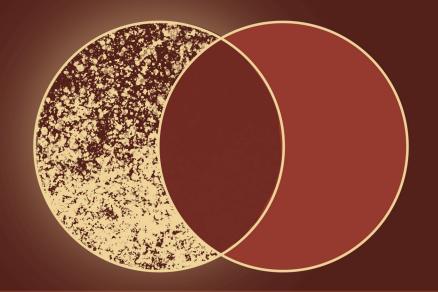
eclipse



Creating a ritual for women to grieve through reconnecting with their bodies after experiencing pregnancy loss

MASTER THESIS BY JIKKE VAN GIFFEN



eclipse

Creating a ritual for women to grieve through reconnecting with their bodies after experiencing pregnancy loss

> Master thesis By Jikke van Giffen

Design for Interaction Faculty of Industrial Design Engineering Delft University of Technology

> Part of Delft Design for End of Life Lab

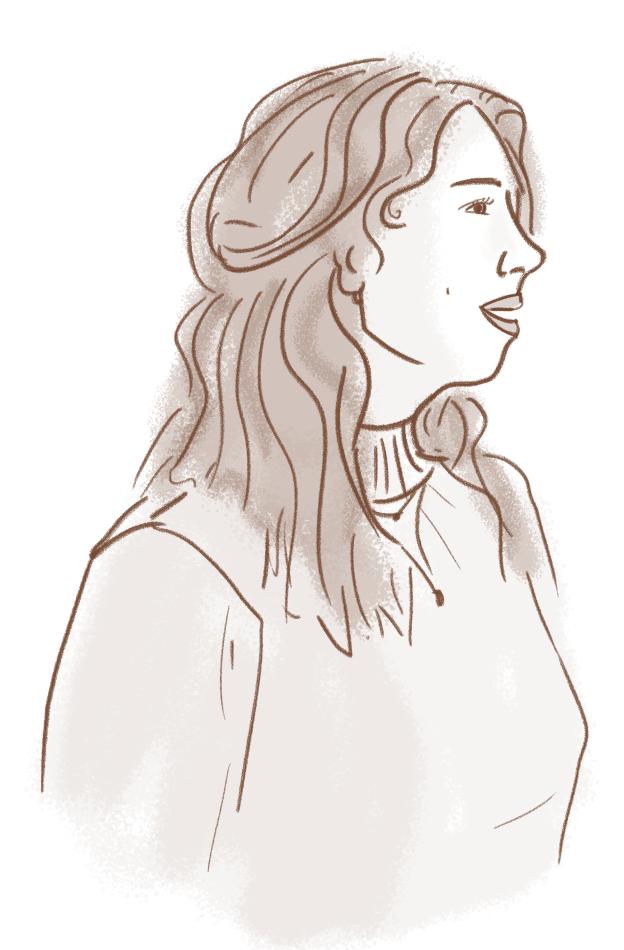
Supervisory team TU Delft Marieke Sonneveld Susie Brand - De Groot

In collaboration with Female Economy Lauren Rissik

Augustus 2023







If you are reading this, it means I made it till the end of my master's degree. Starting my studies in as an 18-year-old know-it-al, 8 years later, my time as a student and has come to an end. In this time, I was able to both expand my skills and knowledge as a designer as well as a performer. I am happy to share this thesis with you, which concludes my journey of both professional and personal growth in the years spend at, and outside of, the faculty of Industrial Design Engineering.

Truth be told, starting my studies, I did not want to become a designer. I wanted to become an actress. After my bachelor's, I explored theatre further. Although I was accepted for a cabaret school, I felt my design journey wasn't over. During my bachelor's, unexpectedly, I had developed a fondness for the design discipline. I decide to pursue a master's degree in Design for Interaction with the aim to combine my love for storytelling in theatre with design. Now, as I finish my studies at TU Delft, I'm grateful for the chance to blend both design and theatre in my graduation project, marking the end of my journey here.

I wish to thank my parents, **Matthijs** and **Karin**, for their support for both my passions in life. Trying to either chose or combine the two worlds of theatre and design has not been an easy route. Additionally, I want to thank my parents for the sharing of their story of loss, the loss of the brothers I have never met, **Hidde** and **Willem**. Their invisible yet felt presence in our family, inspired me to design the topic of pregnancy loss, resulting into this thesis. Mam, dad, thank you for being open about the loss of Hidde and Willem and supporting me in the choice to design for this kind of loss.

