

English Version



Jockey Club
Perinatal Bereavement Care Project
賽馬會「小足·福」失胎支援計劃

主辦 Organized by



HKU
SWSA

Department of Social Work and Social Administration
The University of Hong Kong
香港大學社會工作及社會行政學系

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Charities Trust



Press conference on

**Couple's Interdependence in Grief and Coping
After Pregnancy Loss in Hong Kong**

**「香港夫妻經歷失胎後，哀傷和應對中的相依模式」研究
新聞發佈會**

Rundown

Release of survey findings on Couple's Interdependence in Grief and Coping After Pregnancy Loss in Hong Kong

Prof. Celia Hoi-yan CHAN | Professor, Department of Social Work, Melbourne School of Health Sciences, Faculty of Medicine, Dentistry and Health Sciences, The University of Melbourne

| Jockey Club Perinatal Bereavement Care Project Principle Co-Investigator

Prof. Paul Wai-ching WONG | Associate Professor, Department of Social Work and Social Administration, The University of Hong Kong


| Jockey Club Perinatal Bereavement Care Project Principle Investigator

Jockey Club Perinatal Bereavement Care Project Symposium cum Closing Event

Mr. Ng Ngai Ling | Department of Social Work and Social Administration
The University of Hong Kong

| Jockey Club Perinatal Bereavement Care Project Manager

Questions and Answers



Release of survey findings on Couple's Interdependence in Grief and Coping After Pregnancy Loss in Hong Kong

Prof. Celia Hoi Yan CHAN

Professor, Department of Social Work, Melbourne School of Health Sciences,
Faculty of Medicine, Dentistry and Health Sciences, The University of Melbourne
Co-Investigator, Jockey Club Perinatal Bereavement Care Project

Background

- Approximately 10-15% of pregnant women will experience miscarriage.
- In 2023, Hong Kong reported 5,703 hospitalizations due to pregnancy loss (Department of Health):
 - Spontaneous abortion: 2,243
 - Medically induced abortion: 3,460
- In Chinese society, traditional beliefs often stigmatize miscarriage as taboo or consider miscarriage **less significant than other types of death**.
- As a form of disenfranchised grief: may deprive parents of the right to mourn the loss of their child, leading to **emotional distress and mental health risks**.

Background

- Previous research has primarily focused on women's experiences of miscarriage, with **fewer studies exploring the psychological processes and needs of male partners**.
- Following a pregnancy loss, individuals tend to rely on their partners for emotional support or practical assistance. However, existing research has paid **less attention to the shared experiences of couples** in this distressing situation and the psychological impact on each other.
- Pregnancy loss can pose challenges to marital relationships, such as impacting **sexual intimacy and communication**, which in turn affects their ability to face difficulties together and seek professional help.

Method

- **Research Objective:** This study aims to explore the grief and coping strategies of couples after pregnancy loss
- **Duration:** September to October 2024
- **Design:** Participants have been recruited through community and social media platforms to fill out an online questionnaire.
- **Participants:** Couples who have experienced pregnancy loss
- **Measurements**
 - **Depression:** Patient Health Questionnaire
 - **Reproductive Complicated Grief:** Reproductive Grief Screening
 - **Dyadic Coping:** Dyadic Coping Inventory

Participant Characteristics (N=582)

- 280 Male, 302 Female
- 246 Paired couple data
- Age median = 37
- Demographics overview
 - Employment Status: Full time (76.6%)
 - Religion: No (60.1%)
 - Education level:
Bachelor's degree or above (69.1%)
 - Marital status: Married (90.2%)
 - No. of Child: One or above (61.0%)



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Shared Sorrows: Questionnaire on Investigating Couple Interdependence in Grief and Coping after Pregnancy Loss

This study aims to investigate the grief and coping patterns by couples after pregnancy loss. The result would be valuable for hospitals and the community in enhancing the delivery of healthcare services and developing individualized psychosocial interventions for couples experiencing pregnancy loss.

Inviting **couples who have experienced pregnancy loss**;
Takes around 30 mins for each partner to complete;
Couple will receive supermarket gift vouchers upon completion.

