Pregnancy Fails*, the authors refer to the advice of Rabbi Earl Grollman, the editor of *Explaining Death to Children*. He acknowledges that "it is easier to advise parents on what not to say about death. No one formula exists that is always appropriate. Grollman suggests introducing the idea and the reality of death to children at an early age, using examples of animals and flowers, so that a family crisis is not their first exposure to death. The best that grieving parents can be expected to do is present the facts simply and clearly, taking into account the child's age and experience." Even now, five years later, my children cry when they remember coming to the hospital to see their little brother, knowing he was sick but never dreaming that he was only hours from death. My husband and I had been unwilling to leave the hospital. We were acutely aware of how little time we would have with Michael and yet we didn't feel right telling our other children about his condition over the telephone. So they were in the dark about his condition for almost a day, until they were brought to Michael to see him, never dreaming that they would also be saying their goodbyes. Nevertheless, the time they spent holding him, both before and after they knew the truth, is one of their most precious memories.

After Michael died, I cried a lot, and I held on tight (literally) to my husband and to my three living children. They were my anchors to life. If I hadn't had children who needed me, I wouldn't have cared if I lived or died at that point. I had many offers from people who said, "Let me take the kids for a few hours, to give you some time alone." It was a kind thought, and maybe it would have been helpful for another woman, but it could only have made things worse for me. I didn't want to be alone. And my children needed to be with me, too. They were working through their own grief and fears. Not only had their brother died, but their parents were falling apart before their eyes. Separation was unthinkable.

### ***Emotional Reactions***

The great majority of bereaved parents are not going crazy, although they may do or say things that seem very strange to you. Their emotional reactions are so strong; they may become disoriented, depressed, bitter, and withdrawn for many months, maybe even for years. Physical symptoms, such as insomnia and loss of appetite, are common. "Empty arms" are a reality. Some mothers may want to hold every baby they see; others may not be comfortable around babies for years. Soon after Michael died, I found myself frantically digging through my children's pile of dolls and stuffed animals for one that would approximate the feel of a newborn baby. For months, I couldn't sleep without that teddy bear in my arms.

Grieving parents commonly burst into tears at what may seem to be random moments. Certain times of the day, days of the week, or specific situations may be difficult for them for a long

time. Birth and death dates, the anniversary of the child's due date, special occasions and holidays, especially Mother's Day and Father's Day, are unavoidable reminders of what might have been. Small things, normal, ordinary moments, may trigger painful memories. Do not be alarmed by this. It is all a part of the grieving process.

### ***Finding Support***

One thing that I did that was most helpful in my own journey through grief was to join our hospital's support group for parents who had lost a baby. My husband attended with me for a while and also got a lot from it, although his needs were filled before mine. It was very reassuring to know that there were other people in the world who were just as devastated as we were. We told each other about our babies' lives and deaths over and over again (more times than any of our friends could have stood to listen to). We shared many a tearful phone call, used lots of macabre humor, and helped each other over plenty of rough times. I still keep in touch with a few people from that group. Many hospitals have similar programs. As members of La Leche League, we all know the value of peer support.

The Compassionate Friends is a national self-help organization dedicated to helping bereaved parents, siblings, and grandparents. Local chapters exist throughout the world. While this type of organization may not appeal to every grieving parent, or may not be helpful at every stage of grief, it has been a great comfort to many people. Many books about grieving include contact information for such organizations.

About six months after Michael died, my daughters attended a weekend camp for grieving children, called Camp Hope. Everyone there, campers and adult counselors, had lost a family member in a tragedy. At this camp, my children met other children who were going through experiences similar to theirs. They could talk to these other children about Michael without the fear of making them uncomfortable, and they could listen as well, helping to ease someone else's grief. This was an immense source of comfort to them and helped to ease their grieving process. My children had begun to feel different and weird because many of their friends at school were unable to cope with their grief. I imagine those friends were frightened of the idea of a sibling dying. They didn't understand it, didn't want to talk about it, didn't even want to acknowledge its existence. It was a great relief to my girls to find others in their age group who understood what they were going through. This camp filled some of the same needs for them that the adult support group did for me and my husband.

For some people, reading helps to ease suffering. I read a lot about grief and the process of grieving. But when I couldn't stand thinking anymore, I read lots of good escapist fiction, too. *When Pregnancy Fails*, by Susan Borg and Judy Lasker, or *Empty Cradle, Broken Heart*, by Deborah L. Davis, PhD, may be in your local LLL Group Library. Both of these compassionate books help guide parents in dealing with the loss of a baby through miscarriage, stillbirth, or neonatal death. Dr. William Sears has written a book called *SIDS: A Parent's Guide to Understanding and Preventing Sudden Infant Death Syndrome*. Most public libraries contain children's books that deal with the subject of death in an age-appropriate manner.

I am still grieving for my son, and I always will. Michael may no longer be living with us on this earth, but he lives in our hearts. Although I wasn't sure in the beginning, I now know that we will survive our loss, in no small part due to the friends we have in La Leche League. My life is now busier than ever, no longer consumed with pain at every moment, and I have come to welcome the tears which I shed as I remember Michael and what might have been. They are my connection to him. When someday you find yourself confronted with a family in grief, please remember that there are many ways that you can support them. You can offer to help with day-to-day chores of living, you can suggest resources that they might find helpful, you can be accepting of their individual style of grief, and, above all, you can listen.

Thank you for listening to my story.