What I Hold and What I Give Away

Miscarriage, Memory, and Mourning

Best described as a lyric essay, “What I Hold and What I Give Away” examines my memories of miscarriage and bereavement. After giving the broad outline of what I experienced more than twenty years ago, I draw on Derrida to reflect on the work of mourning as an ongoing process, one that continues to matter to my mothering, and to others as I share my experience of loss and grief.

What I Know, What I Believe

I know that in the fall of 1981, a few months before my daughter Erin’s second birthday, I became pregnant with my second child. Wayne and I had been trying to conceive for a year, and we were thrilled that our family would soon be complete. As I entered the second trimester, we decided to celebrate: I would accompany him to a convention, and Erin would stay with friends in a small city further north. The convention was to take place over the Valentine’s Day weekend, the perfect time to renew our commitment to each other and our growing family.

I know that when I arrived at my friend’s house, I was bleeding. Now four hours away from my family doctor, I went to the local hospital, where I was examined and admitted. It was the weekend, so I saw the rotation of physicians on call. Each gave me little information and simply kept me on bed rest. I was terrified and bewildered; young and completely unworldly, I lacked the personal resources needed to challenge the professionals who kept secret what they knew or guessed about my baby’s health. Furthermore, there was little pain or cramping, just an inexorable regular spotting and a heaviness in my abdomen, below my barely noticeable baby bump. I was torn between fearing the worst and hoping that this minor bleeding meant nothing.
I know that when Wayne came to get us, I wanted only to see my doctor. The doctors examining me continued to tell me nothing about the condition of my baby other than that I was still getting positive results on the pregnancy tests, and that I should stay on bed rest. I remember them hinting that an ultrasound, not available there, would tell me more, but that I would have to sign myself out of the hospital if I wanted to leave. There seemed a monumental wall of silence between their profession and my needs. So, I left. I remember the long drive and being frightened that each bump on that winter road would force the spotting to become a miscarriage.

I know that by the time we got to the hospital, the pressure in my abdomen had become definite cramps. By the time I saw my doctor, I was having pain that threatened to turn into contractions. I remember wanting desperately to be left alone, to curl into a ball around my baby and stay like that forever. I went to the bathroom to hide, and when I sat down, I felt a heavy pain, and then I felt my baby slide out of me. I remember standing for some minutes, looking at my loss, understanding what had happened and that if I told any of the medical professionals they would take my baby out of the water and to the laboratory. They would not, however, be able to tell me anything that I would want to know. So I cried, and prepared myself for the next few days of tests, for the ultrasound that showed an empty womb, and the surgical scraping meant to return me to health and prepare me for another pregnancy, and then I flushed the toilet.

I believe that there was something wrong with my baby from the start. I believe that the reason it took us so long to conceive the second time, when it had been so immediate with Erin, was because an ill-advised intrauterine device had moved and become embedded in my womb. After it was surgically removed, we conceived our second child, but the pregnancy, while seemingly normal, never felt right. I believe I wanted to celebrate the end of the first trimester because I felt that the pregnancy was not a healthy one. Mine is a family of mis-carriers: we do not have early or sick babies; we have miscarriages and, more rarely, stillbirths. Our babies are born fullterm and perfect, or they are not “born” at all. At the time, mine was a family that did not speak of these lost children; they seemed part of a silenced narrative of failed motherhood.

I believe that the doctors were only waiting for the inevitable to happen, for “nature to take its course.” I feel my body understood this as well; there was something wrong with my baby and he was dying. And, yes, I feel that this baby was a boy. I also believe that the nurse who asked me if I didn’t “want to run around the hospital a few times and just get it over with” only wanted me to understand what was happening. She was both compassionate and realistic in pointing out that my situation had only one outcome, and
when it was finished, I could return to mothering my little girl. And, like everyone else, she was quite certain that once it was over, I would go on to have as many children as I wanted. Then, and now, I felt that my second child mattered, in and of himself, that the loss of him needed to be discrete from the child that came before, and the children that I hoped would come after but did not.