Marieke and Susie, thank you for the many feedback and mentoring sessions. I feel lucky to have received this level of involved and guidance throughout this graduation project. I want to thank Marieke for her honest feedback on the research, design and my (academic) writing. Although we often differ in opinion, I do value your wisdom and the lessons learned from the conversions had because of this different view. I thank Susie for her expert guidance and personal support throughout the project. Her insightful feedback enhanced the design's concept, aesthetics, and communication. I'm also grateful for our car conversations, offering a space for reflection on the project and our shared love for theatre.

Natasja Walst, thank you for the time you have spent on, and the faith you have given to, this graduation project. Your contribution not only lent credibility to this thesis and design, but also provided the necessary psychological foundation and stability.

Lauren Rissik, thank you for inviting me into your private life and providing me with your expertise in the discipline called theatre. Our conversations helped me to think about design from the perspective of a playwright and director. Additionally, you provided me with knowledge about the workings of the theatre world and realistic feedback on what is necessary to go from concept to reality.

I wish to also thank all the **experience experts** who shared their personal stories of loss with me and invited me into their homes. These contributions were of indescribable value. Thank you.

Lastly, I want to thank **Myron**, my love. Thank you for supporting me through the ups and downs of this graduation project, and for taking care of me, when I was too tired to do so myself. Whenever my head has descended into chaos, you were there for me to help me find structure, and brush away the clouds obscuring my mind. Lastly, I want to appreciate and acknowledge your involvement in the improvement and structure of my writing, and the creation of the video presenting the concept *Eclipse*.

With gratitude,

John Offen



abstract

A summary of the process and outcome of this graduation project

Pregnancy loss, a prevalent yet often hidden phenomenon, affects one in five pregnancies, triggering emotional challenges like depression and post-traumatic stress disorder in women. This research seeks to shed light on the unaddressed experiences of couples dealing with pregnancy loss and proposes a design solution to foster positive coping mechanisms. The overarching goal is to create tools that enhance the pregnancy loss journey for affected couples.

The research journey commences with an exploration of how partners navigate pregnancy loss individually and collectively. A comprehensive investigation incorporating literature study, expert consultations, and contextmapping sessions with five couples was conducted. The grief experienced both, as a couple and individually, was analysed, revealing the absence of established grieving patterns and rituals specific to pregnancy loss. Additionally, the dynamics and communication within romantic partnerships were impacted, highlighting the need for tailored coping strategies. Lastly, there seemed to be a difference between the perceived experience of loss between the pregnant and the nonpregnant partner, related to the physical act of being pregnant.

The absence of the physical component of pregnancy emerged as a distinct factor influencing the difference in the perceived experience of loss between partners. For the pregnant partner, the mind-body connection becomes disrupted, as a result

of the emotional distress such as guilt, blame, and detachment. This disconnection also hindered effective communication between partners and their surroundings, necessitating the creation a design facilitating support through providing the space and the tools to reconnect to the physical body.

The subsequent design phase explored various mediums for achieving the design goal, ultimately culminating in the conception of *Eclipse*, a transformative theatrical ritual. This ritual consists of three sessions, each centred around a distinct theme, employing elements like warm water, hot stones, cocoons, experience stories, and humming singing to facilitate the reconnection process.

Throughout the design process, numerous evaluation activities were undertaken, including ideation sessions, prototyping, and expert consultations. *Eclipse* was evaluated through a trial with three experience experts, confirming its alignment with the established interaction qualities and design goal.

In reflection, this thesis not only challenges the conventional Western medical approach but also advocates for a more holistic consideration of mind-body connections. By incorporating non-traditional elements into the coping process, this research counters assumptions regarding the topic of spirituality in research. The envisioned future involves a society that actively listens to the narratives of pregnancy loss

survivors, granting them the space and time to grieve without judgment. The now silenced experience stories will be heard.

In conclusion, this research journey navigates the uncharted territory of pregnancy loss experiences, unveiling the complexities faced by couples. The design solution, *Eclipse*, stands as a testament to the power of transformational rituals in facilitating the healing process. This work contributes to destigmatising pregnancy loss grief, fostering a compassionate and empathetic environment for individuals and couples on this challenging journey.

before reading

Here a reading guide and definitions of terms used in this thesis are displayed. The references for these definitions can be found in the thesis.

Glossary

Pregnancy loss

In this thesis, the term pregnancy loss is used instead of the colloquial miscarriage. This is deliberate, as the word mis-carriage itself indicates judgement or fault (mis-take, mis-hap, something went a-miss, a miscarriage of judgement), whereas a pregnancy discontinuing could happen to anyone without a clear cause.

