



Postpartum Wellness and Safety Plan for Loss

This plan is your essential guide for navigating the difficult path of physical healing, intense grief, and emotional safety that follows an unimaginable loss. The greatest value is not the final document, but the intentional process of setting boundaries, acknowledging your pain, and securing your support circle before you need them. This plan recognizes that your body still needs to heal, your hormones will still shift, and your heart requires time and space to grieve.

Name:

Partner Name:

Due Date/Birth Date:

Hospital:

OBGYN/Midwife:

Doula:

SECTION 1: Safety & Crisis Contacts

CRISIS SUPPORT (24/7):

- Emergency Services: 911
- National Maternal Mental Health Hotline: Call or Text 1-833-TLC-MAMA (1-833-852-6262)
- National Crisis & Suicide Prevention Lifeline: Call or Text 988-for free, 24/7 emotional support. This service connects you to trained counselors in Hawaii and across the nation.

Your Therapist (Name and number):

Your Emergency Contact / Partner:

If you are having thoughts of harming yourself, call 911 immediately.

Postpartum Psychosis is a medical emergency that can happen to anyone following childbirth. If you experience sudden onset of hallucinations, delusions (seeing/hearing things that aren't there), severe paranoia, or rapid mood swings. Call 911 or go to your nearest emergency room.

Self-Safety Protocol for Intense Grief

This is a pre-determined plan for when you feel the grief is overwhelming your capacity to function safely.

1. Code Word/Phrase: If I text _____, they know to come over right away, no questions asked.
2. What to do if alone: I will go to the safest, quietest room and call _____ or 988. I will not be alone.
3. What to do with reminders: If a sight or sound triggers a trauma response, I will immediately practice the 5-4-3-2-1 grounding technique (or another specific coping skill).

SECTION 2: Support Team & Delegation for Logistics and Grief

These tasks are assigned to your support people to help you to manage logistics while you grieve.

External Communication: This person is assigned to manage texts/calls announcing the loss, directs people to your needed resources, and answers questions.

Logistics Manager: This person cancels appointments, returns or donates baby gear, manages mail, and contacts insurance/billing.

Household Chores (Dishes/Laundry):

General Home Care (E.g., Yardwork, Collecting Mail, Housekeeping):

Errands (Pharmacy/Supplies):

Emotional Check-ins Frequency/Type (e.g., Friend or family scheduled to check in daily at 7 PM asking for a 'real' answer, not just 'fine'):

SECTION 3: Memory Making, Rituals, and Funeral Planning

This section outlines the immediate steps to be taken for memorializing your baby and addressing the necessary logistics for final arrangements.

A. Memory Making (Immediate Plan)

These are the immediate memories you wish to capture, either in the hospital, at home, or with a professional. Communicate this list to your designated support person to manage coordination.

- **Photos:** I want photos taken by:

Now I lay Me Down to Sleep (NILMDTS) donates, professional photographers, and editing

- Support Person to Coordinate:

- **Hand/Footprints/Molds:** I would like ink prints and/or clay molds made.

- Support Person to Coordinate:

- **Locks of Hair:** I would like a small lock of hair collected.
 - Support Person to Coordinate:
- **Specific Keepsakes:** I would like the keepsake item:
 - Support Person to Coordinate:
- **Other:**

B. Funeral, Disposition, and Ritual Planning

These logistical tasks are to be managed by your assigned Logistics Manager (Section 2).

*Be sure to leave the hospital with the birth and death certificate.

- Disposition (Burial/Cremation):
 - Support Person:
- Funeral Home/Cemetery:
- Type of Service:
- Financial/Fundraising:
 - Decision: [GoFundMe/Support Fund / None]
 - Support Person:
- Obituary/Announcement (if desired): (Who will write and submit the announcement)
- Date/Timeframe for Service:

SECTION 4: The NESTS Daily Wellness Plan

Discuss how each partner will meet the needs of Nutrition, Exercise/Movement, Sleep, Time for self, and Support daily.

Nutrition- Remember: Balanced diet, high protein, lots of water. Limit caffeine, especially after noon, to support better sleep.

