

Early Head Start staff who have built relationships with families during pregnancy can provide meaningful help after pregnancy loss. Each parent and extended family member will experience the loss in different ways and will benefit from continued support from familiar staff. Family member responses can include disappointment, sadness, deep guilt, anxiety, or even relief (Early Head Start National Resource Center, 2005). Siblings, even very young children, can also be affected by pregnancy loss (O'Leary, 2007). Regardless of how family members experience the loss, Early Head Start services may be crucial. The focus for staff and families is specifically on this pregnancy, and there may be limited community support after pregnancy loss.

Staff should work with families in conjunction with mental health consultants to identify each individual's sense of loss or grief and to offer support. Staff use the family partnership process to detail a plan for support and eventual transition out of the program. It is important to note that families may be surprised by the ups and downs of their grieving. They might feel ready to transition out of the program during one conversation and then find that they need additional support at the next. Although it is hard to anticipate these changes, families may need more support from the Early Head Start program between six and eight weeks after a loss, as other kinds of support begin to dwindle (Early Head Start National Resource Center, 2005). Given the unpredictable nature of grief, staff should revisit the family partnership agreement with families often. Support for family members may include, but not be limited to, the following:

- Providing information about pregnancy loss and grief
- Meeting with families or individuals to listen and support their grieving
- Helping family members recognize and understand the responses of others in their families and communities
- Working with families to identify friends and family who can be supportive as families transition out of the program
- Making referrals to mental health services or support groups

Grief can be a complicated process, and it can be hard to know when families are ready for transition. As staff work with families to transition out of the program, they can look for signs that families are taking care of their physical and emotional needs, are able to meet their responsibilities, and/or are connected with community services that can offer long-term support.

Pregnant women living in poverty are at increased risk for pregnancy loss (Nagahawatte & Goldenberg, 2008). Therefore, Early Head Start programs need to be prepared to support families through this experience. Administrators and staff should work with their Policy Council and Health Services Advisory Committees to develop a policy that clearly articulates the program's plan to offer ongoing and individualized support to families through pregnancy loss.

Questions to Consider for Planning and Programming:

- Is pregnancy loss addressed in the Community Assessment?
- What community partners (e.g., Healthy Start, hospitals, clinics, grief counselors, mental health providers) can offer information and support around pregnancy loss?
- How are staff trained to work with families around pregnancy loss? How are staff, who may also be affected, provided with support after a pregnancy loss?
- What are the cultural beliefs around pregnancy and pregnancy loss in the community or communities served by the program? How do staff understand each family member's individual beliefs around pregnancy and pregnancy loss? How does this information support practice after pregnancy loss?
- How will the program use its Family Partnership Agreement process to guide service delivery after a pregnancy loss?
- How does the program document services to expectant families? How does it document services to families who have experienced pregnancy loss?
- Does the program monitor families for signs of depression? If so, how? How does the program offer support for families who may be experiencing depression? How might program staff monitor families for depression following pregnancy loss and serve families who are identified as needing additional services?
- Does the program have a policy for supporting families following pregnancy loss? How does it allow for individualization?

Performance Standards, Title 45, Code of Federal Regulations:

- 45 CFR §1302.80(c) A program must facilitate the ability of all enrolled pregnant women to access comprehensive services through referrals that, at a minimum, include... mental health services...
- 45 CFR § 1302.81(a) A program must provide enrolled pregnant women, fathers, and partners or other relevant family members the prenatal and postpartum information, education and services that address... postpartum recovery, parental depression...
- 45 CFR § 1302.82(a) A program must engage enrolled pregnant women and other relevant family members, such as fathers, in the family partnership services as described in §1302.52 and include a specific focus on factors that influence prenatal and postpartum maternal and infant health.
- 45 CFR § 1302.46 (b)(5) A program must ensure mental health consultants assist in helping both parents and staff to understand mental health and access mental health interventions, if needed.
- 45 CFR §1302.50(b)(2) A program must develop relationships with parents and structure services to encourage trust and respectful, ongoing two-way communication between staff and parents to create welcoming program environments that incorporate the unique cultural, ethnic, and linguistic backgrounds of the families in the program and community.
- 45 CFR § 1302.50(b)(3) Collaborate with families in a family partnership process that identifies needs, interests, strengths, goals, and services and resources that support family well-being...
- 45 CFR § 1302.52(a) A program must implement a family partnership process that includes a family partnership agreement and the activities... to support family well-being... The process must be initiated as early... as possible and continue for as long as the family participates in the program, based on parent interest and need.
- 45 CFR § 1302.52(c) A program must offer individualized family partnership services...
- 45 CFR § 1302.70(a) An Early Head Start program must implement strategies and practices to support successful transitions for children and their families transitioning out of Early Head Start.

Resources

- Early Head Start National Resource Center. (2005, April). Lost expectations: Supporting families through pregnancy loss [Audio conference]. Washington, DC: HHS/ACF/OHS.
- Nagahawatte, N. T., & Goldenberg, R. L. (2008, July). Poverty, maternal health, and adverse pregnancy outcomes. *Annals of the New York Academy of Sciences, 1136*(1), 80–85. DOI: 10.1196/annals.1425.016
- O'Leary, J. M. (2004, February). Grief and its impact on prenatal attachment in the subsequent pregnancy. *Archives of Women's Mental Health. 7*(1), 7–18. DOI: 10.1007/s00737-003-0037-1
- O'Leary, J. M. (2007, July). Pregnancy and infant loss: Supporting parents and their children. *Zero to Three*, *27*(6), 42–49.

This document was developed with funds from Grant #90HC0014 for the U.S. Department of Health and Human Services, Administration for Children and Families, Office of Head Start, Office of Child Care, and by the National Center on Parent, Family, and Community Engagement. This resource may be duplicated for noncommercial uses without permission.

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