Scan QR code to register



ibms_swsa@hku.hk
3917 - 5531

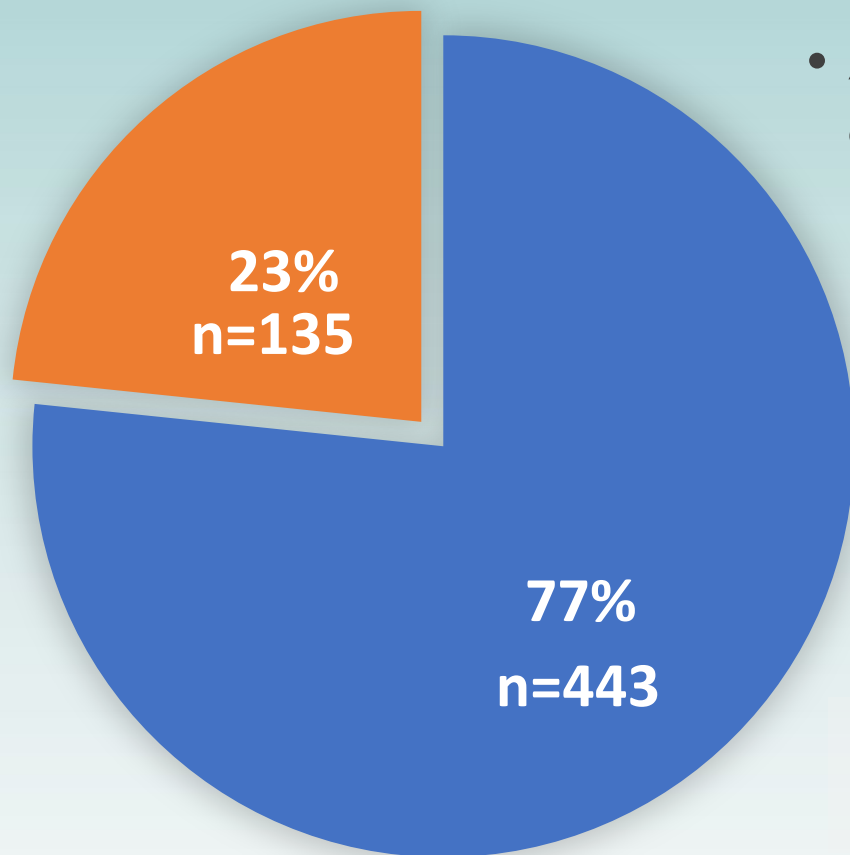


This study has been approved by the Human Research Ethics
Committee of the University of Hong Kong (EA240394)

Participant Characteristics – Female Clinical Data (N=302)

	n	(%)
Number of Miscarriage		
Once	237	(78.5%)
Twice or above	65	(21.5%)
Time since Recent Pregnancy Loss		
Less than one year or one year ago	52	(17.2%)
More than one year ago	250	(82.8%)
Reason of Miscarriage		
Anembryonic pregnancy	35	(11.6%)
Miscarriage (Spontaneous Abortion, Induced Abortion, Ectopic Pregnancy, Molar Pregnancy)	248	(82.1%)
Stillbirth (Pregnancy loss after 24 weeks of gestation)	16	(5.3%)
Neonatal death	3	(1.0%)

Depression after Experiencing Miscarriage (N=578)



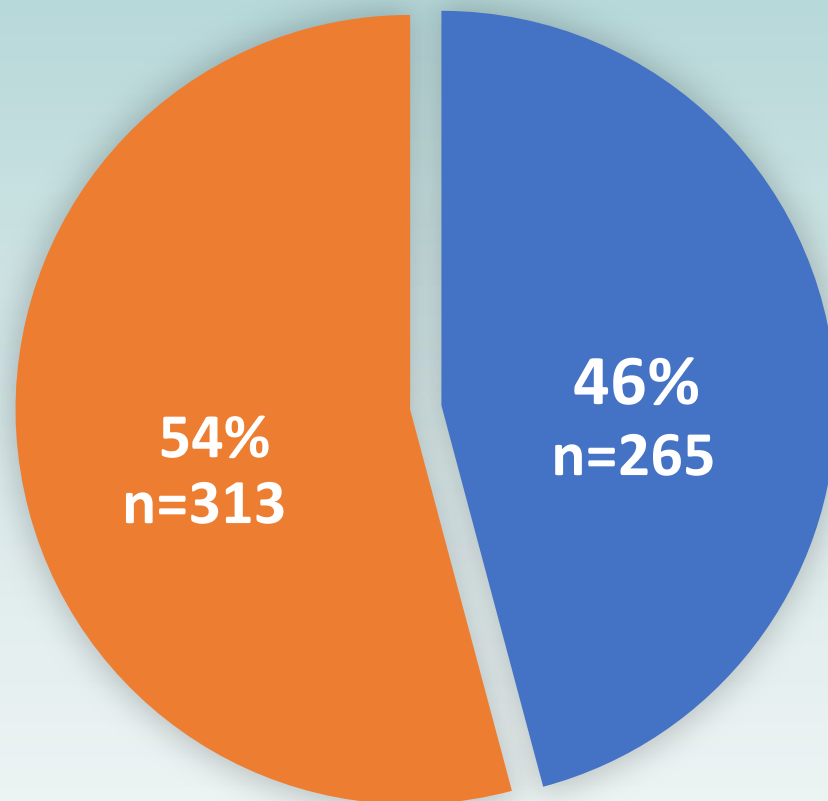
- 23% of the respondents exhibited moderate or higher levels of depressive symptoms
 - 39% were male (n=53)
 - 61% were female (n=82)

