

Birth & Bereavement Support

Training & Certification



serving millions of families globally since 2011 2025+ edition

Adventure Learning Course Requirements

Tuition & Written Essay

Submit a brief essay, sharing your personal and/or professional experiences with birth and/or with death. This can be done in your Admissions group.

8 Module Class Participation

At the start of class, you will be given access to the stillbirthday private classroom online forum, and you will receive electronically all reading materials needed for successful completion of the class.

Each of the 8 chapters requires a four hour commitment of reading, researching, evaluating and responding. Each chapter concludes with a corresponding open book posttest (no more than 10 questions).

Community Research Project

A detailed investigative and assessment project is required for participants seeking the SBD credentialing. Investigate your local community and collect data to submit to stillbirthday, including the support services in place in local hospitals, birth centers, and by midwives, ultrasound technicians, nurses, obstetricians, funeral homes, crematoriums, and any other prenatal or bereavement personnel, organizations or businesses.

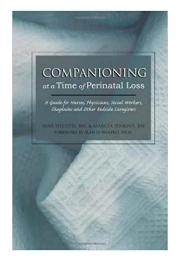
At its simplest, this is a collection of resources you might present to the clients you serve. You'll arrange these resources in the way that is best for you and your clients. Some of our SBD doulas intend to serve primarily live birth outcomes being prepared for any outcome, while other SBD doulas intend to market their professional services primarily to families enduring a known or anticipated infant demise. We discuss the differences and similarities of these approaches in our training, so you'll be equipped to have an idea of how to shape your Community Project at the completion of the online training. Students have compiled their Community Project into a brochure, as a page on their website, and have created entire social media groups to hold their expanding resources; here is a website-style example.

Two Reflection Guides

Two book reviews must be submitted no later than 6 months following entrance into the class, to obtain SBD certification. You'll select two books from our reading list, and will compose your Reflection Guide on each book, including a general thesis of the book's principles, coupled with any personal, reflecting thoughts you have on the value of the book.

There's no requisite structure for your book reviews, aside that each should be 1-2 pages in length. You aren't judged by your interpretation of the book. Students often select one book with a primary birth emphasis and the other with a primary bereavement emphasis.

If you are pursuing earning nursing contact hours, one of your two book reviews will be on the title "Companioning at a Time of Perinatal Loss".



It is strongly encouraged that you submit these 3 assignments together, to <u>Heidi.faith@stillbirthday.com.</u> Although each is recorded in the student records as you submit them, due to volume I am generally unable to respond to your emails individually when these items are submitted individually.

Timeline

It is a reasonable expectation that each module will be successfully completed within a one-week timeframe, and that your Final Tasks will be completed and submitted within 6 months from the date of your enrollment.

No *contact hours* will be awarded beyond 6 months from the start of your course. Once you have completed the course, you will be given a brief evaluation to complete. Your certificate of completion reflecting earned contact hours will be available to print after that time. No contact hours will be awarded for this activity beyond February 8, 2027. We will reapply at that time to continue to offer nursing contact hours through the Midwest MSD.

Class Content by Week

One:

Complete study of gestation and conception, integrated with exposure to personal, spiritual, cultural responses to pregnancy and to pregnancy loss, including an exposure to pre- perinatal psychology. Participants will be exposed to the importance of identifying opportunities to provide holistic, preperinatal and early obstetrical care.

Learners will be able to:

Combine prenatal specific information with thanatology.

Identify connections between cultural, religious and personal values a patient may place on conception and gestation and the values the patient may place on prenatal loss.

Describe how value system identification contributes to the construction of a patient-appropriate, holistic and integrated response.

Identify currently unmet needs by those receiving prenatal care.

Discuss how to apply a holistic approach to their patients.

Two:

Study of prenatal development through weekly physical changes, coupled with identifying the personal, spiritual and cultural variables in a mother's emotional response to pregnancy and to pregnancy loss at any point in pregnancy. Participants will be exposed to the importance of identifying opportunities of providing wraparound support to any mother experiencing pregnancy loss at any point in pregnancy.

