



Review Article

Exploring Work Policies for Women Returning to Work After a Miscarriage

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Abstract

Women have the innate responsibility to bear children in order to maintain the society to which we have become accustomed. Prior to more recent decades, it was believed that a woman's sole purpose was to birth children and care for them and her husband in the home. As traditional gender norms were challenged, more women entered the workforce, but this did not replace their obligation to birth future generations. Unfortunately, all pregnancies do not end with a healthy newborn in tow and the impact of a miscarriage can influence the overall daily functioning of the women who have miscarried. As women continue to enter the workforce, it is paramount that employers create policies for protection in times of traumatic events such as a miscarriage. The loss of an unborn baby should not translate into a potential loss of wages and/or a job position. There is currently a policy in place that protects the job position of a woman following the birth of her child, but this policy fails to acknowledge the 15%-20% of women who become pregnant but do not birth a living child. The proposed policy presented in this article could be utilized as a tool for acknowledging the fact that miscarriages can debilitate to the women that experience them, severely impacting their ability to work. A woman does not choose to miscarry, and her job security should not reflect her inability to choose or further punish her following the loss of a baby.

Keywords

Miscarriage; Work policy; Pregnancy loss

Introduction

According to the most updated statistics pertaining to pregnancy loss, miscarriages become realities to roughly 15%-20% of women in the U.S. According to Robinson, "The overall incidence is 15%-20%; 27% in women between aged between 25 and 29 years old and 75% in women aged over 45 years" [1]. While the possibility of a miscarriage occurring rises as the years pass, a shift in social dynamics has resulted in an elevated risk in working. Participation in the work force has increased the risk of a working woman experiencing a miscarriage due to the possible tasks mandatory to complete a work assignment.

As we continue to adapt to the changing gender roles and social norms, the number of women working from outside of the home increases. Although working while pregnant does not automatically lead to a miscarriage or an overall difficulty in carrying full term, there is a correlation between working and pregnancy that continues to be researched. Porschitz and Siler stated that "Most miscarriages

happen at work simply because of so many women of childbearing age work outside of the home" [2].

In addition to the actual miscarriage, there are sometimes painful experiences before and after the miscarriage occurs. Leading up to an unplanned loss of a pregnancy, a woman may experience painful cramping and bleeding, both causing physical pain. Following the unplanned loss of a pregnancy, the woman will most likely experience physical pain as well as psychological pain. As the body and mind transition from being pregnant, to suddenly not being pregnant; the woman becomes subjected to a shift in hormones that can result in a tedious process. Unfortunately, for most women, they are not allotted the option to properly engage in self-care to assist in their overall healing. Although their pregnancies have ended, their day to day lives must continue; with a great majority of those lives including returning to work.

In today's society, more women are working, but working does not exclude a woman from adding to the 15%-20% of women in the U.S. that experience a miscarriage. Current research is being conducted to test if there are possible preventive measures that can assist in decreasing the present percentage. As that research continues, there is something that we can do presently to help women following a miscarriage that aligns with the changes of the millennium. Within this presentation, the lack of universal policy for a woman returning to work after a miscarriage is explored and challenged.

What is a Miscarriage?

A miscarriage is classified as the loss of a pregnancy prior to the embryo or fetus reaching a 20-week gestation period. A miscarriage is a tragedy that is often shielded from the rest of the world and has been proven to impact expectant mothers mentally and emotionally, as well as physically. "Janet Jaffe, a clinical psychologist at the Center for Reproductive Psychology in San Diego and co-author of the 2010 book „Reproductive Trauma: Psychotherapy with Infertility and Pregnancy Loss Clients," stated that „Because it is medically common, the impact of miscarriage is often underestimated." [3,4]. Dr. Jaffe continued with, „but miscarriage is a traumatic loss, not only of the pregnancy but of a woman's sense of self and her hopes and dreams of the future. She has lost her 'reproductive story,' and it needs to be grieved" [4].

