

Social Support Following Miscarriage: Impact on Outcomes of Grief and
Growth.

Frances Dunn

BA Hons (Psych), Grad Dip Ed Stud.

This thesis is submitted in partial fulfilment of the requirements

for the degree of Master of Clinical Psychology,

School of Psychology,

University of Newcastle, Australia

August 2013

STATEMENT OF ORIGINALITY

This thesis contains no material which has been accepted for the award of any other degree or diploma in any university or other tertiary institution and, to the best of my knowledge and belief, contains no material previously published or written by another person, except where due reference has been made in the text.

I give consent to this copy of my thesis, when deposited in the University Library, being made available for loan and photocopying subject to the provisions of the Copyright Act 1968.

.....

Frances Dunn

6 August 2013

Acknowledgements

I would like to acknowledge the assistance and support provided to me by the following people during the conduct of the research and the preparation of this paper.

Reverend Dr Martin Johnson, University of Newcastle, for his great store of knowledge, for the generous sharing of his experience, for his patient assistance and his skilful and supportive guidance. Reverend Dr Johnson also provided the data for this study, for which I am very grateful.

My family and friends for unending encouragement and support, especially my husband Michael whose wonderful emotional and practical support has made this study possible, my parents, children and other members of my family for their constant encouragement and support; it has been greatly appreciated.

Table of contents

Statement of originality.....	i
Acknowledgements.....	ii
Abstract.....	1
Extended literature review.....	3
Psychological responses to miscarriage.....	4
Miscarriage, stress and coping.....	5
Social support.....	8
Partner support.....	15
Support and sex differences.....	17
Growth after adverse experiences.....	20
Manuscript: Social support following miscarriage: Impact on outcomes of grief and growth.....	26
Abstract.....	28
Introduction.....	30
Method.....	36
Participants and sample characteristics.....	36
Procedure.....	37
Measures.....	37
Design.....	40
Results.....	40
Discussion.....	47
References.....	55
Tables.....	63

Table 1 – Demographic and pregnancy-related characteristics.....	63
Table 2 – Descriptive statistics with means: T1.....	.64
Table 2a – Descriptive statistics with means: T2.....	.65
Table 3 - Stepwise multiple regression of predictors of grief: T1 measures.....	66
Table 4 - Stepwise multiple regression of predictors of grief: T2 measures.....	67
Table 5 - Stepwise multiple regression of predictors of growth: T1 measures.....	68
Table 6 - Stepwise multiple regression of predictors of growth: T2 measures.....	69
References – Extended literature review.....	70
Appendices.....	78
Appendix A – Ethics approval	79
Appendix B – Demographic predictors of grief and growth.....	80

Abstract

Grief and growth are potential psychological sequelae of miscarriage but little is known about predictors of, or temporal changes in, these outcomes. This study aims to examine the impact of social support, partner support and marital satisfaction after miscarriage on the outcomes of grief and growth among women and men following unplanned pregnancy loss. Because social support is thought to facilitate the resolution of distress after trauma and to be associated with psychological growth we hypothesised that the use of support after miscarriage would be associated with improved outcomes in relation to grief and growth.

This study investigated predictors of grief and growth among 496 participants (248 couples) following miscarriage. Participants completed the following measures: the Significant Others Scale (SOS), Coping Response Inventory (CRI), Index of Marital Satisfaction (IMS), Perinatal Grief Scale (PGS) and Stress-Related Growth Scale (SRGS). Measures were taken at one and four months after miscarriage. The study employed a correlational design; data were entered utilising stepwise regression analysis. Grief and growth were taken as dependent variables in separate analyses. Sociodemographic characteristics and measures of support, marital satisfaction and coping were taken as predictor variables.

Favourable grief outcomes were associated with support satisfaction one month after miscarriage, marital satisfaction and coping style (with more use

of behavioural avoidance and less use of cognitive approach strategies predicting lower PGS scores). Growth was predicted by marital satisfaction. In unexpected findings a negative association was identified between support satisfaction and growth and no association was identified between coping style and growth.

These findings highlight the importance of social support and the quality of the marital relationship to individuals after miscarriage. Assessment by health professionals of salient aspects of support among individuals who have experienced miscarriage may lead to identification of those individuals who lack appropriate support resources and thus to interventions to enhance support which in turn could contribute to optimal psychological outcomes after miscarriage.