Allergies/Diet Preference:

Meal Planning & Delivery Logistics:

- Who will primarily handle the cooking/ordering?
- We Plan to:
 - Have meals prepared ahead of time and stored in the freezer
 - Have a Meal Train set up- Link:
 - Order in _____ times a week
- Preferred Delivery Services/Take-Out:
 - Grocery Delivery Service:
 - Food/M meal Delivery Services: Good Clean Food Hawaii, Malama Meals, Uber Eats, etc.
 - Favorite Quick & Easy Family Meals:

Exercise and Movement- Start small:(e.g., walking).

Preferred "Start Small" Activity:

Other activities (after being cleared from OB):

Sleep and Rest- prioritize consistent sleep routines to help your body and mind heal.

Time for YOU- Find things you enjoy. A few minutes a day helps. Include fresh air, sunshine, and laughter.

My Daily Self-Care (5 minutes is enough):

Partner Daily Self-Care:

Activities for rest, renewal, and re-energizing:

Support-

- Friends and family:
- Therapy or medication:
- Support groups and parent groups:
 - Locally: Mali Bella, Let Grace In
 - Virtual: Compassionate Friends, Star Legacy, MEND, Bereaved Parents USA

SECTION 5: Emotional Health

How do you both cope with stress and fatigue now?

What are some personal warning signs that might indicate you're feeling overwhelmed and need some self-care and or more support?

Here are some ideas:

- Persistent feelings of guilt or shame
- Trouble sleeping
- Withdrawing from my partner or friends
- Lack of interest in eating/drinking
- Intrusive thoughts that cause high distress or fear

Other Signs (Specific to me):

Code Word_____To signal being overwhelmed and needing support/space.

If I feel HIGH STRESS, I will immediately do this:

Perinatal Mental Health Warning Signs

The postpartum period—even after a loss—involves significant physical and emotional recovery and you can still experience all of these conditions.

Condition	Warning Signs to Look For	When to Call a Professional
Complicated Grief	Persistent, intense yearning/longing for the baby that does not ease; feeling life is meaningless; avoiding reminders of the baby.	If intense symptoms persist past six months or interfere with functioning/sleeping.
Postpartum PTSD	Follows a traumatic birth/diagnosis. Symptoms include flashbacks of the event, nightmares, and extreme anxiety/hyper-vigilance.	If you experience nightmares, flashbacks, or panic attacks when thinking about the event.
Postpartum Depression	Persistent sadness, difficulty functioning, intense guilt, and intrusive thoughts of self-harm.	If symptoms last longer than two weeks and prevent you from eating, sleeping, or engaging in minimal self-care.
Postpartum Psychosis (PPP)	Sudden onset of hallucinations (seeing/hearing things), delusions (false beliefs), severe confusion, paranoia, and a break from reality.	Call 911 or go to the nearest emergency room immediately. This requires urgent hospitalization.

Relationship

Something that will help me feel connected/seen by my partner:

Activities/breathers for connecting as a couple:

Support Circle and Boundaries

Set clear, enforceable boundaries to protect your emotional energy.

We anticipate wanting (many / few) visitors:

Specific hours for guests to visit:

Visitor Policy: (e.g., Max 1 visitor/day, must call first, 1-hour time limit, Visitors must be there to *help*, not to ask questions. They must respect the need for silence.):

A. Communicating the Loss

- Preferred language to use for the baby: (Baby's Name) is my Son/Daughter.
- Preferred way to talk about the event: (Example: 'It was a stillbirth' / 'The baby died'):

B. Boundaries and Visitors

- Insensitive Comments: If an insensitive comment is made, I give myself permission to (Hang up, Leave the room, Say 'That is not helpful right now'):
- Other Boundaries:

Pre-Written Texts (To communicate needs quickly)

- Thank you for reaching out, I would appreciate a visitor today.
- Thank you for reaching out, I would appreciate a visitor today but not talk about my birth or baby.
- Thank you for reaching out, I need a little quiet time today and would appreciate you checking in tomorrow.
- Thank you for reaching out, would you be willing to help with the house/pets today.
- Thank you for reaching out, I would love to talk but not right now. I will be in touch when I'm ready.
- Thank you for offering to help. This is the link to our meal train which also offers gift cards and delivery services for people who live far away:

SECTION 6: Physical Healing

A. Physical Healing Supplies

Hospital Stay Logistics:

Healing Supplies (To be prepared ahead of time):

- Rice bag or heating pad for after pains, cooling pads/Padsicles for the perineum
- Comfortable, extra-large, dark-colored panties/lounge clothes.
- Other Essential Supplies:
- Pelvic floor therapist:

B. Hormonal Shifts

You may experience intense hormonal fluctuations as your body returns to its non-pregnant state. These shifts can mimic severe mood swings or depression.