I believe that the reaction of the people around me, of my husband, family and friends, was not the callousness that it appeared to be. They were solicitous of my physical health, clearly concerned about my psychological well being. But their uniform silence about my lost baby, about what I could only see as a death in my family, hurt and disturbed me at the time. My grief garnered only assurances that I was young and healthy; I could have another baby right away. My insistence that I needed to mourn for this child was met with either silence or comments that I had lost a fetus, not a child. This was a spontaneous abortion, not a death. Even my aunts who had miscarried and my mother whose full-term second pregnancy ended in the stillbirth of my sister had difficulty with my mourning. I understood that my husband did not have the resources to understand our loss as a death. Erin was not real to him, not part of him, until her birth. Pregnancy was a medical condition involving the mother and the professionals. My society, I believe, had trained all of us to see pregnancy and birth as clinical, miscarriage and stillbirth as a condition, a syndrome, an illness, a minor medical event to be gotten over quickly. In short, what I saw first as disregard of my grief and indifference to my loss I came quickly to understand as socialized reactions to events that had been ripped out of the domestic sphere where they belonged and were now entrenched in an institution that had changed what it could and shrouded the rest in secrecy. We are now, finally, returning to the midwife, the homebirth, the recognition of reproduction as a family matter. In 1982, I yearned for a woman to coach me through birth and through miscarriage, through my baby’s death.

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I hold that life inside me still, as a memory, a secret, a life that was invisible and intangible to the world but alive to me. I hold that child encrypted inside me; my womb was the site of both his life and death. Like the deaths, the memories, of everyone I have lost, his is a death that inhabits me. Never really present in the world, he continues to be present to me. He is a closed cipher, but I continue to hold the experience of him inside me. This is not to say that I imagine him at the age he would be now, had he lived. I do not: to me he has never existed, even in my dreams, as a toddler, a child, an
adolescent, a teenager, a young man; he has not taken life in my mind or heart as Erin’s little brother, a boy who plays hockey with Wayne or baseball with me. He is what he was: a baby who died some seventeen weeks after conception, unnamed, unheld. But I hold him nonetheless, and I hold him in the fierce light of my mourning.

Because it is all that was left to me, I hold mourning as a means of mothering. Mourning is, as philosopher Jacques Derrida notes, a sign of fidelity. It is an act of love, of “keeping alive,” and a way in which I remain faithful to the baby I could not hold; mourning became the only means for me to mother this child. The force of mourning has the power to open up the possible, Derrida suggests, to enact birth. Mourning my second child is the only way to give birth to him, to bring him to life and light. And, even as I hold onto mourning, I share my experience: I speak of my lost child. In speaking of my miscarried baby, I perform, over and over, a funeral oration; I both call out to the child and I bear witness to my loss. In sharing my sadness, I faced up to my loss and found it conjoined with a new responsibility. As I recovered physically and emotionally from losing my baby, I refused to engage in the economy of secrets surrounding miscarriage. I began to ask the women in my family about their experiences of miscarriage and stillbirth. How can an expectant mother cope with what she does not expect? My mother, aunts, and cousins were gracious in sharing their stories with me, in reflecting on their lost children, revisiting their mourning, and comforting me as I worked through my own.

And so, I give away mourning even as I hold onto it. Derrida refers to mourning as a reckoning, as a force that gathers only by dispersing. He writes of the duty to speak of loss, to speak of the dead. Early on, I learned to reckon with my lost baby, and my mourning is both forceful and dispersed. I speak of my dead: families with only one child are not common in Canadian society, and I am often asked about mine. To those I don’t know well, I say that I had a second-trimester miscarriage when Erin was two. To those I know better, I offer more details, especially to women who want children. And I tell them that I was glad I honoured my baby by immediately announcing my pregnancy, by knowing him as my child right away, and by mourning his death. I give them a gift; I give them the story of my mourning. I think my insistence on the necessity to recognize the weight of my own loss and to mourn my child fully helped my friends engage with the work of mourning their own. Along with them I mourned their losses, and they gave me back a gift, as I remembered, and continue to remember, my second child, and to hold him with me as I mourn his death.

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References