While conducting my present research, I noticed that the amount of current information pertaining to life before and after a miscarriage is limited. Although research does indicate that the occurrence of miscarriages has grown over the last decade or so, the topic continues to be a difficult one to discuss. The difficulty in discussing a miscarriage lies not only in what is being said but also in who is saying it. Although I believe that the experience is best relayed by someone having gone through it themselves, Porschitz and Siler noted in their article, Miscarriage in the Workplace: An Auto-ethnography, that silence is a commonality amongst women having experienced a miscarriage [2]. They summarized: "While remaining silent about pregnancy and miscarriage offers a layer of protection to women, we find that for us, the silence was not 'a choice' made with any consciousness or thoughtful reflection, but rather a default reaction that, in retrospect, we find troubling. Many working women,

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ourselves included, need support when they suffer from physical and/or emotional trauma.” [2].

Within their own paper, Porschitz and Siler made the decision to share their own personal stories of experiencing a miscarriage [2]. I initially thought to interview other women about their personal experiences with a miscarriage and returning to work, but I decided against collecting narratives. Due to the sensitivity of the topic and the possibility of retraumatizing a woman, I have decided to share my personal experience pertaining to returning to work following a miscarriage.

A Personal Experience

April 27, 2018, began on an upbeat for me. For weeks prior to, I had been planning with a group of my friends to go see the movie *Avengers: Infinity War*. We are all big superhero fans and were excited to go see it together. As I was getting ready, I suddenly felt a sharp pain in my abdomen. The same pain that I had been feeling for weeks but chose to ignore because I had work and school to complete. My initial reaction that day was to ignore the pain again, but the usually fleeting pain lingered that day. I wrote the pain off as having a stomach ache after eating something the previous night. I asked for a friend to bring me a ginger-ale to settle my stomach and continued to get ready.

Not five minutes had gone by since I asked for the soda before I realized that what was happening was more than a stomach ache. I began to sweat profusely and was rendered unable to move out of the fetal position due to the pain. Following the fever, I began to experience nausea and diarrhea and was forced to crawl from my bedroom to my bathroom. When I was about twelve-years-old I broke my leg in five places and shattered my knee which used to be my scaling for pain. The level of pain that occurred during my miscarriage was at least 10 times more intense than when I shattered my knee. It felt as though my heart was fighting to keep the child that I created with intent against my body whose only goal was to keep me alive.

My initial thought was to avoid the doctor’s office and ride out the pain because I did not have additional paid time off at work. I am my sole source of support and knew that missing work would severely impact by paycheck and start a domino effect that leads to accumulating additional debt. My next thought was that I was happy that I had a life insurance policy because I felt like I was dying. At the time, I was unaware that I was pregnant and therefore unaware that I was miscarrying, but now that I know what was going on, I know that the pain was indeed caused by a piece of me dying.

I had finally gotten a hold on my pain, but when my friend arrived with the ginger-ale he encouraged me to see a doctor. I did not get to see the movie that day; instead, I spent the day traveling between three medical facilities to be informed of my pregnancy, informed that my baby was growing in my fallopian tube and that both the baby and the tube had to be removed, and at around 3:00 am the following day, to have the surgery that would ultimately end my pregnancy.

It was not until having experienced the loss for myself, that I completely understood the impact that a miscarriage can have in every aspect of one’s life. Prior to and upon the completion of surgery to remove the remnants of my developing child, my medical doctor informed me of what to expect. He told me about the physical changes that were to follow and prescribed medications for the pain. He wrote me a medical excuse from work for a week and I was sent on my way.

I recollected on the weeks prior when I had ignored the pain

or took pain medications to get through my work day. I became furious with myself and began blaming my desire to work and remain self-sufficient for my miscarriage. I contemplated if the stress of commuting to Virginia for work every week day or the demands of my position at the time could have attributed to my miscarriage. In my need to find something to hold the blame of losing my baby, I became resentful of my place of employment. Even though I was upset, I was hopeful that beyond the physical, emotional, and mental exhaustion that I was about to endure I could at least grieve and heal without being subjected to a financial burden from missing work. I knew that I had exhausted my paid time off and my sick days for a school conference and ultimately relied more on empathy from my supervisors pertaining to my mandated time off. I was hopeful, but I was not correct in my belief.