—Prenatal bonding per month, especially for known fatal diagnosis and "rainbow" babies

-How miscarriage and stillbirth are like and unlike live birth emotionally and physically/signs & stages of labor in all trimesters

Learners will be able to:

Interpret patient responses at any point during pregnancy when prenatal demise has been determined.

Modify their treatment approach of the patient depending on their response.

Three:

Study of the processes of childbirth, of medicinal options for childbirth, and how these compare and contrast during birth in any trimester.

Hospital admission through discharge:

-Medical options and why some are different in loss

-Special permissions, "releasing" baby, funeral planning

Four:

Study of the processes of childbirth, of non-medical options for childbirth, and how these compare and contrast during birth in any trimester.

Non-medical options:

-General and specific to loss-including homebirth and emergencies

—Birth plans for all options and methods (medical and nonmedical combined)

Learners will be able to:

Discuss the processes of full term childbirth.

Describe similarities and differences in non-medical support provided for full term birth through assistance in any trimester and during pregnancy loss.

Five:

Study of emergency care of infant after birth, how to provide wraparound support for family.
—Prematurity info - the experience of baby and family: live miscarriage, fatal diagnosis
—NICU info - the experience of the baby and family: fatal diagnosis, one living multiple
—Multiples info - when any or all of the babies die

Learners will be able to:

Identify emergency situations that require NICU care.

Discuss the various outcomes from having a child in the NICU.

Specify the various individuals involved in the NICU bereavement process.

Describe the similarities and differences in the emotional and/or grieving process for all individuals experiencing a situation where a child is in the NICU

Six:

Study of postpartum care for newborn and mother, compare and contrast this postpartum care in any trimester.

Postpartum Care:

-Immediate physical postpartum care - lochia, breast milk, etc.

—Emotional postpartum care- enlisting family support, navigating medical records/results, etc.

Learners will be able to:

Discuss the physical and emotional process during the postpartum experience following a live birth.

Explain the postpartum physical and emotional process of a patient who experiences the loss of a baby full term.

Describe the similarities and differences in live birth and stillbirth outcomes.

Discuss how they impact the patient's grief. Identify methods to assist the patient through the grieving process.

Seven:

Study of postpartum emotional care, compare and contrast this postpartum care in any trimester. Explore emotional needs of each family member after pregnancy loss, and explore emotional needs of all professionals

who provide the family care during antepartum, intrapartum, or postpartum.

Grief Education and Support:

-Immediate grief - parents, siblings, SBD doula

-Upcoming grief - milestones, future pregnancies, etc.

Learners will be able to:

Identify numerous tangible and nontangible tools to help a patient through the postpartum and grief processes.

Identify methods to manage compassion fatigue and provider grief.

Eight:

Practical approaches of integrated knowledge gained into credentialed SBD doula, or into any already established professional position, including as a nurse, ultrasound technician, midwife, doctor, EMT, chaplain, social worker, perinatal hospice, or any other profession that may work directly with families during the pre-perinatal, antepartum, intrapartum, or early postpartum period.

While the first 7 chapters have a stronger, didactic, theory approach to each of the many significant aspects of care, this final chapter pulls every chapter together with real, practical application. It is the culmination and offers you the confidence to apply these concepts and tools into your role.

Learners will be able to:

Employ reasonable applications, approaches and methods of providing patient-specific care in any pregnancy and birth situation or outcome.



Financial Information

Earning the SBD credentials:

- means you are a part of a professional, reputable resource and team dedicated to providing the most comprehensive birth and bereavement support to families experiencing birth in any trimester.
- means your listing at the site will be in a highly noticeable location complete with profile photo (optional) and a short description of yourself.
- places you within our online group that encourages fellowship, continued education, and ongoing social, professional and educational benefits.

Payment Information:

Payment for enrollment is \$250 USD and can be made through the stillbirthday SBD doula <u>registration page.</u>

Contact Hours:

This nursing continuing professional development activity was approved by the Midwest Multistate Division, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.

Disclosure Information

No relevant financial relationships were identified for any member of the planning committee or any presenter/author of the program content.