

# Miscarriages



**ASSIGN  
BUSTER**

The Impact of Miscarriage Amy Hamilton HHG 4M0 Human Growth and Development November 10, 2010 Annotated Bibliography Callander, G. , Brown, G. , Tata, P. & Regan, L. (2007). Counterfactual thinking and psychological distress following recurrent miscarriage. *Journal of Reproductive and Infant Psychology*, 25(1), 51-65. This study's aim is to explore the post trauma feelings such as counterfactual thinking, distress, plans, and search for meaning after the traumatic experience of a miscarriage.

After further investigations, the study found that there was a better outcome when upwards counterfactual thinking and anxiety were connected and that future planning had no connection to lower distress. The study involved 62 women who had previously experienced recurrent miscarriages and were attending the Recurrent Miscarriage Clinic. These women ranged from having 2 to 18 miscarriages throughout their lives and who had had their last one within 1 to 36 months prior to the study. Morrissey, M. V. (2007). Our first child was incompatible with life: Understanding miscarriage as a lived experience.

The International Journal of Psychiatric Nursing Research, 12(2), 1415-1428  
In this article, it explained how the miscarriage would affect the women throughout her life with feelings of loss. The article stated that the feeling of loss is not only of a child but also of hopes and dreams. The article mentions that some couples have trouble grieving and as a result do not receive support very well and this may have the conclusion of more pain. This descriptive article summarizes the research of other articles and connects a poem and a part of a song to the grieving process for the women and men.

Magee, P. L. , MacLeod, A. K. , Tata, P. & Regan, L. (2003). Psychological distress in recurrent miscarriage: the role of prospective thinking and role of goal investment. *Journal of Reproductive and Infant Psychology*, 21(1), 35-45

This study's focus was on the factors that increase the psychological distress of the women. The two main factors were women who were already playing the parenting role over other life roles, and women who had mostly thoughts of the child in the future over other life thoughts. This study also explored the subject of different distress levels in women.

It found that some women were able to find positive meaning in the event. They also proved that women in serious relationships and who were content with their lives coped better than other women did. This information was found by interviewing women from the Recurrent Miscarriage Clinic in London. All of these women were not pregnant at the time and did not have any children. Maker, C. & Ogden, J. (2003). The miscarriage experience: more than just a trigger to psychological morbidity? *Psychology and Health*, 18(3), 403- 415

This qualitative study discusses the effects and stages a miscarriage has on women.

It suggests that women go through three stages after the miscarriage; turmoil, adjustment, resolution. The study interviews 13 different women who describe their post miscarriage feelings ranged from relief to negative emotions. All 13 of these women attended the Early Pregnancy Unit at a London Hospital. The majority of these women had never had a miscarriage before and most had wanted the child. In conclusion, this study had gained insight on all of the woman's feelings including grief as well as, relief and active coping. Swanson, K. M. , Connor, S. , Jolley, S. N. , Pettinato, M. &

Wang, T. 2007). Contexts and evolution of women's responses to miscarriage during the first year after loss. *Research in Nursing and Health*, 30, 2-16 This article explores women's responses to miscarriage at various time intervals after the spontaneous abortion. The purpose of this descriptive study was to explore how women's feelings are different based on their life situation. The study used mixed methods and is based on a secondary analysis of data. Some women were in a group that received counseling and some women were not. Most women demonstrated feeling better over a period of one year.

Some women demonstrated feelings of blame, loss of control and fear for their next pregnancy. During this study, they found out that whether the child was their first or not made no difference to the grieving process. Lima, M. L. & Serrano, F. (2006). Recurrent miscarriage: psychological and relational consequences for couples. *Psychology and Psychotherapy: Theory, Research and Practice*, 79, 585-594 This study is meant to explore the results of multiple pregnancy loss on a relationship and to explore the difference of feelings between men and women.

The authors believe that there is a significant psychological affect on women post miscarriage, however, there is little research on how men feel. The culture and gender of people can affect how they respond. The method used was a quantitative study using three questionnaires; Impact of Events Scale, the Perinatal Grief Scale and the Partnership Scale. In conclusion, the study showed that both men and women scored high in area of stress and grief; however, women's scores were higher than men for grief were. Young, B. & Zabatto, A. ( 2008). *Miscarriage, medicine, and miracles*.

Bantam Dell, NY: New York, 277-279 In this book, it states that grief, loss of self-confidence, and depression are universal. The book proves to us that losing a child is more devastating than any other loss. It says that after the miscarriage women having a heavy feeling of failure. There are three phases after the miscarriage that most women go through according to the book. Those three stages are: Denial, Mourning, Recovery. These stages are more affective towards the women because they have a more intense feeling of motherhood when their body starts changing.

The American College of Obstetricians and Gynecologists (2005). *Your pregnancy and birth* (4th ed. ). Meredith Books, Washington: DC, 287-293 In the book *Your Pregnancy and Birth* it talks about how each pregnancy is unique and everyone has their own way to grieve for the loss of their baby. The book explores the areas of the image each woman put on after the miscarriage and the feelings of shock, numbness, and disbelief. The book also states that although the couple is together after the miscarriage, both might have feelings of being alone or empty.

After the miscarriage, the book also says the woman might start to feel a sort of rage and start blaming their partner, the doctor or other women with children for her own misfortune. Some suggestions for finding support would be to discuss your feelings with people who have gone through the same situation or to return to the hospital and join a support group. Pitman, T. & Barrett, Joyce. (2007). *Pregnancy and birth* (2nd ed. ). Key Porter Books, Toronto, Ontario, 89-90 This book introduces us to the idea that most family members see a miscarriage as a minor setback. This although is not the case for the mother and father.

The book explores the facts that the baby is very real to its parents and is just as bad as losing a born baby. Something that is helpful to the mother for coping is the knowledge of knowing miscarriage are common and are usually not caused by anything the mother did. The book has examples of women saying that support groups really helped them cope. They said it was nice to know that you were not alone and to have someone know how you are feeling. Stone, J. , Eddleman, K. , Duenwald, M. & Pearson, J. (2007).

Pregnancy for Canadian for dummies. John Wiley & Sons Canada, Mississauga, Ontario, 29-333 This book states that doctors say about 15 to 20 percent of pregnancy ends in a miscarriage. The book also suggests to couples who have had a miscarriage should talk to doctors about the reason of the miscarriage to hopefully clear up any confusion. It also explores the couple's next pregnancy and how it will make you feel very anxious and the women will need a lot of reassurance to feel calmer. The book gives many examples of places to look for help after a miscarriage. Some of them are in your partner, family and friends as well as support groups and therapists.

Kitzinger, S. (2004). The complete book of pregnancy & childbirth (4th ed. ). Dorling Kindersley Limited, New York, 386-389 In this book, it tells us that 1 of 5 pregnancies usually ends in a miscarriage and that it comes as a devastating shock. We find out that most women try to blame themselves or think somehow they triggered the miscarriage. The book explains this is not usually true, and that there is almost no way of knowing what caused it or why it happened. In the book, it explores the idea of the women grieving differently and more extremely than their partner's does.

The solution to this according to the book is to talk to another woman or a woman who has also experienced a miscarriage. Murkoff, H., Eisenberg, A. & Hathaway, S. (2002). *What to expect when you're expecting* (3rd ed.). Workman Publishing, New York, 526-528 In this book it approaches miscarriages by explaining how the traumatic experience will bring shock, despair, depression and a sense of failure. It also explores how it can be hard to come by support because some people fail to realize how devastating a miscarriage can be, early or late in the pregnancy.

The book states that having no photos or memories of the baby can make the coping process harder to overcome. The book also looks into the subject of losing one twin while one lives. It states that this will give the women mixed feelings since she will be celebrating a birth and mourning for a lost child. Social Science Research Proposal Every 1 in 5 pregnancies end in a miscarriage (Kitzinger, 2004). This causes every 1 in 5 mothers-to-be to have their dreams and futures ruined. Every woman reacts differently after a miscarriage but almost all women have to go through a long grieving process.

During this process the women have trouble feeling secure, happy or successful. They feel like they are failures and have trouble forgetting about what has happened. A miscarriage can affect the women's personal lives and relationships because they have trouble socializing after the trauma. It is unfortunate that miscarriages happen so often, but the only thing they women can do is grieve and try to move on. After having a miscarriage most women's perspectives on life change. At first they began to feel angry and alone. As time goes on they can start to get back to normal again.

Some ways for this to happen are support groups. Support groups can help the couple move on because they are able to let out their feelings to people who understand what they are going through. Other ways to help the couple to feel normal again are to talk with their doctors. If you can have your doctor look into finding what caused the miscarriage, the couple can be reassured that they were not the problem and that it was just a horrible misfortune (Stone, Eddleman, Duenwald, Pearson, 2007). The reason for my research is to find out the feelings and consequences of miscarriages.