- Below moderate depressive symptoms
- 未有出現中度抑鬱及以上症狀
- 出現中度抑鬱及以上症狀
- Moderate depressive symptoms or above

Reproductive Complicated Grief

- Complicated grief reactions after miscarriage :
 - Difficulty accepting the child's passing
 - Emotional responses interfering with daily life
 - Persistent intrusive thoughts or images of losing the child
 - Avoidance of activities once enjoyed with the child
 - Difficulty connecting with others (including family or friends) after the loss of a loved one

Reproductive Complicated Grief after Experiencing Miscarriage (N=578)



- 54% of the respondents exhibited reproductive complicated grief
 - 42% were male (n=128)
 - 59% were female (n=185)

- Negative reproductive complicated grief
未有出現複雜哀傷的情況
- 出現複雜哀傷的情況
Positive reproductive complicated grief

Depressive Emotions of Couples After Miscarriage (N=241)

34.2% of couples/ one partner exhibited moderate or higher levels of depressive symptoms



n=159 (66%)

Both partners had no depressive symptoms



n=17 (7.1%)

The husband had moderate or higher levels of depressive symptoms



n=41 (17%)

The wife had moderate or higher levels of depressive symptoms



n=24 (10%)

Both partners exhibited moderate or higher levels of depressive symptoms

Complicated Grief of Couples After Miscarriage (N=240)

68.8% of couples/ one partner exhibited reproductive complicated grief



n=75 (31.3%)
Both partners no
reproductive
complicated grief



n=18 (7.5%)
The husband
exhibited
reproductive
complicated grief



n=59 (24.6%)
The wife exhibited
reproductive
complicated grief



n=88 (36.7%)
Both partners
exhibited
reproductive
complicated grief

Within a Year of Miscarriage, the Couple's **Depressive Emotions** (N=43)

46.5% of couples/ one partner exhibited moderate or higher levels of depressive symptoms



n=23 (53.5%)

Both partners had no depressive symptoms



n=7 (16.3%)

The husband had moderate or higher levels of depressive symptoms



n=9 (20.9%)

The wife had moderate or higher levels of depressive symptoms



n=4 (9.3%)

Both partners exhibited moderate or higher levels of depressive symptoms

After a Miscarriage for **Over a Year**, the Couple's **Depressive Emotions** (N=198)

31.4% of couples/ one partner exhibited moderate or higher levels of depressive symptoms



n=136 (68.7%)

Both partners had no depressive symptoms



n=10 (5.1%)

The husband had moderate or higher levels of depressive symptoms



n=32 (16.2%)

The wife had moderate or higher levels of depressive symptoms



n=20 (10.1%)

Both partners exhibited moderate or higher levels of depressive symptoms

Within a Year of Miscarriage, the Couple's **Complicated Grief** (N=43)

86.1% of couples/ one partner exhibited reproductive complicated grief



n=6 (14%)

Both partners no
reproductive
complicated grief



n=5 (11.6%)

The husband
exhibited
reproductive
complicated grief



n=10 (23.3%)

The wife had
moderate or higher
levels of depressive
symptoms



n=22 (51.2%)

Both partners
exhibited
reproductive
complicated grief

After a Miscarriage for **Over a Year**, the Couple's **Complicated Grief** (N=197)

65% of couples/ one partner exhibited reproductive complicated grief



n=69 (35%)

Both partners no
reproductive
complicated grief



n=13 (6.6%)

The husband
exhibited
reproductive
complicated grief



n=49 (24.9%)

The wife had
moderate or higher
levels of depressive
symptoms



n=66 (33.5%)

