

Supporting you through
difficult family times

Help for LGBTQ+ Partners

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**Antenatal
Results &
Choices**

**arc-uk.org
Helpline 020 7713 7486**

This leaflet has been written primarily with the aim of acknowledging and recognising the additional 'layers' which a female couple may experience following a prenatal diagnosis and the loss of a baby. We recognise that other individuals and couples who identify as LGBTQI+ may find themselves dealing with similar distressing experiences, including gay male, transgender and non-binary expectant parents. We are here for anyone who needs support with the loss of an expected baby, whatever their sexuality or gender identity and whatever their relationship status.

NB Throughout the leaflet we talk about losing a baby rather than pregnancy or fetus, as this is the language most people use when contacting us. We realise that some people may prefer to use a different term or may conceptualise their loss differently.

Introduction

There will be many shared emotions and issues for people going through the difficult experience of losing a baby, regardless of their sexuality or gender identity. There will also be personal and individual factors and circumstances which may have an effect on anyone's grieving and which may influence the way they cope with their loss, for example fertility issues, previous losses, lack of support.

LGBTQI+ individuals and couples may be more likely to face other layers to their loss and their grieving.

For example, it may have taken you and your partner a long time to decide when and how to try for a baby and/or you may have faced medical, financial and other challenges along the way.

Some people experience unhelpful assumptions, questions, suggestions, or even negative attitudes from professionals or other people around them, due to their sexuality or gender identity. For example, some female partners have described being misidentified as another family member or a friend and feeling overlooked or excluded from support as a result.

Others have been asked whether they will be carrying the baby next time, without any indication that this is something the couple are considering; this could feel intrusive, insensitive and upsetting for one or both partners.

You may struggle to find stories about or written by other LGBTQI+ couples or partners who have had to deal with similar layers and challenges; and this might compound or increase a sense of isolation.

Antenatal testing

Over the last 30 years, dramatic changes have occurred in antenatal care, with the development of new technologies to monitor a baby and to screen for and diagnose an ever increasing range of structural and genetic conditions.

For those parents who receive difficult news it will almost always come as a great shock. They may face the diagnosis of a condition for which there is no cure or treatment. Expectant parents then need to make what for many is the painful and difficult decision between continuing with the affected pregnancy, knowing that their baby may not survive the birth or will have a serious disability, and ending a much-wanted pregnancy.

Making the decision to continue with or end the pregnancy

This is one of the hardest decisions anyone ever has to make. Parents make this choice for many different reasons, based on the baby's condition and their own personal values and circumstances. Sometimes the condition is so severe that the baby will not survive beyond birth. For others the decision includes considering their ability to care for a child with a disability or significant health issue and the effects on any other children, and their own lives.

It is often hard for doctors to be completely confident in predicting the outcome for a baby and it can be extra difficult to make a decision when there is uncertainty about the outlook.

Deciding how to proceed after a baby has been prenatally diagnosed with a genetic or structural condition is a decision that is never taken lightly. It can come with a range of complicated emotions and the psychological effects can be lasting. Our long experience at ARC has taught us that most women and couples learn to live with their decision and manage the feelings around it.

Addressing the needs of partners

Because partners have not experienced the physical loss of their baby, their feelings and needs can sometimes be underestimated. They themselves may find it difficult to acknowledge and express their grief and may feel isolated and misunderstood as a result. It is important to recognise that even if you were not carrying the baby, it was your baby and you are entitled to grieve. ARC can offer support through the telephone/email helpline and our online forum and volunteers.

Being strong for your partner

You may feel that you need to be strong for your partner and it may feel natural to adopt a supportive role at this time. Someone has to deal with the practical side of life, make any necessary arrangements, care for any other children, tell family and friends.

While these practical concerns are important and your partner certainly needs your support, she also needs your honesty. In some cases, you may already have your own child and so you might feel guilty about this if this was your partner's first baby. You may keep some feelings and thoughts from your partner, for her sake. But this may give the wrong impression about the significance of the loss for you. Being open with each other about how things are for you will help you both to understand that while your reactions to the loss of the baby may be different from each other, this doesn't mean that either of you cares any more or less about what has happened.

You may feel resentful if those around you have overlooked your needs. But if you are putting on too brave a face, other people won't know what support you need. You might find it helps if you can talk to people you trust about how your loss has affected you.

Grieving

Your experience of the loss of your baby will be different from your partner's and your way of grieving may be too. You may find that you do not grieve as your partner does and/or your priority may be her welfare, and the well-being of any other child or children you may have.

Each of us reacts individually to bereavement, and every situation is unique. Grief is a naturally isolating experience. This can be much worse in an uncommon situation like yours and you may not know anyone else who has experienced this very particular, complex type of loss.

There are broad patterns in any grieving process, and if you know about these, you might find your feelings are easier to deal with.

When faced with a death or other very difficult loss, we often at first experience shock and panic. It is tempting to deny the facts - 'this can't be happening to me'. Once the reality of what has happened really sinks in, it's not unusual to experience emotions such as intense sadness, anger that it happened to you, guilt that you might be to blame in some way and jealousy of other families who don't have your problems to cope with. These feelings will ease in time.

There is no right or wrong way to grieve and everyone copes differently. Some people tend to be more private with their grief and may be less likely to show outward emotion, even to partners or close family and friends. They may tend to be more focused on practicalities and direct their energies into activities, rather than wanting to talk about how they're feeling. Others are more open and expressive with their grief and other emotions, they are more likely to need to talk about their feelings and share their stories with others. Most people tend to experience a 'blend' of these grieving styles but one style is often more dominant than the other.

There is no quick fix for grief, it takes time to learn to live with a loss and the emotions involved. It can help to talk to people with an understanding of these situations and feelings, and who are there to support you. ARC and other organisations and services are there to help.

