

Grandparent Survey

Bereaved parents and grandparents frequently report that their greatest long term concern is that others will forget their child. As time passes, grandparents often search for ways to incorporate their dead grandchild into their family in a manner which permits recognition and remembrance. This is particularly difficult in the case of a baby who died during pregnancy or shortly after birth. The purpose of this survey is to collect information on how families with a perinatal loss include their child. Our intention is to share the findings by publishing articles and developing workshops for bereaved families and care providers.

You may print and mail your response, or send it by e-mail. Any e-mail names or return addresses will be removed in order to protect your confidentiality.

Thank you for sharing your grandchild and your family through this survey.

1. I am a bereaved: _____ grandmother _____ grandfather
2. At the time of the loss, my grandchild's mother was _____ number of weeks pregnant.
_____ Infant died at birth
_____ Infant died after birth but before 4 weeks old
3. I identify with the following group(s):
_____ Caucasian
_____ African American/Black
_____ Hispanic
_____ Native American
_____ Asian
_____ I choose not to identify with any of these groups
4. The year of your loss _____ My age _____
5. Do you have pictures of your grandchild? _____ Yes _____ No
6. If so, do you display them in your home? _____ Yes _____ No
If yes, which rooms?
7. Do you carry a picture in your wallet? _____ Yes _____ No
8. Do you wear any jewelry that symbolizes your baby? _____ Yes _____ No
If yes, what?
9. How do you respond when asked if you have grandchildren, or how many grandchildren you have?
10. Are there certain days where you feel a need to do something special to honor and remember your grandchild? Please check all that apply.
_____ Grandchild's birth date
_____ Grandchild's due date
_____ Grandchild's death date
_____ Mother's Day
_____ Father's Day
_____ Winter holidays (i.e. Christmas, Hanukkah or Kwanzaa)
_____ Other-write in _____
If so, what do you do?

11. Do other family members acknowledge your grandchild on significant days?

_____ Yes _____ No

If yes, what do they do?

12. Please describe anything else you do or have done to recognize your grandchild's place in your family

If you are willing to be contacted for future surveys, please send a separate e-mail with your e-mail address to: nben-nett@christianacare.org.