When talking about pregnancy loss it refers to a discontinued pregnancy due to natural causes. This could happen anywhere in the duration of the pregnancy starting from the first to 24th week. However, when talking about pregnancy loss, people often refer to a pregnancy discontinued in between the first and ±14th week, as pregnancy losses occur more often within this timespan.

Stillbirth

Stillbirth is defined as a pregnancy being discontinued after the 24th week. In the case of still birth the child is already deceased before being born.

Perinatal death

Perinatal death is a term used to describe types prematurely terminated pregnancies after the 24th week. This includes, but is not limited to, still birth.

Midwife/obstetrician

as an obstetrician, is a healthcare worker with whom individuals interact during the pregnancy. Obstetricians typically become involved starting from the 10th week, when the initial ultrasound is conducted. Depending on the medical history of the patient, this could also be earlier. The general task of obstetricians is to prepare individuals for giving birth. During the duration of the pregnancy they are available to aid in ailments related to the pregnancy.

Sonographer

A sonographer is a healthcare worker authorized to perform ultrasound scans. Some obstetricians can also be permitted to conduct ultrasounds.

Expressive therapy

Expressive therapy employs creative mediums like art, music, and movement to foster emotional expression and selfdiscovery. Through non-verbal communication, individuals can explore their feelings and experiences, facilitating healing and personal growth.

Movement therapy

Movement therapy uses intentional movement and dance for emotional and physical well-being, led by trained therapists in a safe space for self-expression. It aids in stress, trauma, and emotional management, utilizing the mind-body connection for holistic healing. Movement therapy can be placed under the umbrella of expressive therapy.

Reading guide



Part divider

These spreads display the title of the part on the right side and a brief introduction of the part on the left side of the page

Appendix

The appendix referred to is not included in this thesis. The appendix can be found in a separate downloadable document on the Repository of the TU Delft.

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Start of chapter

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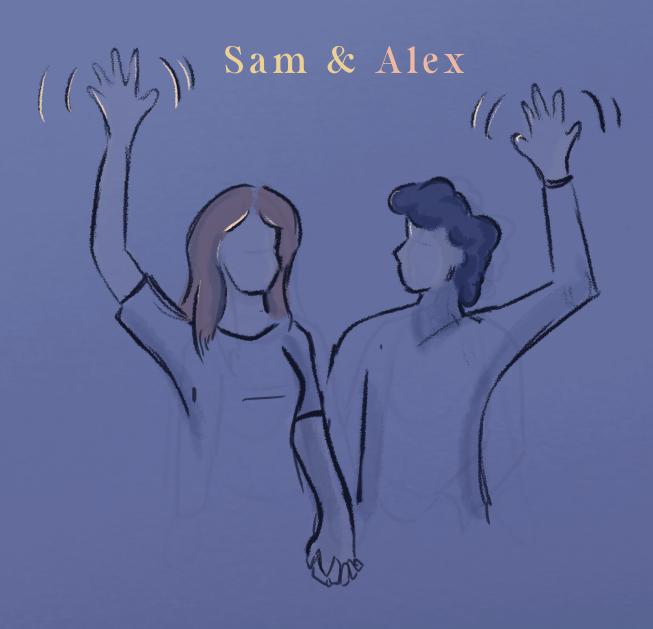
Part recap

Every part, except for 4 and 5, concludes with a summary of the main events and the key insights.

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Sam and Alex have been together for quite a while and are deeply in love with each other. As they are planning their future together, they have decided now is the time to take the next step.

They both have a wish. A wish for a child of their own to give all their love to.





Some wishes come true by taking small, careful steps until they are reached, like walking up a ladder



Others are captured through hard work and determination.



Alex and Sam are overjoyed! They caught their little star. They are pregnant with their wish and child to be.

It is up to Sam to carry their wish until ready.

However, Sam worries often: 'What if I make the wrong move, or what if I am too cold to give enough warmth?' Alex tries to reassure Sam by telling her it will all be fine and by hugging her as often as possible.

Every day of their pregnancy they get closer and closer to their wish coming true. But for now, it is Alex and Sam's little secret. Their family and friends do not know yet they are pregnant or had the wish for a child in the first place. They will tell them when they are certain their wish will come true.



Alex wishes they could take some of the load, but it is, unfortunately, a one-person job.