An Unexpected Challenge

As I reviewed the paystub that followed my week out of work, I noticed a discrepancy. Although being a salaried employee at a company I had worked for over a year, the week that my doctor told me to stay home was a week that I had not been paid for. I had just lost a literal piece of me, but my focus had to shift from grieving that loss to panic. Proceeding a thorough examination of the company’s policies, I noticed that there were policies written out for bereavement and for maternity leave but neither discussed returning to work after losing a baby that you loved, yet never met. One could argue that someone could not grieve for a person that was never born and that since maternity leave includes time off for carrying for a newborn baby, it is not applicable to those whose pregnancies did not produce a newborn baby.

For me, my miscarriage lied in a grey area among bereavement, maternity leave, and sick leave. It was a combination of grieving for the loss of my child, my body healing from surgery, and my heart and mind attempting to heal from what I felt was a failure to my womanhood. As I conducted research for this presentation, I stumbled upon similar stories from women who had courageously shared their personal experiences of returning to work after a miscarriage. While it was comforting to hear that I was not alone in some of the ways that I was feeling, it was also disheartening that many of the stories included feeling like they were not mentally or physically ready to return to their jobs but lacked the resources and availability to stay home.

Healing in the Spotlight

Although there is a lack of recollections of miscarriage in scholarly empirical articles, experiences of miscarriage have been shared through mainstream media by women whose jobs require them to constantly remain in the spotlight. In her recent autobiography *Becoming*, the former first lady and healthy living advocate Michelle Obama opened up about her personal experience with a miscarriage.

“If I were to start a file on things nobody tells you until you’re right in the thick of them, I might begin with miscarriages. A miscarriage is lonely, painful, and demoralizing almost on a cellular level. When you have one, you will likely mistake it for a personal failure, which it is not. Or a tragedy, which, regardless of how utterly devastating it feels in the moment, it also is not. What nobody tells you is that miscarriage happens all the time, to more women than you’d ever guess, given the relative silence around it. I learned this only after I mentioned that I’d miscarried to a couple of friends, who responded by heaping me with love and support and also their miscarriage stories. It didn’t take away the pain, but in unburying their own struggles, they steadied me

during mine, helping me see that what I'd been through was no more than a normal biological hiccup, a fertilized egg that, for what was probably a very good reason, had needed to bail out" [5].

Actress, singer, model, and fashion designer Lindsay Lohan shared that during the taping for her docuseries, titled *Lindsay* as well, she experienced a miscarriage [6]. During the season finale of the docuseries, Lindsay Lohan shared with viewers that she had experienced a miscarriage, but she did not give many details at the time. It was during an interview with the magazine *US Weekly*, that Lohan recalled the tragic event by stating: "I cried so many times watching the show," she said. "If I know I'm not capable of being on, that's why I would say I couldn't film today. No one knows this... I had a miscarriage for those two weeks that I took off. I couldn't move. I was sick," she said. "And mentally that messes with you. Watching this series, I just know how I felt at that moment and I can relate to that girl, which sounds kind of crazy. I'm like, 'Oh my god, this is really sad. Who's helping her?'"

While preparing to tape an episode of her show, Bethenny Ever After, Bethenny Frankel noticed that she was feeling cold and exhausted without there being a particular source of the exhaustion. As she was getting her makeup done, Frankel began bleeding and called her husband to escort her to the hospital. Once their doctor could not find the baby's heartbeat, Frankel was met with a harsh reality. In a *Glamour* magazine interview, author and reality TV personality Bethenny Frankel shared her experience of going from someone who heard stories of miscarriage to someone who has experienced a miscarriage themselves: "Everyone knows someone who's had a miscarriage. I've read that as many as a fourth of all pregnancies end in one. A few years ago a friend of mine told me she'd miscarried, and I remember saying, 'Oh God, that's terrible.' But I didn't really get it: how many feelings you cycle through in a matter of minutes. How depressing the process is, and how the anticlimactic-the exact opposite of having a baby?"