- Acknowledge: I acknowledge that sudden, intense sadness, anger, or anxiety are hormonal and are not a reflection of a failure to cope.
- Action Plan: When these hormonal peaks occur, I will contact my support person or therapist for grounding and support.

C. Milk Management (If Applicable)

Chosen Path (Circle One)

- Path A: Suppression (Goal: Stop milk production immediately)
- Path B: Donation/Expression (Goal: Express milk for donation or keepsakes)

Lactation provider to support me on my chosen path:

SECTION 7: Older Sibling/s Plan

Navigating a perinatal loss with older children requires clear, age-appropriate honesty, emotional validation, and stable routines. This section of the plan helps layout logistics for your older child and ways to help with understanding what happened as they are beginning to grieve.

Logistics

Labor & birth plan for older children:

Person in charge of children during Labor/Birth (Name, Contact):

Support team for older children (Postpartum):

School/Child Care (Name, Number):

Morning/Drop-off care (Role, Name, Contact):

Afternoon/Pick-up care (Role, Name, Contact):

Homework/Playdate help (Role, Name, Contact):

Favorite snacks:

Favorite meals:

Favorite shows/games/books:

Sibling Grief Planning and Processing

Hospital Visit and Meeting the Baby

Are you planning for siblings to have an opportunity to meet the baby?

If children are planning to visit, please have a separate support person with them. Be sure to communicate with the support person how you want them to answer questions the children may have.

Preparing them to visit:

- Discuss what the baby may look like.
- Talk about how the adults in the room may be acting during that time.
- Discuss appropriate behavior for the hospital.
- Decide if they will get to hold and or touch the baby and how that will go.
- Talk about saying goodbye to the baby.

Core Conversations

It's helpful for the parents and support people to be clear on what language feels appropriate for your family to communicate to siblings about what is going to happen

- **Honesty about the Baby's Status:**
 - State clearly, using age-appropriate language, that _____ will not be coming home to live with us.
 - Explain where the baby is based on your family's beliefs (e.g., "The baby is in heaven," "We buried the baby in the cemetery," or "We keep the baby in our hearts").
 - Be sure to have people with them who are familiar with the terminology you have decided on regarding death.
- **Validating Their Feelings:**
 - Give the child permission to feel sad, confused, angry, or even okay, ensuring them that **all feelings are welcome**.
 - Model grief by letting the children see the adults cry and talk about the baby's name.
- **Explaining Physical Recovery:**
 - Explain that the recovering parent's body still needs time to heal (like a big injury) even though there is no baby at home. This manages confusion if the parent is tired or sore.
- **Memory and Rituals:**
 - Establish a specific way they can participate in remembering the baby (e.g., lighting a candle, looking at a special photo, talking about the baby at dinner).
 - Allow them to choose a keepsake item or draw a picture for the baby.
- **Reassurance of Stability:**
 - Reassure them that *their* core routine (school, specific caregiver, bedtime) will be kept as stable as possible.

Books for Children

- Something Happened: A book for children and parents who have experienced pregnancy loss. By Cathy Blanford
- We Were Gonna Have a Baby, but We Had an Angel Instead. By Pat Schwiebert
- My Sibling Still: For Those Who've Lost a Sibling to Miscarriage, Stillbirth, and Infant Death. By Megan Lacourrege
- What Happens When We Die? By J.R. Becker
- Katrina Villegas series for children experiencing sibling loss due to medical termination
 - Our Baby Died
 - Our Baby is Going to Die
 - The Baby Before you Died
 - Remembering Our Baby

SECTION 8: Pet Care Plan

This section ensures the needs of your family pets are met consistently during the postpartum adjustment period.

Labor & Birth Plan for Pets (If applicable):

Pet Care during Labor (Name, Contact):

Support Team for Pets (Postpartum):

Daily Walks/Exercise (Task, Name, Contact):

Feeding/Watering (Task, Name, Contact):

Litter Box/Waste Management (Task, Name, Contact):

General Pet Information:

Pet Name(s):

Feeding Routine (Type/Time):

Bathroom/Walk Routine:

Veterinarian Name & Phone: