

You were born, still

The Search for Meaning in Perinatal Loss

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CASE DESCRIPTION

Three months after the stillbirth of her fourth biological child, Cara found herself encased in an anguishing and isolating grief. She spent hours each day weeping in her bedroom as she struggled to comply with internalized familial and cultural values and carry on as a pillar of strength for her African American family and community. Compounding her suffering over the simultaneous birth and death of her baby girl, the concurrent accidental pregnancy of Cara's 16-year-old daughter, Jasmine, aroused a tangle of powerful emotions, including anger at a daughter she did not know was sexually active, guilt about not protecting her from this unwanted pregnancy, jealousy about a teen mother bringing to term an unexpected child while she had lost a longed-for infant at seven months of gestation, and a sense of injustice in relation to God and the universe for permitting such a perversion of fate. Finally, finding herself unable to work, study, or function more than minimally, she pursued counseling with me to seek some meaning in a seemingly senseless loss.

STATEMENT OF PROBLEM

At one level, Cara's problems were obvious enough. She contended with images of mothers and healthy infants at seemingly every turn; her relationships with her pregnant daughter and best friend had almost utterly lapsed since the death of her child; and she experienced profound sleep disruption with repetitive dreams of searching for her baby. At another level, Cara's problem was both subtler and more

pervasive, as she struggled with a new and darker view of life, one that shattered her “assumptive world” with its associated beliefs in life’s predictability, the world’s benevolence, and her own ability to control relevant outcomes (Janoff-Bulman & Berger, 2000), even that of her own pregnancy.

ANALYSIS

Viewed through a constructivist lens, grieving entails an effort to reaffirm or reconstruct a world of meaning that has been challenged by loss (Neimeyer, 2002). More specifically, bereavement can be seen as presenting two profound narrative challenges: (1) to process the *event story* of the death itself and its implications for our ongoing life, and (2) to access the *back story* of the relationship with the deceased in order to restore a measure of attachment security (Neimeyer & Thompson, 2014). Both forms of meaning making proved daunting for Cara, as the sudden and unexplained death *in utero* of her seemingly viable child traumatically violated the self-narrative she had been living out, while also depriving her of any history with a living child on which she could draw to reconstruct their attachment. As a result, she found herself alternating between flashbacks to the birth on the one hand and experiential avoidance of cues of the loss, including her daughter Jasmine, on the other, both of which are classic posttraumatic symptoms. Likewise, she was preoccupied with corrosive yearning for her infant and withdrawing in resentment and self-protection from other potentially supportive relationships, both core symptoms of complicated grief (Shear et al., 2011).

GOALS OF COUNSELING

An extensive and growing evidence base has demonstrated that a struggle for meaning plays a cardinal role in (a) predicting anticipatory grief before the death in the context of palliative care (Burke et al., 2016), (b) predicting both contemporaneous and subsequent complications in bereavement in diverse groups of mourners losing loved ones by a range of causes (Coleman & Neimeyer, 2010; Holland, Currier, & Neimeyer, 2014), and (c) mediating the impact of other risk factors such as violent death loss (Currier, Holland, & Neimeyer, 2006) and spiritual crisis (Lichtenthal, Burke, & Neimeyer, 2011) on complicated grief symptomatology. Moreover, an inability to make sense of the loss has been found to be a leading predictor of anguishing grief among bereaved parents (Keese, Currier, & Neimeyer, 2008).

In keeping with this meaning reconstruction approach (Neimeyer, 2014), I listened to Cara's verbal, coverbal and nonverbal signals of both *need* and *readiness* to address the traumatic impact of her child's death, as well as to reorganize the bond with her deceased infant by constructing a viable back story of the child's brief life. I also sought to help her meet and overcome the impediments to a reaffirmation of other family relationships while drawing on the resources of her community and spiritual convictions. Thus, at levels ranging from the personal through the relational to the broadly social and cultural (Neimeyer, Klass, & Dennis, 2014), I joined her in revisiting the narrative of the loss and the socially constructed framework of meanings that it had shaken, with the goal of reconstructing a viable life narrative that offered meaning and orientation, even in the wake of tragic loss.

