## Something good enough

## Tamarin Norwood

Our middle child was 72 minutes old when the midwife listened for his heartbeat and heard no sound. His peaceful death was the long-anticipated conclusion of a pregnancy fraught with inconclusive scans and tests, and eventually a diagnosis of anhydramnios that put all ambiguity to an end. With no more amniotic fluid to help his lungs grow strong enough to breathe, we knew that his birth would be the death of him.

All the same, his perfect stillness in my arms appalled me. It was completely at odds with the reality I knew, which in turn began to feel unreal. All the people and things in the hospital room seemed to slightly lift and begin to float, barely perceptibly, from the surfaces they should have been resting upon. A little drift. It was as though the centre that had been holding us was suddenly insubstantial, and the drop in gravity cast everything subtly awry, gradually loosening the bonds between us, until our family found it possible to go back home, and strangers found it possible to come and go as though it were just an ordinary room, on an ordinary day, and not unreal at all.

Two women in scrubs stopped at the door and came into the room to admire our son, never mind his being dead. They appeared to know me and, although I could not place them, I was glad of the admiration. I wanted more people to come and see him. Anyone. I recognised the consultant we had spoken to a month before; she had seen my name on the whiteboard and wanted to say hello. Another woman brought a clipboard with the autopsy consent form. I was still holding our son in my arms, and there was a moment's deliberation as she hesitated with the clipboard held aloft and I transferred him to my husband's arms. The neatness of the exchange—a dead baby for his autopsy consent—had an unnerving symmetry; a horror all resolved when she thanked us and said goodbye, and added that she was sorry for our loss. With these words she became somebody who loved him too, and whom I could easily love. Still drowsy with feeling, I loved all the people who came to see our son.

There were so many things to be done now he had died, and by so many different people, that the room was seldom quiet again. Every time the door was opened and the curtain drawn aside, the cold and clatter of rooms and offices in the corridors outside were revealed with greater clarity. I felt the encroaching noise and cold as the tender pulling away of something essential—something like oxygen, or shelter, or the glow of some warmth that had held us until now. Perhaps this feeling came from deep inside me, from something in the death of a baby in its mother's arms that depletes the hormones and begins to cancel the synchrony that should have bound mother and baby for months to come.



I remember very little of the hours that followed. What memories remain are rounded and smooth and still as stones. By now I know them well. They are so worn with recollection that all their shape and roughness is long rubbed off, and only the most dense and silent parts remain.

I remember dressing our son in a new white sleepsuit never worn and much too big. I rolled his left sleeve until his little hand could be seen, and my husband the right. The cutting of hair. A little snip, close to his scalp; I was so afraid I would irreparably cut his skin for the millimetres of hair we would keep for proof. The pressing of palms and feet against treated card to make small prints. The midwife bringing an oval pill to suppress the production of breastmilk. It tasted bitter, medieval, an old wives' tale of a pill the colour of milk but in every way its opposite, and most of all so drydry enough to desiccate all the milk of those gentle hours that would have been ours. Without this pill I would overflow with need for him, or worse would be overfilled with need, breasts swollen thick and engorged with milk undrunk, love unspent, milk he would have loved to receive as my body would have loved to give it.

The smoothest of the stones is the memory of his bath. I can still lose myself in this memory. If I close my eyes my head falls and my body becomes loose remembering the looseness of his, the limbs moving through their joints as though with ease. There is a video I watch very rarely, as rarely as I open the bag his blue woollen hat is sealed inside, as though looking at the video like opening the bag would release his smell and it would go away. It

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is the only recording of any length we have, and it is a good recording. The floor of the room, the edge of an open cupboard, and then the bed move into view, the translucent plastic bath set upon absorbent sheeting before which I kneel while my husband stands beside me. The midwife is saying sorry that the water must be cold not warm. I am replying to her, and my husband is already silent, tending his son in the water.

In the water he is his most perfect, most comfortable, skin most clear, mouth and brow most at rest, legs floppily crossed in memory of the womb. All the loveliness of a baby. For once he just looks asleep. I watch my husband's hands. The heel of one hand rests on the side of the bath and the other works very softly at his son's hair, which we could say we are meant to be washing. A little work at his temple, neatening as if for a proud first day at school, and then his fingertips hold in the water a moment or two, and his other hand visits the legs and little toes, sees if there is cleaning to be done there, and then retreats to rest on the side again, soap suds up to his wrist. He lets me. My hands seem to know the baby, the right hand honoured to support his head, thumb stroking his hair, its incidental movement giving the impression of a baby all tired out and nuzzling in his sleep. I pluck his drifting hand from the suds to lay on his chest and it slips back into the water.

Over time I have come to understand that these memories of our son's birth and death were not formed by accident at all, but were crafted. They had been lovingly carved by the efforts of many, many people, some of whom we met in the hospital that day and some we never will, their part having been played long ago or far away.

Our son's death, and the deaths of babies like him, are so powerful they pull into their orbit not only the families that loved them and the midwives to their births and deaths, but nurses, consultants, researchers, advocates, women in scrubs at the door. And they are not pulled in by chance. Parents like us have been listened to again and again by these people. Our words and silences have been recorded and transcribed, anonymised, and interpreted by professionals who have watched grief descend many times and will have known that when our baby died everything would begin to lift and spin, and that we would cast out our hands desperate to reach for anything that might tether us, before we should drift out of reach even of ourselves and be lost.

In these moments we are, more than anything else, an aching lack of something to hold, and we will answer

that lack indiscriminately. Anything will do. The tiniest interaction, the briefest event, or expression, or decision for better or worse, might become the thing we hold and make our centre of gravity for a lifetime to come. The years ahead of us would turn on these moments. There were people who knew this—and thank goodness, because it meant they knew to put in our way something good. Something good enough. Something that would do. The clipping of hair, the printing of palms, the bathing, and patting dry, and putting into clothes.

It was a good simulation of a centre. Even now, at the distance of calm reflection, I still think it was love. Not a simulation of love, but actual love as it is manifested in institutions.

This is how you love. You write ethics protocols and data management plans. You learn the craft of writing questionnaires, of listening to parents, of analysing our words. You submit research funding applications pages long, you design interventions and test them, you publish your research and lobby and fight until the voices and silences of the parents spinning and turning in space can return to the labour ward clear and stable as care recommendations, as protocols, as policies. You review, you recruit, you train staff. Maddy—Maddy was the name of our midwife—she understood deeply the ways to choreograph our loss and not a bit of it was left to chance

When our baby died and I watched the gravity release its hold and everything begin to lift, she had been watching it too. All of the love that preceded her ensured she would help us gather a bundle of stones that we would be glad to turn our years around. There was no bringing back the simple wholeness of the life of our child, but for something manufactured, something created not in the dark and warmth of the womb but in the clattering offices and institutions outside, it was a good approximation. It was still a thing made of love.

These 3 years later, I am still held by the gravity of that afternoon. The orbit I travel around these stones continues to smooth the memories of that day: of our baby son, and the love of all those who came before him.

## Declaration of interests

I am collaborating (unpaid) with Held in Our Hearts, a baby loss charity based in Edinburgh, UK, to help develop creative writing resources for parents bereaved at birth. I convene the Lives in Medicine research network at the Oxford Centre for Life-Writing, University of Oxford, UK. I declare no other competing interests.

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