Also so I can explore areas where the couples can get help and support. I decided to choose this topic because it struck as an important issue and something I would like to learn more about. The reason I thought this would be a good choice was because a lot of people focus more on abortions than miscarriages, when miscarriage can have a lot of the same affects and sometimes worse for mothers who had already imagined their lives with a baby. Research Questions 1. What are the psychological effects a miscarriage has on a woman? 2. How does a miscarriage affect the couple's relationship? . What help or support can a couple get after experiencing a miscarriage? Hypothesis I hypothesized that while researching I would find out that women go through a rough time after a miscarriage. I estimated that women go through a crisis and that some women might commit suicide after the miscarriage. I thought almost all women would go through grief and frustration towards themselves and their partners. Terms and Definitions Some terms and definitions that will show up frequently in my study are: Miscarriage, grief, anger, cope, baby, women, couple, support, devastating



Miscarriage- is a spontaneous abortion, where the fetus dies before being born. Grief- is the feeling the couple feels after having a miscarriage. They are usually feelings of negative emotions. Anger- is one of the feelings women might have after a miscarriage. Cope- This word describes the process of the couple moving on and controlling their emotions Baby- This is the fetus that dies before being born. It is not yet an actual baby but to the women it was. Women- These are the women who have the miscarriage. Couple- This is the two people who have the miscarriage.

Support- Is something the couple needs to get through the post feelings of the miscarriage. Devastating- This is the feeling of the miscarriage being unbelievable and the worst thing that could ever happen to the couple.

Limitations of Study The limitations of this study would be that we would be dependent on people volunteering. The participants would probably all be from Mississauga and therefore would not necessarily represent people from rural communities. The time constraints of three months may decrease participation because some people may not feel ready to talk about it yet.

The population would most likely be urban and most likely women as they would be the ones in the doctor's office. Because the survey is volunteer we would not be able to guarantee a number of participants, but we would have to keep studying until we had at a minimum of 20 participants. Information pamphlets about the study would have to be developed and given to potential participants at their doctor's office. There would be no age limits.

Research Method My study would be a mixed method, both qualitative and quantitative. It would be quantitative because I will conduct a survey using demographic and psychological questions.

Then I would conduct interviews of the effect a miscarriage has on relationships. The Psychological Survey and Couples Interview will be conducted from people who have had a miscarriage in the last three months. Participation in the study would be voluntary and people's identity would remain anonymous. Information about the study would be provided to people in a doctor's office and people could volunteer to participate.

Introduction to Survey and Interview The following survey and interview is to help me obtain information about what it is like for women who have had a miscarriage.

All of the information you give me will be kept private and confidential and no names will be used. If at any time you do not wish to answer a question, you may leave it blank or tell the interviewer that you do not wish to answer.

Psychological Survey – Part 1 Please answer the following demographic questions. 1. What is your age? \_\_\_\_\_ 2. Are you Single \_\_\_\_\_ Married \_\_\_\_\_ Common law \_\_\_\_\_ Other \_\_\_\_\_ 3. What is your sex? Male \_\_\_\_\_ Female \_\_\_\_\_ 4. Was your pregnancy planned? Yes \_\_\_\_\_ No \_\_\_\_\_ 5. At what gestation age did your miscarriage occur? \_\_\_\_\_ The following questions use likert scale. Answer each question by circling a number between 1 and 5. 1. How would you rate your ability to cope with the miscarriage? 12345 Not well Average Very Well 2. How would you rate your fear of having another miscarriage? 12345 Very fearful Average No fear 3. Has the miscarriage had a negative impact on your relationship with your partner? 12345 No impact Some impact High impact 4. Do you find yourself very more sad than usual? 12345 Not sad Average Very sad 5. How would you rate your level of grief?

2345 Low Average High Thank you for completing this survey. Interview Questions – Part 2 1. Can you describe the impact the miscarriage has had on your life? 2. Can you describe how the miscarriage has affected your mood? 3. Can you describe how the miscarriage has affected your relationships? 4. How supportive have the people in your life been? 5. Do you feel that you can talk about your feelings with anyone? 6. Have you tried any support groups? 7. What do you think would help you to feel better or to be able to cope better with this tragedy?