INTERVENTION STRATEGY

As an attachment-informed grief therapy, a meaning reconstruction approach strives to assist the client with (a) *emotion regulation* through offering attuned presence, breath work and guided imagery, (b) *mindfulness* through acknowledging feelings without judgment or attachment, and (c) *mentalizing* through reflecting upon her own psychological state and that of relevant others to foster compassionate understanding (Kosminsky & Jordan, 2016). Supplementing this consistent attention to *presence* and *process*, I also consciously introduced specific *procedures* to facilitate Cara's efforts to process the event story of her loss and to access a more viable continuing bond to her child, without grief being the only tether (Neimeyer, 2012a).

In the third of our six sessions, Cara brought in an envelope of printed photos taken by her sister during her hospitalization for her daughter's delivery, photos that she herself had never been ready to see but felt she was to ready to see now. I asked if she would prefer that I look at them first, briefly describing each one, then asked if she felt prepared to view that particular image. Without hesitation she gratefully thrust the envelope at me, saying, "You can look at them first." My role as an emotional modulator of exposure to a difficult loss narrative was consistent with the practice of presence described above, as well as with evidence-informed "restorative retelling" procedures for helping clients integrate the story of tragic death (Neimeyer, 2012b; Rynearson & Salloum, 2011).

I think of retelling procedures as involving three interbraided processes: bracing, pacing and facing. *Bracing* entails first grounding the client in the session through establishing a strong empathic bond, as well as by revisiting and reaffirming the personal, familial, and philosophic or spiritual resources on which he or she can draw in tolerating a reencounter with the narrative of the loss. *Pacing* involves dosing exposure to the story, both by slowing down into its difficult details, and by staying present to them, without avoidance, to notice and process what arises. Finally, *facing* implies compassionate mutual confrontation with the experience and its associated meanings and emotions, with the therapist serving as witness, as the client seeks some level of empowerment in a tragically disempowering event. In practical terms, this often requires devoting 30 or more minutes of the therapeutic hour to a close review of the story of the death, visualizing the scenes as they unfold, with or without photographic cues. The therapist gently diverts the client's attention to the *external*, *internal*, and *reflexive* narrative, that is, to what happened, how it felt, and what it meant, through timely recursive questions. Subsequent in-session and between-session processing under carefully negotiated conditions of safety (e.g., further therapeutic journaling in a comforting space about feelings or insights prompted by the review) then further facilitate the integration of the experience (Neimeyer, 2012b).

In response to Cara's heartfelt statement about the photos ("I saved them to open them with you"), I shared briefly my genuine sense of being moved by her trust. I then took a breath, slowly released it, and withdrew the stack of pictures, the first of which depicted a tiny infant in what I described as a "white bed with flowers." "Her casket," Cara corrected, leaning forward slightly to take the photo. She drew the photo close as she began to speak of the funeral for her child, who she had named "Spirit," because she came to her as a spiritual being rather than a living baby. As I briefly described each image and passed them to Cara, we discovered that we were telling the story of Spirit's birth and burial in reverse chronological order, as that was the way the photos had been stacked in the envelope. This sequencing proved oddly appropriate, allowing us to begin with the viewing of the infant in the casket, and then to back up, step by step, into Cara's intimate embrace with her daughter's lifeless body immediately following her birth, as her husband's strong hand rested on the baby's tiny form. "Poor thing," she intoned, "she never had a chance."

Throughout the 30 minutes of emotional narration we tacked repeatedly from the *what* of the account to its *how* and *why*, its associated emotions and meanings. Cara acknowledged her self-protective tendency to “step out” to a tolerable distance of emotional neutrality, as she also gradually accepted the opportunity to bravely “step in” to more contact with her grief. In the course of the retelling, two significant embellishments occurred. In the midst of reviewing the funeral, Cara brought out a carefully folded program with Spirit’s name and date of birth and handed it to me to read a moving dedication co-authored by her and her sister, entitled *Born, Still*. “They will say that you did not live and will register you as a stillborn child. But for me, you lived all that time in my womb.... Now I know that you are in the grace of God, in his sight, his perfect little angel. I know that for us, *you were born, still*. We will carry you with us forever, my child, my love. You will always be a part of all of us. You were always ours and are ours now. Death and life are the same. You were born, still.” As I read the words aloud with her encouragement, Cara conferred deep meaning on the loss and on her child, despite the tragic prematurity of her birth and death.