Both partners
exhibited
reproductive
complicated grief

Dyadic Coping and Couple's Depressive Emotion (N=240)

n=16 (66.7%)



Both partners exhibited moderate or higher levels of depressive symptoms

Couples **without** mutual high level dyadic coping



n=101 (42.1%)

n=7 (41.2%)



The husband had moderate or higher levels of depressive symptoms

n=21 (51.2%)



The wife had moderate or higher levels of depressive symptoms

Dyadic Coping and Couple's Complicated Grief (N=239)

n=42 (47.7%)



Both partners exhibited reproductive complicated grief

Couples **without** mutual high level dyadic coping



n=102 (42.7%)

n=12 (66.7%)



The husband exhibited reproductive complicated grief


n=24 (41.4%)



The wife exhibited reproductive complicated grief

Research Conclusion

- This study reveals that 10% of couples experience moderate to severe depression symptoms jointly after pregnancy loss. Over 50% of the couples demonstrate signs of complicated grief, may requiring psychosocial support despite temporal improvement.
- Reproductive Complicated Grief manifests as a persistent state of intense mourning following pregnancy loss. It significantly impairs daily functioning and is characterized by profound sorrow, emotional distress, and recurring thoughts about the loss.
- Depression should not be the sole indicator when evaluating mental health among clients with pregnancy loss. Reproductive complicated grief often provides a more accurate reflection of the psychological state of couples who experience pregnancy loss.



Couple's Interdependence in Grief and Coping After Pregnancy Loss in Hong Kong Clinical Implication

Prof. Paul Wai Ching WONG

Associate Professor, Department of Social Work and Social Administration,
The University of Hong Kong

Principle Investigator, Jockey Club Perinatal Bereavement Care Project

Clinical Recommendations for Miscarriage Counseling

- During clinical assessment and counseling processes, in addition to paying attention to depressive symptoms, it is important to also focus on the **grief reactions** of couples who have experienced miscarriage
- It is recommended to inquire about the **reproductive history** and evaluate any unresolved grief and trauma from the past. While some partners may experience a reduction in grief over time following a miscarriage, there are also cases where the grief persists for years and continues to cause distress for the couple. If these traumas are not properly addressed, they have the potential to affect individual emotional health and even the relationship between the couple

Clinical Recommendations for Miscarriage Counseling

- Assisting couples who have experienced miscarriage through a **trauma-informed approach** (Traumatic Lense) involves normalizing and validating their grief experiences. The process requires focusing on the subjective feelings of the miscarriage parents and providing timely and ongoing counseling to help them gradually move through their grief and rebuild emotional well-being
- **Creating a healing space for grief:** It is important not to rush to "fix" the grief resulting from miscarriage as the pain of losing a child may linger for a long time. Establishing a trusting and collaborative counseling relationship allows parents who are still grieving to have space to accept, face, and process their pain

Advice for Couples Coping with Miscarriage

- **Shared Loss:** Facing and dealing with the pain of loss together
- **Openness & Honesty:** Maintaining transparency in emotions and sharing feelings with each other
- **Vulnerability:** Allowing oneself to express vulnerability and insecurity
- **Partner Understanding:** Understanding each other's feelings and needs
- **No Blame:** Avoiding blame and criticism, focusing on support and understanding
- **Acceptance of Differences:** Respecting each other's different feelings, understanding and accepting that everyone has their own way of grieving
- **Time Together:** Setting aside time for just the two of you
- **Need Others:** If needed, seek help from friends, family, or professionals

Advice for Family and the Public

- How to assist parents experiencing miscarriage in post-traumatic growth:
 - Encourage self-sharing: When parents who have experienced miscarriage are willing to share their experiences and feelings, it is crucial for them to receive understanding and support from others. This helps them recover and grow from the trauma.
 - Provide positive social support: Miscarriage is a form of disenfranchised grief, where friends, family, or society can talk and share this experience with parents, helping them feel understood and accepted. Avoid deliberately avoiding or denying their desire to talk about miscarriage
 - Allow parents to repeatedly share their loss experiences: Parents often gradually re-understand and accept the experience of losing a child through repeated sharing of the miscarriage experience, thus integrating this trauma into their life journey, helping them rebuild their lives.



