

January 27, 2017

Dear Labor and Delivery Team,

First, thank you. Thank you for doing a job that requires so much of you. Those long shifts, full of running back and forth between rooms with the responsibility of so much new life on your hands, can't be an easy burden to bear. I am in awe of your ability to counsel, coach, and console an entire wing of crying mothers and crying babies.

Sometimes the babies *don't* cry, and that is hard for you too. No one goes into your field thinking, "I'd like to deliver stillborns", but it is a devastating truth in 1 out of 160 delivery rooms. My daughter, Charlotte, was stillborn on October 21, 2017. Her heart stopped beating for unknown reasons at 38 weeks gestation.

My stillbirth experience was a mixed one. It was 3am when I came to the hospital, alone and worried about my baby's decreased movements. The nurses who checked me in and set up the doppler were honest, but gentle, saying that they were having trouble finding the heartbeat and were going to call the doctor to do a sonogram. My own OB-GYN happened to be on call that night. She teared up when she said, "I'm so sorry, I can't find her heartbeat." This life shattering news was delivered in the kindest way possible. She apologized, not in an admittance of any guilt, but as a mother showing compassion to another mother. She acknowledged my baby's gender. Hearing "*her* heartbeat" was important to me. It spoke of this doctor's respect for my child and the hug that followed spoke of her respect for me. There were many times after this moment in which that tiny word was replaced with "it" or "he" and each one stung. It might seem like a silly mistake to someone who has never lost a child, but chaplains, nurses, doctors, and even cleaning crew made it over and over that day. Each one told me, "your baby doesn't matter" by forgetting that Charlotte was a *she*.

One nurse went to get me a blanket (I was already shivering uncontrollably from shock) and another went to get a wheelchair. My doctor asked if there was anyone I could call and explained that I would be induced to deliver. I was wheeled to a room at the very end of the labor and delivery wing. It felt like a cruel place to put me, passing room after room of happy conversations and bright balloons on our way, but I realized later that this was a purposeful placement. My labor was loud and awful. My screams were hollow and sad. New moms with crying babies didn't need to hear my sorrow and I didn't need to hear their joy that day. I didn't hear a single baby cry during my stay at the hospital- not mine nor anyone else's. That gave me the quiet space to focus on my own grief and how I could survive this storm.

My husband and mother sobbed with me in the room, and probably more profusely outside of it. I wish that there had been a place for them to go. They were rushed from the hallways when they stood there too long, but they needed moments away from the agony of my room as they began to process their own grief. My mom took to walking the halls so she wouldn't be scolded for standing outside of the delivery room. She took a wrong turn near the NICU door and a nurse joked, "you don't want to go that way!" before pointing her toward labor and delivery. In another life, she would have chuckled along, but that day she wished more than anything that she could visit the NICU. Small comments like these etch themselves onto your heart when you are grieving a child. The most hurtful ones dismissed my baby as unimportant. A cleaning crew member congratulated me on the baby while I was still in labor and, when I tearfully said that she would be born still, she said, "you're young, you can try again". I sobbed because I wanted *this* baby, *my* baby that I had waited 38 happy, healthy weeks for. A nurse asked if I was

“a believer”. My beliefs are my own and were so complicated by this experience with infant death, that I simply said “no”. She continued with “well I believe...”. Those three words said, “You’re wrong. In the depths of your despair, what you believe is wrong.” The platitudes she shared were unwelcome and insensitive. Though your hospital has religious affiliations, not all who enter it share them. I hope that, after reading this, staff will consider their words very carefully. It is so much kinder to say, “I am so sorry that your daughter passed” or “There are no words that can take this pain away” because there simply are none. I have spoken to many parents who have lost a child and what each agrees upon as most helpful is a caregiver who listens and acknowledges that this child was important. One nurse who was with me until just before the delivery talked to me about my job, my living children, my family. She asked me about my baby. *How did you pick her name? What was your pregnancy like with her? Did you bring something special for her to wear?* She used Charlotte’s name when she spoke of her and told me that she would think about her when she remembered to hug her own son a bit tighter that evening. This nurse held my hand when I started to cry and answered my questions thoughtfully. When I asked about donating Charlotte’s organs, she was honest, but gentle as she explained why we couldn’t do this. I am so grateful to her for giving me a small glimpse of what to expect in the hours to come.

Despite enduring a long labor, I was not prepared for many aspects of stillbirth. My own doctor finished her shift shortly after my arrival and, in that 27 hours, the doctor who delivered Charlotte only visited to introduce herself and then for several minutes after my husband had tracked her down, desperately asking for a C-Section to put us all out of the agony of labor and waiting. I wish that the delivering doctor had prepared me for the fragility of my baby’s skin or the blood pooling in her lips when she was born. I wish that she had realized that, though my baby didn’t need her that day, I did. I needed reassurance that I could indeed survive this natural birth and this very unnatural grief. My husband needed reassurance that he wouldn’t lose his wife along with his baby that day. When Charlotte was finally born, the doctor asked if someone could hold “the baby” while she stitched me up. I refused and said that I wanted to hold her while she was warm. The doctor rolled her eyes and continued chewing the gum she had during the whole delivery. Had I not already been at the very lowest place in my life, perhaps I would have mustered up the strength to express my disgust. After we held Charlotte for that hour, the doctor stitched me up and I never saw her again. I was surprised that no doctor visited to check on me before I was discharged only 12 hours after giving birth.

I wasn’t prepared for how quickly my child would lose color, plumpness, and warmth. A photographer arrived to take pictures of Charlotte, but I didn’t have anything prepared for her because I didn’t know that they were coming. We spent precious minutes of the single hour that we held our daughter searching for an outfit in our suitcase. Had I known that the photographer would arrive after birth, I would have set this out during labor. My mother gave her cross necklace to the photographer. I didn’t know this until we received the pictures later that day and each had this symbol draped over my baby or clasped in her tiny hands. I’m glad that I took my own pictures because those cross-filled images are disturbing to me. I don’t blame the photographer, she was simply listening to my mother, but I do wish that she had listened to me, Charlotte’s mother, instead.

I was moved to a room without a baby cot and visited by another nurse and a counselor. They were both kind and sincere. The counselor listened to us express our disbelief and profound sadness over losing our baby girl. Her words preserved Charlotte’s dignity and acknowledged that she was so very important to us. We wished that we had been able to meet with her during the long labor so that we could have better considered some of the

overwhelming options that were presented. Burial, cremation, autopsy...these are not things that you are prepared to face in the best of times, much less an hour after sending your baby to the morgue.

When we returned home without our daughter, our lives were forever changed. I have learned that helping other people survive the trauma of stillbirth is something that I am passionate about, something that begins to fill the gaping hole of Charlotte's loss. I created "Charlotte's Purpose", a website dedicated to positively dealing with grief, in an effort to heal my own heart but it has already become something bigger. It is full of the resources that I found helpful in this journey as well as a project initiated in Charlotte's memory. The *Wrapped in Love Project* is a program in which we take donated wedding dresses and repurpose them into burial gowns and pockets for babies lost before, during, or shortly after birth. This first batch is made from my own wedding dress and many of the gowns currently being repurposed were donated by mothers who have lost a child to miscarriage or stillbirth. I hope that you can help me by offering these gifts to bereaved families. It is my sincerest hope that sharing my experience with you and starting the *Wrapped in Love Project* will make the next mother who faces stillbirth at this hospital feel some comfort in a moment that is likely her worst.

Thank you for all that you do and all that you strive for,

Heather Carnaghan
Charlotte's Mom