Going back to work

Some partners might decide to return to work quite soon after the death of the baby. While most employers will be sympathetic, it may not be possible to take all the time you might want.

Returning to face colleagues may give you the opportunity to talk about your loss and sadness, or you may not want to talk about it. It is very personal and it might be helpful for you to think about how you will approach this before your return.

You may find it difficult to concentrate at work and your motivation may be impaired for a while. Demands will be made of you, and you may worry that your difficulties or a prolonged absence could cause problems. You might feel the need for compassion and understanding but may not want to go into details of your bereavement with anyone.

Seek out support and someone to talk to if you possibly can. Confidential counselling is offered in an increasing number of workplaces to help workers deal with stress. Do not be afraid to ask for support. Emotional upset and distress can sometimes entitle you to sick leave if you wish. If work is causing you difficulties in any way, consider talking to your GP and remember that the ARC helpline is here for support if you need to talk to someone. We can also help you find a therapist or counsellor if you feel that would help.

Remembering your baby

You will never forget your baby, but some people are unsure about formal remembrance. There are no rights and wrongs, so try to follow your instincts.

If you have had a funeral or cremation, then the baby's grave or ashes may become a focus for your memories. Other parents find a memorial service is helpful. Many hospitals have a Book of Remembrance, and an entry for your baby can be written into this if you wish. ARC can give you information about some of the ways other parents have found to create memories.

Milestones such as your baby's due date, anniversaries of your baby's death and special family-oriented times such as Christmas and other religious or cultural festivals can be particularly painful.

Other people may be reticent to mention your baby unless you do. It might help if you can let them know if you want them to.

Relationships

Everything that has happened is likely to have tested your relationship. You may emerge from the experience feeling much closer, or sadly, rifts within the relationship may have deepened. It is not unusual for any couple to struggle for a while with the differences in their feelings about their loss and their reactions to it.

Trying to talk to each other about how you are and trying to understand that you may have different feelings and need different things to cope can help. Some couples find it beneficial to seek professional support if problems persist, such as couples counselling. ARC can help you find a service or practitioner, or your GP may be able to help. Please also see page 12 for links to services with particular experience in this area.

Another baby?

There are a number of things you might want to consider before making the decision about another pregnancy. There may be difficult conversations to have about who is going to conceive the next pregnancy. The next baby will not replace the one who has died. Allowing yourselves a period of recovery can be helpful, but for older couples and those using fertility treatment, the time pressure may feel more intense. There are no golden rules about how long to wait and many couples find they have a deep yearning for another baby.

Any further pregnancies will inevitably provoke anxiety whoever carries the baby. Once you have experienced a prenatal diagnosis it can be hard not to worry about what can be detected during pregnancy. You may want to seek specific testing, depending on the diagnosis in your baby, and your consultant (or genetic counsellor if you have been referred to one) can advise you about what is available and might be appropriate for you.

How ARC can help

The helpline is there for anyone who needs support following the loss of a baby, including partners. We are familiar with many of the additional layers that some couples and individuals struggle with following a loss and we take our cue from anyone who gets in touch. We don't make assumptions and we don't tell anyone what to do, but we can sometimes make helpful suggestions. If you don't feel comfortable talking on the phone, we can offer support by email too.

The volunteers on our Support Network are all bereaved parents who are years on from their own devastating experiences, who have completed a training programme and who are there to support more recently bereaved people, including partners.

ARC also holds facilitated regional support meetings for people who have been through a termination for fetal anomaly, and many partners find these helpful.

Talking to someone can help you feel less alone. Knowing that other people have survived this painful experience can help you now and give some hope for the future.

If you think counselling or therapy may be helpful to you individually or as a couple, ARC can try to help you find someone with appropriate training and experience. You can send an email to info@arc-uk.org with your postcode and we will do our best to signpost you to services or private practitioners which may be helpful to you (and your partner if you are seeking help for both of you).

LGBTQI+ pregnancy loss stories and resources

The Legacy of Leo - LGBTQI+ and other experiences of pregnancy and baby loss, including termination for medical reasons. Also includes stories by and for partners.

<https://thelegacyofleo.com/?s=tfmr>

Information and support around miscarriage

<https://www.miscarriageuk.org/pregnancy-loss-within-communities/>

US-based pregnancy loss support website

<https://pregnancyafterlosssupport.org/resources-for-lgbtq-families-experiencing-loss-and-pregnancy-after-loss/>

Counselling and therapy

BACP

<https://www.bacp.co.uk/>

Information about different types of counselling and therapy and a directory of practitioners

UKCP

<https://www.psychotherapy.org.uk/>

Information about different types of psychotherapy and a directory of practitioners

Pink Therapy

<https://pinktherapy.com/>

An online directory of therapists of all sexualities and gender identities who work with gender and sexual diversity clients across the LGBTQI+ spectrum from a non-judgmental standpoint.

British Infertility Counselling Association

<https://www.bica.net/>

Directory of counsellors experienced in working with issues related to assisted reproduction

Relate

<https://www.relate.org.uk/>

The UK's largest provider of relationship support.

Tavistock Relationships

<https://tavistockrelationships.org/>

Long-established relationship therapy organisation – based in London, online therapy also available. Sliding scale of fees.

ARC has a list of counsellors and therapists with experience of working with pregnancy loss and/or bereavement and may be able to signpost you to someone who might be the right fit for you and/or your partner.

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Need help?

Call our national helpline and speak to a member of our trained team.
Our helpline is open Monday to Friday, 10.00am-5.30pm.

Helpline: 020 7713 7486

ARC

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York Street, London
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Tel: 020 7713 7356

Text: 07908 683004

Email: info@arc-uk.org

Website: www.arc-uk.org

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