Jockey Club Perinatal Bereavement Care Review and Forecast

Mr Chris Ngai Ling NG

Department of Social Work and Social Administration, HKU
Project Manager, Jockey Club Perinatal Bereavement Care Project

Jockey Club Perinatal Bereavement Care Project Review

- With the support of the Hong Kong Jockey Club Charities Trust, Department of Social Work and Social Administration at the University of Hong Kong, in collaboration with the Family Wellness Center of the Hong Kong Young Women's Christian Association and Grace Port – Caritas Miscarriage Support Centre, Caritas-Hong Kong, has successfully concluded a three-year pilot project.
- The online support platform dedicated to the project at the University of Hong Kong has seen over 74,000 views of psychoeducational information by bereaved parents and their relatives and friends. Information on miscarriage has reached over 560,000 people through social media, and the professional learning platform for helpers has recorded over 1,500 views.

Feedback from service users

- Preliminary results show that:
 - 82% of bereaved parents reported an improvement in emotional distress related to miscarriage after browsing the website content
 - 100% of helping professionals indicated that the learning platform enhanced their confidence in supporting bereaved parents
- Users found the following five types of content most helpful:
 - Information on miscarriage and grief
 - Peer-sharing videos
 - Online learning platform for helping professionals
 - Sky lanterns of love (online memorial for children and expression of support)
 - Service referrals and advice for relatives and friend

Project Symposium cum Closing Event

- Jockey Club Perinatal Bereavement Care Project Symposium cum Closing Event, Healing Together: Creating Compassionate Community Networks for Perinatal Bereavement Care
- This event brings together research, storytelling, and professional expertise to foster healing and support for bereaved families, it is going to be an insightful and compassionate event dedicated to understanding and addressing the challenges faced by couples after pregnancy loss.

Organized by  Department of Social Work and Social Administration, The University of Hong Kong, 香港大學社會工作及社會行政學系

Funded by  香港賽馬會慈善信託基金, The Hong Kong Jockey Club Charities Trust

 Jockey Club Perinatal Bereavement Care Project 賽馬會「小足·福」失胎支援計劃

Project Symposium cum Closing Event

Healing Together: Creating Compassionate Community Networks for Perinatal Bereavement Care

Join us for an insightful and compassionate event dedicated to understanding and addressing the challenges faced by couples after pregnancy loss. This event brings together research, storytelling, and professional expertise to foster healing and support for bereaved families.

Keynote Speech	Micro Film Screening	Presentation	Practice workshop
Couple interdependence on Grief and Coping after Pregnancy Loss by Prof Celia Chan	"A Child Who Has Never Seen the World" 	The impact of pregnancy loss on couple intimacy by Ms Elaine Chan	(1) Art Healing for Bereaved Couples by Ms Kathy Wong (2) Multiple-Contingent Service Delivery Mode for the couples after pregnancy loss by Ms Elaine Chan

Speakers:



Prof Celia Chan
Professor,
The University of Melbourne



Ms Elaine Chan
Service Supervisor,
Caritas - Hong Kong



Ms Kathy Wong
Senior Counsellor,
YWCA



Prof Paul Wong
Associate Professor,
HKU

Moderator:



Prof Paul Wong
Associate Professor,
HKU

Date: 15th January 2025 (Wed)
Time: 2:30 pm to 5:30 pm
Venue: CPD328, Jockey Club Tower, Centennial Campus, HKU
Target: Healthcare professionals (including doctors, nurses and midwives), clinical psychologists, social workers, counselors, pastors, individuals who are interested in perinatal care or support services, and bereaved parents.
Language: Cantonese

Registration: 

Partnering Organization  香港賽馬會慈善信託基金  香港賽馬會慈善信託基金  香港賽馬會慈善信託基金

Project Symposium cum Closing Event

- Date: 15 Jan 2025 (Wed)
- Time: 2:30 pm - 5:30 pm
- Venue: CPD 328, Centennial Campus,
The University of Hong Kong
- Language: Cantonese

Registration:



- Registration link:

https://hku.au1.qualtrics.com/jfe/form/SV_5hvhBSj9b3KXvtc

Moving forward

- Public awareness of miscarriage issues has increased, and it is hoped that this attention will continue, so that bereaved parents no longer have to face their loss in silence and isolation.
- Through academic research and professional training, experiences and services related to miscarriage will be shared with medical and social welfare professionals, continuously enhancing the support capabilities of hospitals and communities.

Enquires

Mr Chris Ngai Ling NG

Department of Social Work and Social Administration, HKU
Project Manager, Jockey Club Perinatal Bereavement Care Project

Contact: 3917 5582

Email: chrisnnl@hku.hk