AIMS For a better birth...

Baby loss in lockdown, the loneliest of times. Does social media help?

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By Julie Wall

At 41 and with three beautiful, thriving children, I was elated if not a bit surprised to discover we were to be blessed with a fourth child. Immediately on seeing those two blue lines, I (being a meticulous planner) made head-space and grew heartroom.[1]

I was writing a dissertation at the time on the impact of social media on the transition to becoming a mother for the first time. I now found myself looking up on blogs and social media for anonymous advice, support, and experiences on being an older mother, one that's also carrying a bit more weight!

Chalklen and Anderson[2] suggest that mothers fall into three categories when using social media. They describe the mothers in their research as either 'advanced-active users' (those who have social media, in particular Facebook, integrated into their everyday lives: they tend to share a lot on there, be more open, and are likely to be interacting more online than the other two categories); 'closed-protective users' (these mothers are very conscious of privacy, they will look up information and 'like' it, but posted and shared information less so); finally, the 'fence-sitters' (this group are also likely to have robust privacy settings, and will view information, but are less likely to comment on posts, and more inclined not to friend work colleagues or share photos; interestingly, the researchers found that this group might engage in certain activities on one occasion and avoid it the next). Chalklen and Anderson[3] also observed that the mothers in their study changed how they used social media, particularly when becoming a mother for the first time. This resonates with me, and I have definitely moved through the categories during my motherhood journey, currently identifying with the 'closed-protective user' category.

Lockdown due to Covid-19 made this pregnancy experience a little different to my other pregnancies. My booking-in appointment was via telephone, with an invitation to join a closed Facebook group in order to keep up to date with Covid-19 guidelines. My first visit with the midwife was on my own, wearing a mask, then finally came the dating scan. At this point regulations were being eased a little, and my husband was also able to attend.

The drive to the hospital (with the obligatory full bladder!) was one of excitement, anticipation, and joy. We were looking forward to seeing our beautiful little surprise for the first time. We were called in (in our PPE) and I happily hopped up onto the couch, ready to enjoy the scan.

I'd had no bleeding during this pregnancy, as I had with my previous three. My pregnancy symptoms were strong and I felt contented. Therefore, as I lay there, I was pretty confident that all was fine. I'd already considered my announcement to the world via social media – what a wonderful surprise it was going to be!

The sonographer was worryingly quiet, then finally she said, 'Is there any chance your dates are wrong?' I knew 100% that they weren't. 'I'm sorry,' she said, 'There is no heartbeat.' I left the sonography room in tears and in a state of shock, that heart and headroom still gaping open, a sense of grief looming. The rest of the week went by in a blur.

Three weeks later, after expectant management of my missed miscarriage and two further scans (just to make sure), I opted for medical management.[4] I was admitted as an in-patient due to a previous

caesarean birth, and the process was as expected. I was exactly 12 weeks pregnant.

If 1 in 4 confirmed pregnancies end in miscarriage,[5] I couldn't help wondering why I felt so incredibly alone. Again, as I did when I found out I was pregnant, I turned to the internet for support, specifically blogs, social media, and forums.

Reading other similar stories on social networking forums, such as Netmums, Mumsnet, and a private, 'safe space' on The Miscarriage Association's website, made me feel less isolated. Feeling others empathise through their written word on social media blogs, and validating my thoughts and feelings by having them affirmed by other mothers who'd experienced baby loss was invaluable to my recovery.

Evidence[6] shows that mothers, whether they are pregnant for the first time or they have had children already, turn to social media in order to source advice and information specifically tailored to their needs. They (the mothers) report this being advantageous for the following reasons:

- It is instantly available and available 24/7.
- It can be anonymous (if required/requested).
- It gives mothers affirmation from other mothers.
- In the early days of motherhood, it makes mothers feel more connected with others, thus reducing isolation.
- Mothers do not need to leave the house to access support.
- It gives the ability to keep friends and family updated with baby news (although there is conflicting evidence about posting photos).
- It can be unbiased and mothers can receive valuable information from like-minded mothers.

