

### **Sands position statement**

#### **Seeing and holding the baby after a pregnancy loss or the death of a baby before, during or shortly after birth**

Being able to make informed choices is a fundamental principle of healthcare in the UK. Sands believes that after a pregnancy loss or the death of a baby before, during or shortly after birth, parents should always be offered opportunities to see, hold and spend time with their baby. Some parents may want to see their baby and other parents may decline this offer. Their decision must be supported and respected.

Until the 1970s, parents were prevented from seeing their baby after death by staff who believed that they were protecting the parents. In the late 1970s, a group of bereaved parents formed the Stillbirth and Perinatal Death Association (SPDA) which later became Sands. These parents began to demand that parents should be given a choice about seeing and holding their baby after death. Over the next 30 years, bereaved families were increasingly supported to do so.

In 2007, the National Institute for Clinical Excellence (NICE) published *Clinical Guideline 45 – Antenatal and Postnatal Mental Health*. This guidance discouraged parents from seeing and holding their stillborn baby. As a result, many midwives and others were concerned that parents might no longer be offered a choice about seeing and holding their baby.

In 2009, Sands launched a campaign asking NICE to review these statements and make it clear in the guidance that parental choice was the overriding principle. In June 2010, after several months of careful negotiation between Sands and NICE, NICE issued a clarification statement that supports offering women the choice to see and hold their baby while emphasizing that women who decline this offer should not be encouraged to do so. The 2014 update of the NICE Guidance on Antenatal and Postnatal Mental Health also reiterates that parents should be given the choice of seeing and holding their baby following stillbirth or neonatal death by an experienced practitioner.

#### **Implications for practice**

It is now clear that choice should be the overriding principle with regard to bereaved parents being offered an opportunity to see and hold their baby. Many parents cherish the memories of the time they spent with their baby. However, seeing their baby may not be right for all parents. It is a very individual decision and parents must be given time to think about what would be best for them. Staff need to offer unbiased, sensitive support and help parents to reach their own decisions about seeing and holding their baby.

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Improving bereavement care team