



## Empty Arms Vermont

Empty Arms Vermont provides peer support to individuals and families whose babies have died through miscarriage, stillbirth, early infant death, or termination for medical reasons.

- 20-25% of all pregnancies end in a loss
  - **1 in 4 pregnancies end in grief**
- Risk of suicide and substance abuse increases after perinatal loss.
- The existence of mental health problems is also an added risk factor for poor fetal outcomes during a subsequent pregnancy.
  
- Social support plays a role in buffering the effects of trauma in mediating stress after bereavement.
  
- Any intervention that allows birthing people to express their emotions and retell their stories helps to decrease depression, self-blame, and trauma.



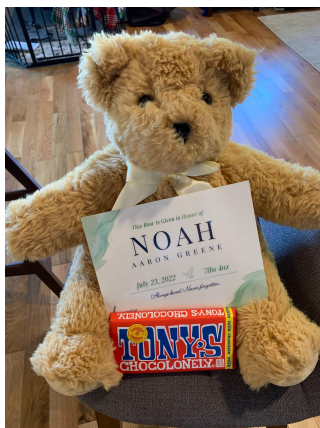
Bereaved birthing parents have

**4X greater odds of major depression and seven times greater odds of post-traumatic stress disorder** than non-bereaved birthing parents.



## Strengthening Peer Support for Pregnancy & Infant Loss

Empty Arms Vermont provides peer support to individuals and families whose babies have died through miscarriage, stillbirth, early infant death, or termination for medical reasons.



**Kendra and Ben** came to the Empty Arms community after the death of their son, Noah, during birth. We quickly sent their family a care package and weighted bear in memory of Noah. Kendra joined a monthly support group and continued attending through a subsequent pregnancy. At the annual Remembrance Night, their living son got an opportunity to make a luminary for Noah and participate in a kid-friendly activity about grief language. Their family welcomed another baby girl into the family in December. Kendra now pours her love for Noah and this community by leading our monthly yoga classes for grief and loss.

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**50**  
support groups  
**8**  
facilitators



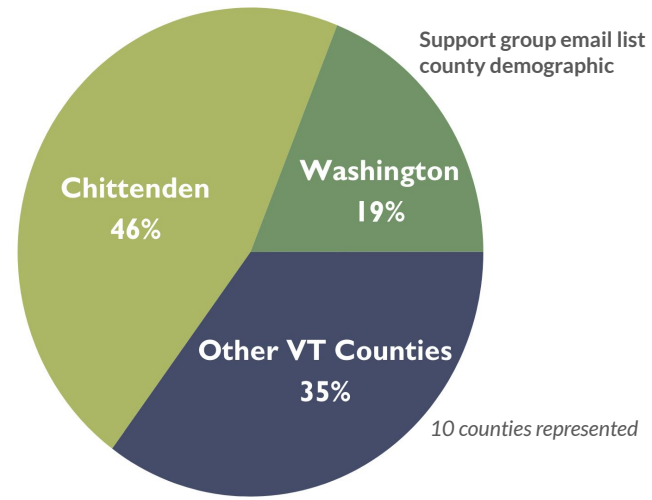
**61**  
unique support  
group participants



**10**  
yoga classes  
**32**  
unique participants



**35**  
mailed care packages  
**100**  
miscarriage support bags





## Strengthening Peer Support for Pregnancy & Infant Loss

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“Mental health services for pregnancy loss in Vermont are inadequate and there are no statewide funded supportive programs for perinatal loss. Currently, Empty Arms Vermont is the only organization offering statewide virtual and in-person supports for perinatal loss.” (*VDH Maternal Mortality Review Panel 2024 Report*)



**Legislative Funding Proposal:** To secure one-time funding of \$40,000 for two years to expand operational capacity so that we have the personnel resources and time to scale up programs and develop a long-term plan for sustainable funding.



**Update:** Empty Arms Vermont has been engaged in initial conversations with the House Human Services and Health Care Committees on the need for strengthening perinatal loss peer support and are ramping up our advocacy efforts as we look toward the FY 25 budget.

## Can you help by contacting a representative that you know?

### HUMAN SERVICES COMMITTEE

Theresa Wood	Waterbury
Jessica Brumsted	Shelburne
Anne Donahue	Northfield
Rey Garofano	Essex Town
James Gregoire	Fairfield
Noah Hyman	South Burlington
Jubilee McGill	Bridport
Daniel Noyes	Wolcott
Kelly Pajala	Londonderry
Taylor Small	Winooski
Dane Whiteman	Bennington

### HEALTH CARE COMMITTEE

Lori Houghton	Essex City
Daisy Berbeco	Winooski
Joseph Andriano	Orwell
Alyssa Black	Essex Town
Brian Cina	Burlington
Mari Cordes	Lincoln
Allen "Penny" Demar	Enosburgh
Bobby Farlice-Rubio	Barnet
Leslie Goldman	Rockingham
Topper McFaun	Barre Town
Arthur Peterson	Clarendon

### APPROPRIATIONS

Lynn Dickinson	Saint Albans Town
Tiff Bluemle	Burlington
Patrick M. Brennan	Colchester
Kari Dolan	Waitsfield
Jim Harrison	Chittenden
Rebecca Holcombe	Norwich
Diane Lanpher	Vergennes
Marc B. Mihaly	Calais
Woody H. Page	Newport City
Robin Scheu	Middlebury
Trevor Squirrell	Underhill
Tristan Toleno	Brattleboro



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## Future Growth Outlook

With the proposed state funding, our aim is to strengthen operational capacity to develop long-term sustainability. This will yield an increase of service delivery, strengthen statewide communication, and establish sustainable revenue sources.



Maintain a statewide database of perinatal health providers and track communication.



Increase the number of facilitators & affinity support groups

*(such as Dads & LGBTQIA+ support)*



Increase private funding for long-term sustainability.



Provide facilitator care through mental health first aid training and an annual retreat.



Strengthen program communication to all 14 Vermont counties

## 2023 SNAPSHOT

### TANGIBLE SUPPORTS

35 Care Packages  
5 Weighted Bears  
100 Miscarriage Support Bags

### SUPPORT GROUPS & EVENTS

5 Support Groups  
Remembrance Night Event  
5K Community Event  
10 Yoga Classes

### STATEWIDE OUTREACH

Mailed outreach to 5 provider offices

### FACILITATOR & VOLUNTEER CARE

Regional retreat, virtual training

### HOSPITAL COMPANIONSHIP PROGRAM

No program established

## 2024 EXPANSION

### TANGIBLE SUPPORTS

↗ **60** Care Packages  
↗ **10** Weighted Bears  
↗ **400** Miscarriage Support Bags ↗ ↘  
*Expand to 4 more OBGYN practices*

### SUPPORT GROUPS & EVENTS

↗ **7** Support Groups  
Remembrance Night Event  
5K Community Event  
↗ **15** Yoga Classes

- ⊕ In-Person “Fireside Chats” in varying counties
- ⊕ Community member retreat
- ⊕ Remembrance Night satellite location

### STATEWIDE OUTREACH

↗ Mailed outreach to **40** provider offices

### FACILITATOR & VOLUNTEER CARE

Regional retreat, virtual training

- ⊕ Mental health first aid training
- ⊕ Volunteer appreciation

### HOSPITAL COMPANIONSHIP PROGRAM

- ⊕ Receive training for hospital companionship program
- ⊕ Provide hospital companionship at 2 hospitals