I would also offer a caveat about potential bias in the private groups and forums. Just as a researcher would collate their evidence, it is important to view the 'whole picture,' not just cherry-pick the research which supports and confirms the researcher's view. Within the private, specific groups that mothers can join, the information sharing is vital, affirmative, and powerful; however, it might leave some vulnerable members open to coercion and bias.

However, the evidence I critiqued above suggests instead the opposite. Archer and Kao[7] state that mothers appreciate the specific groups, as it saves any 'small chatter' and allows friendships to be quickly forged through a common interest. Baker and Yang[8] add that mothers take what they need from the groups, blogs, and forums and use the information they have learnt to their advantage.

This was certainly the case for me during my lockdown baby loss. I wanted to know exactly what to expect, and took empathy and knowledge from the lived experiences of others: even though every woman's baby loss journey is unique and individual to her and her family, reading others' stories definitely helped me, and I remain grateful to women who share their most personal thoughts.

I did read some miracle stories too, which maybe gave me some false hope along the way, but on the whole, social media supported my heart-breaking and difficult journey. When I knew medical management was the path to be taken I recalled what I had read and, although scared, I also felt prepared

and less alone.

In the weeks after (and to this day) I would cry and grieve for our loss, all of a sudden there were pregnant ladies and babies everywhere. Of course they were always there, I was just noticing them now even more than normal, with pregnancy, childbirth, and babies being my passion! I kept using social media to affirm again that what I was feeling was normal, reading other experiences continued to help, and messages on forums encouraging me to be kind to myself and allow myself to grieve helped immensely.

Some friends and family knew what we were experiencing, and were incredibly supportive. However, because of Covid-19 and lockdown, they couldn't give me the hug I so needed, but were able to keep 'connected' (a theme running through all the literature I have read for my dissertation) using platforms such as Skype, WhatsApp and Zoom. This pandemic has been so hard for everyone, worldwide. Now more than ever, I believe that social media has helped friends and families stay connected and supported much of the population's mental health. People who have never used Skype or Zoom are now fluent in navigating such platforms, thus reducing some feelings of isolation.

Miscarriage, it seems, is one of the loneliest experiences you can go through. If 1 in 4 known pregnancies end in miscarriage, that's a lot of women not talking about it, and maybe that is also ok. Social media made me feel less isolated during my experience, and I aim to share it in order for other women to take comfort, support, and empathy from my story.



Editor's note: Other useful resources can be found here:

www.mumsnet.com/campaigns/miscarriage-care-campaign

www.sands.org.uk/support-you/how-we-offer-support/sands-groups

www.tommys.org/pregnancy-information/pregnancy-complications/baby-loss/miscarriage/support-after-miscarriage

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Julie Wall is based in Warwickshire and is the mum of three lovely children. She gained her NNEB diploma in 1997 and will finalise her BaHons in Birth and Beyond in 2021. She has worked with many wonderful families and looks forward to supporting many more in the future.

1Stadlen, N. (2015) *How mothers love – And how relationships are born.* 2nd ed. London: Piatkus, pp. 10–28.

2 Chalklen, C & Anderson, H (2017) 'Mothering on Facebook: Exploring the privacy/openness paradox.' *Social Media + Society.* doi: 10.1177/2056305117707187.

3 Chalklen & Anderson, 2017

4 *Note from the Editor*: A missed miscarriage is when the pregnancy has ended but the miscarriage has not started. 'Expectant management' means waiting for the miscarriage to happen naturally, while 'medical management' involves being given medications to begin or speed up the process of miscarriage.

5 The Miscarriage Association (2020) *The Miscarriage Association: Pregnancy Loss Information and Support*. Available at: www.miscarriageassociation.org.uk (Accessed 15 September 2020).

6 Chalklen & Anderson, 2017.

7 Archer, C & Kao, K-T (2018) 'Mother, baby and Facebook makes three: Does social media provide social support for new mothers?' *Media International Australia*, 168(1): 122–139. doi: 10.1177/1329878X18783016.

8 Baker, B & Yang I. 'Social media as social support in pregnancy and the postpartum.' *Sexual & Reproductive Healthcare: Official Journal of the Swedish Association of Midwives*, 17 (2018): 31–34.