Returning to the retelling, Cara caressed the professional hospital photograph of her child’s bruised face (“almost deformed,” she noted, by laying lifeless on one side in her womb), as we also affirmed Spirit’s delicate beauty. After completing the moving review of the photos, Cara reached for a final envelope. “Now I have one more image to show you,” she said, removing the ultrasound taken in her fourth month of pregnancy, when her baby seemed fully viable. Pointing to an image partially eclipsing the profile of the fetus, she traced the clearly discernible form of a woman in a robe, in movement as if she were walking, with impassive mouth and vacant eyes staring straight out at the viewer. Cara recalled how she had asked the doctor whether the uncanny form might have been the umbilical cord, a possibility he dismissed. Later, discussing the meaning of the spectral woman with her family, she was met with reassurance from her mother, a scream from her sister, and joking dismissals from others. But for Cara, the image was no laughing matter when, three months later, her baby died.

The death, in combination with what she took to be a sinister image, initiated for Cara the sort of crisis of faith we have often documented in association with complicated grief (Burke & Neimeyer, 2014; Burke, Neimeyer, McDevitt-Murphy, Ippolito, & Roberts, 2011). Although

the restorative retelling of the death narrative had begun to assuage some of the anxiety of the event story, this deeper challenge to her core spiritual meanings remained. Nearing the session's end, I noted the many questions and angry feelings that Cara seemed to direct to the ghostly apparition, and asked if she might consider writing a letter to the figure, expressing these directly, and then simply sensing what responses might come. Cara agreed, and returned in the fourth session with a riveting letter, which she handed to me to read aloud. "What are you?" she began. "Where did you come from? Why would God bless me with life, only to take it from me?" In sentence after sentence, Cara poured out her grief, her anger, her sense of divine injustice.

The session set the stage for subsequent family meaning making (Nadeau, 1997) with a wise old aunt who had studied theology and who suggested that, "when you die, one of your ancestors will come to get you." "But I don't recognize this person," Cara protested. "But you weren't here a hundred years ago, so you don't know who that is," the aunt replied. Something in these words struck a chord for Cara, who began to undergo a dramatic revision of her spiritual cosmology. Not only, in her view, was the spectral woman in the ultrasound "not an evil being," but the axis of the universe had shifted, in a sense, from a cosmology in which she had placed herself at the center of the universe, to one in which she was much smaller, and the universe much bigger, and one filled with other people whose suffering was equivalent to her own. This revised spiritual frame was further reinforced by reflective writing she did between sessions, as she consolidated her continuing bond to Spirit by tracing the profound "life imprint" of her short existence (Neimeyer, 2010) on her own coping abilities and values, leading her to reach out to several family members and, uncharacteristically, directly affirm her love for them. This was most strikingly evident in relation to her teenage daughter, Jasmine, who she had nearly totally avoided as the girl gave birth to her own baby and who clearly needed her mother's care and guidance in an uncertain new phase of her life.

Embracing her daughter once again after an anguishing three months of distancing, Cara affirmed her belief in Jasmine's ability, with support, to build a life of purpose and become "a great young woman." Most touching of all was Cara's closing anticipation, offered with a broad and genuine smile, of lulling her new granddaughter to sleep in the rocking chair she had purchased for Spirit. Finally, Cara summarized her substantial reduction in complicated grief symptoms

and a stunning array of indicators of posttraumatic growth (Calhoun & Tedeschi, 2006) arising from Spirit's death and her integration of it into a new life narrative, including a decision to return to school and change her major to counseling. As we concluded our final session, I shared my pride in her growth through grief, and my awe in her reconstruction of a life of meaning in the face of challenging loss.

CONCLUSIONS AND REFLECTIONS

As a relatively new orientation to grief therapy, meaning reconstruction is not so much a distinctive theory competing with others, as it is a meta-theory that cuts across many contemporary theories of bereavement. As such, it has inspired and integrated a great variety of creative clinical procedures for assessing and intervening in meaning in the wake of tragic loss, a few of which are illustrated in my therapy with Cara. Readers interested in viewing the entirety to our therapy can find videos of all sessions published by the American Psychological Association (Neimeyer, 2008), just as those interested in exploring scores of specific meaning-oriented techniques of grief therapy may consult recent manuals compiled for this purpose (Neimeyer, 2012c, 2016; Thompson & Neimeyer, 2014).

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