Actress and activist Gabrielle Monique Union-Wade has consistently been transparent with her difficulties with fertility that lead to painful enduring at least eight miscarriages. In her autobiography, titled *We're Going to Need More Wine: Stories That Are Funny, Complicated and True*, Union makes a bold statement pertaining to questions surrounding pregnancy after experiencing a miscarriage: „It's always super awkward and uncomfortable and like kind of painful when people ask," Union went on to say. „So my vagina and my uterus is like the sacrificial uterus, so I'm telling you about my journey so you don't have to ask about other people".

While there are risk factors such as weight and age that increase the possibility of a miscarriage, more often than not the occurrence happens without prompting.

Work After Miscarriage

In the midst of conducting the current study, I noticed that there is a significant shortage of scholarly peer-reviewed articles related to the specifics of returning to work after a miscarriage. It could be hypothesized that the sensitivity of the subject and the necessity in engaging in possibly triggering conversations, accounts for this shortage.

Although there is a gap in research specifically pertaining to returning to work after a miscarriage, there is substantial information discussing the mental and physical factors that follow a miscarriage and could impact the ability and willingness to return to work.

Effects of a Miscarriage

Mental impact

Women who have experienced a miscarriage often describe feeling guilty, anxious, and inadequate immediately following the loss of their baby. In a study conducted by Swanson, Connor, Jolley, Pettinato, and Wang, women who had experienced a miscarriage were interviewed at 1, 6, 16, and 52 weeks following their miscarriage [5]. The researchers were interested in the evolution of responses that occur for a woman following the loss of their unborn child. Swanson et al. reported that "In summary, findings from several cross-sectional qualitative studies focused on women's experiences suggest that miscarriage is a meaningful life event that is often accompanied by a sense of loss, longing for what might have been, and concerns about what could happen next" [5]. In experiencing a miscarriage, a woman is not only impacted mentally and emotionally at the moment; but those feelings can last from days to years after the loss.

Within the same study conducted by Swanson et al, the researchers reported that "At least 70% of these women experienced miscarriage as the loss of a baby or a part of themselves" [5]. Ultimately, studies like the one conducted by Robinson show that when a woman miscarries, regardless of how or why, they have a tendency to self-blame and question the likelihood of conceiving in the future, which translates into feelings of depression and anxiety [1]. The combination of depression and anxiety can impact one's motivation, willingness to interact, and the ability to complete their daily functions, which can all have a negative influence on one's work ethic. When a woman returns to work after a miscarriage she is not just returning as an employee, she is returning as a woman that has lost a significant piece of her.

Physical impact

The physical impact of a miscarriage varies by the form of miscarriage and the gestation period in which the miscarriage occurs. Some miscarriages require surgery while other women have to allow their baby to naturally pass through their bodies. An often time, the feeling of miscarrying is partnered with cramps, bleeding, and constant pain. Following a miscarriage, women are encouraged to wear adult diapers or heavy-duty pads in order to manage excessive bleeding and discharge. There is no set duration for the pain that follows a miscarriage, but often times a physician will encourage a woman to take a week off from work at a minimum. While the time away from work is beneficial to the necessary healing process, if that time is unpaid it can create additional stressors for the woman.

The initial call for change

In 2017, the Parental Bereavement Act of 2017 or "Sarah Grace-Farley-Kluger Act," was proposed following a combined effort of Kelly Farley, Barry Kluger, and Matthew and Marissa Weippert [7]. Farley's interest in the topic developed after witnessing his wife experience two stillbirths. Kluger experienced the loss of his 18-year-old daughter and wrote a book titled, *Grieving Dads: To the Brink and Back*, which is how he met Farley. The Weipperts joined the cause after losing their 12-year-old daughter to Leukemia. Their combined efforts to add the loss of a child to the Family and Medical Leave Act (FMLA) would include a policy that allows for unpaid leave following the loss of a child, stating that "We do not want to place a burden on employers. We just want the job to be held. We believe it's about compassion in the workplace but also good business". The bill is currently still in the process of being voted in or out, but the group remains hopeful.