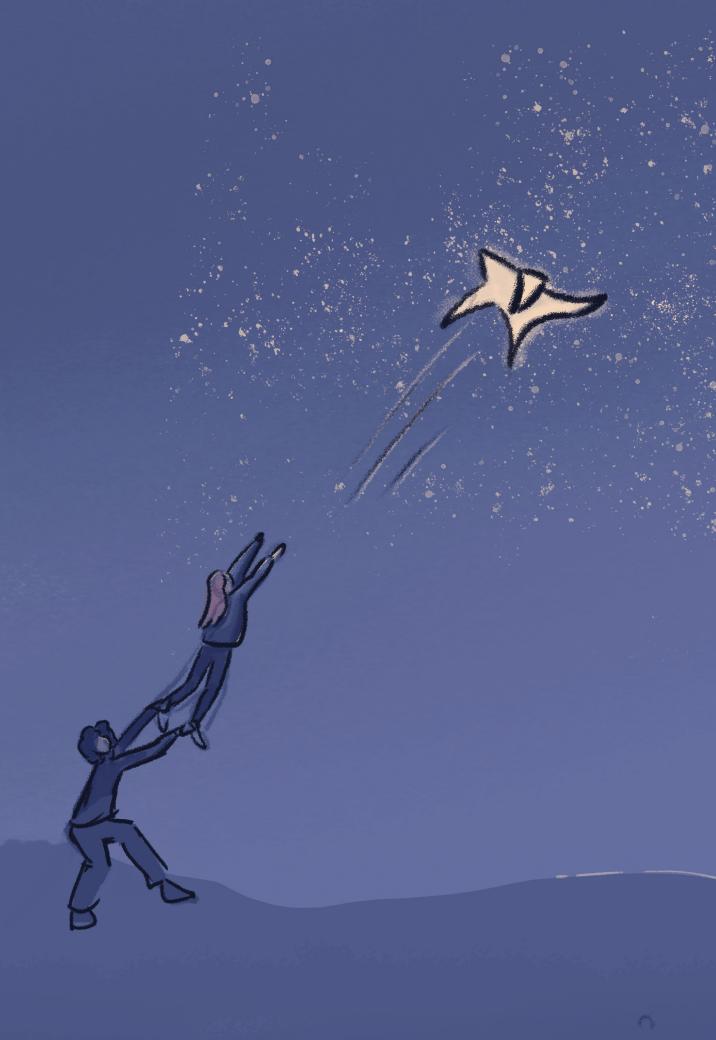
The longer the wish is carried and nurtured, the bigger it becomes for both Sam and Alex. Sam spends more time with their wish and grows a deep connection. To Sam, the wish is already a fully developed child; to Alex it remains a little more abstract.

Without warning, the wish fell out of Sam's hands. Sam does not know what happened. It all transpired so quickly. They lost their wish. From a distance Alex sees it taking place and can't do anything to prevent the loss. Alex is standing next to Sam and does not know how to respond, what to do or how to support Sam.

The loss affected the both of them differently.

Sam feels betrayed by her own body. She feels it was her fault their wish was taken. Sam feels frustrated and alone since Alex does not seem to be as sad as she is.

know what to feel or who to talk to. Their family and friends are not aware they were pregnant in the first place, and Alex doesn't want to burden Sam with their sadness. Sam already has enough on her plate. Alex decides it is best to keep quiet about it and carry on. It is important to stay strong and positive for Sam.



They are alone. Together. This part displays the societal context and the difficulties that arise in-between social systems and romantic relationships when experiencing pregnancy loss. Starting off this part by defining pregnancy loss and providing context for such experiences, while also highlighting the rationale behind designing for this topic, this part proceeds by introducing and explaining how the project came to be and the aim with which this graduation project started. The part closes with an overview of the research and design process.

introduction

PART 1

1.1

one in a million stories

Displaying the widespread yet silenced phenomenon called pregnancy loss

The story of Sam and Alex is an example of one of the many stories of couples who go through pregnancy loss. This story is an example, yet not exemplary, as there are numerous varieties of stories and experiences surrounding pregnancy loss. All these stories are representative and worth taking up space, yet they often go unseen and unheard. These silenced stories take their toll in terms of mental health and the stability of relationships. In this thesis, I intend on bringing stories such as that of Samd and Alex to Light. This chapter introduces the topic of pregnancy loss and its social context.

Falling by the wayside

It is estimated that 1 in 5 pregnancies end in pregnancy loss [1, 2]. Even though it is a widespread and frequent phenomenon, it is rarely talked about or understood. Even if discussed, social circles and medical practitioners often do not hear the story of emotional loss, rather the story of a failed attempt which can be tried again [3, 4, 5]. Couples fall by the wayside in terms of support from friends and family, healthcare practitioners and sometimes even within the relationships as both parties are coping with their own experienced loss and do not know how to care for each other in that moment. In this chapter, the phenomenon called pregnancy loss is introduced in terms of the involvement of healthcare practitioners, support from friends and family and the effects it can have within the couple's relationship.