Proposed Policy

The recovery time that follows losing a baby is dependent on the manner in which a woman loses the baby, but it can range from a few days to a couple of weeks. Some pregnancies require the woman to wait until the baby naturally passes through her body while others require a surgical procedure. No matter the nature in which a woman loses a baby, the effects are physical as well and emotionally and psychologically. Due to the impact being multifaceted, a policy can be placed under maternity leave or bereavement. Time allotted off for maternity and bereavement varies by the company as well as if the time off is paid or unpaid.

As a company placeholder for the purpose of this policy development, I will use the hypothetical company ABC Industries. The working policy will serve as a resource to assist in maneuvering through the difficult time that follows a miscarriage. Policies such as those for maternity leave and bereavement act as a safety net for working individuals transition into a “new normal” in their day to day lives. The policies assist in alleviating the pressure of returning to work swiftly after a life-altering event occurs and with the same logic. I believe that a policy is needed for women following an unplanned miscarriage. Their lives have been shifted, and there is a necessity for a time to adjust to the shift. The following is a proposed policy to assist those women who have miscarried in having a less strenuous transition from being pregnant to all of a sudden not being pregnant.

Working Policy

ABC Industries is committed to protecting the rights allotted to expecting mothers as written out by the Pregnancy Discrimination Act of 1978 and the Family and Medical Leave of 1993. ABC Industries has also accepted the rights and expectations of the proposed amendment to the Family and Medical Leave Act of 1993 that includes the Parental Bereavement Act of 2017 or the “Sarah Grace-Farley-Kluger Act” for parents that have lost a child [7,8].

ABC Industries’ policy as it pertains to women affected by a pregnancy, childbirth, loss of a pregnancy, or any other related medical conditions is to treat them no differently than employees that may become unable to work for an elongated time due to their physical or mental condition. ABC Industries acknowledges the physical, emotional, and mental changes that an expected mother may experience and provides a general outline applicable from when the pregnancy is initially shared with the company up until six weeks post-delivery. ABC Industries acknowledges the physical, emotional, and mental changes that may occur following an unintended pregnancy loss.

Expectant mothers may continue to work until they are informed by their physician that they are unable to continue their work. A letter from an expected mother’s physician may be required if her current work position requires performing tasks that may potentially harm the expectant mother and/or her unborn child. Once a physician states that an expectant mother is no longer able to work, she will begin to receive benefits according to the short-term disability plan

that ABC Industries implements for all employees experiencing a medical condition that temporarily prohibits their ability to complete the tasks assigned to their work position.

If an expectant mother were to experience an unintended pregnancy loss, she would be entitled to similar benefits following the pregnancy loss. Following an unintended pregnancy loss, an employee would be entitled to three weeks of time off. The type of time off, paid or unpaid is determined in the same manner as employees engaged in short-term disability. If an extended mother has worked with ABC Industries for a minimum of six months, she would have accrued enough time worked to supplement her income for the three weeks that she is away from work. Following the three weeks, the employee may choose to return to work and begin to restart her previous salary or choose to take additional time off. The additional time following the allotted three weeks is not automatically considered for paid time off.

When the employee returns to work, she will be placed back into the work position held prior to becoming pregnant with the same salary and benefits. If an employee did not return after the agreed upon time off or converse with her direct supervisor about her return, the employee would be considered to have voluntarily ceased her work relationship with ABC Industries.

Conclusion

A standard work policy for women returning to work after a miscarriage can assist in elevating the pressure of returning to work prior to feeling ready, as well as decreasing the development of additional stressors. Robinson believed that “Caregivers need to identify the best practices for managing women and their partners who have experienced such losses” [1]. In aligning with Robinson’s and countless of others’, call for action and in acknowledging the frequency in which miscarriages occur; it is paramount to implement a policy that provides ease during an extremely stressful and difficult time. While a universal work policy will not create a blueprint for managing life after a woman lost her unborn child, the policy will allow for a more humanistic understanding of the impact of the event.

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