Absence of (mental) healthcare

Pregnancy loss most often takes place within the first trimester of the pregnancy [1]. It is normal procedure to start seeing a healthcare practitioner around the 10th to 13th week for the first ultrasound. As a result, couples are commonly not in contact with a healthcare practitioner when faced with pregnancy loss and are left to fend for themselves. This causes distress and uncertainty, as to what to do and who to contact, in an already trying situation. Consequently, many cases of pregnancy loss go unreported [6]. This raises the question whether the aforementioned 1 to 5 ratio is even accurate, or whether the probability of pregnancy loss is, in fact, higher than the current statistic, which may further underline the relevance of this thesis' work.

Even if a healthcare practitioner is involved when pregnancy loss occurs, they might not be able to give the support needed as they are often not educated to provide it. Although there is a shift taking place in the educational programs and focus for obstetricians in training, most educational programs in the Netherlands are focused on the preparation for childbirth, not on the practical and importance of the mental support needed when facing pregnancy loss, according to Mirjam van de Kreij, founder of Miskraambegleiding Nederland [7]. This lack of education takes effect through obstetricians themselves and their websites, which do not provide or communicate, any information on or preparation for the topic of pregnancy loss. When called in the midst of the panic of experiencing pregnancy loss, some comments of obstetricians have been reported to sound like 'oh, yeah, that sounds bad, I think we can cancel the upcoming appointments then'. This information was derived from one of the

context mapping sessions, elaborated on in part 2. Occurrences like these leave couples who experience pregnancy loss with a feeling of being unprepared and unsupported.

Unseen and unheard

Pregnancy loss is rarely talked about within social circles. If discussed, the conversations and reactions, even if meant well, could be rated from poor to devastating based on comments from friends and family like 'better luck next time' or 'focus on the children you do have' [3, 4, 5]. By outsiders, pregnancy loss is seen as something that just happens and is part of life, even though the emotional weight and following mourning of the miscarriage can be difficult to cope with. Additionally, in the Netherlands it is customary to inform your surroundings of the pregnancy only after the first trimester [8]. This creates an environment in which couples oftentimes do not have a social support system in place when experiencing pregnancy loss. When it comes to coping, they are left to their own devices.



Figure 1 Unseen and unheard

Alone together

Partners grieve differently based, among other things, on their upbringing [9]. Experiencing grief in a relationship is already challenging in the case of a loved one dying. Women, conventionally the pregnant partner, are confronted with the physical aftermath, their own feelings and general lack of control on top of the grief [10, 11]. Men appear to have difficulties with their appointed role as supporter and with finding the right words to express their feelings [12]. These differences could cause frustration and a feeling of disconnection in the relationship, as was illustrated in the context mapping sessions held, discussed in part 2.

Women are usually put center-stage when talking about the topic of pregnancy, whilst the partner is waiting in the wings. This is more apparent with pregnancy loss, when the non-pregnant partner's grief is even less acknowledged by friends, family, and healthcare practitioners alike, sometimes even by themselves [13]. This could take place in both heterosexual and same-sex relationships [14]. Since pregnancy loss is often a shared, yet lonely, experience, the research phase of this thesis will focus on the experience of both partners, individually and together, instead of only the women's perspective. There are no other requirements for these partners other than having experienced pregnancy loss whilst also experiencing the loss as such, as the perceived loss is not in correlation with the longevity of the pregnancy or other context factors, as was stated by Ruth van den IJssel, founder of Steunpunt Nova, in an interview conducted for this thesis.

The consequences of silenced grief Grief is both an individual and shared

experience [15]. However, in the case of pregnancy loss, the grief is rarely shared and consequently unresolved, as can be concluded

from the above. Unresolved grief can cause many illnesses, psycological and physical [15]. Experiencing pregnancy loss is correlated to (signs of) depression in women [16, 17]. Additionally, it may lead to post-traumatic stress disorder (PTSD) in one in three women [18, 19]. Additionally, not receiving support in moments of grief could intensify these feelings of loss as they are not recognized [20, 21]. When listening to podcasts like Miskraam monologen of the Dutch newspaper Algemeen Dagblad, where women speak about pregnancy losses that happened decades ago, the emotion can still be noticeably heard [4]. Men have been reported to find the experience of pregnancy loss traumatic and intense as well, even though the duration of the grief has been found to be shorter [12]. Currently no correlation has been found between the possible psychosocial effect and pregnancy loss for men, as little research is done on men with regards to this topic. Could this be because we still perceive pregnancy and its consequences as the care and responsibility of the woman, rather than a shared experience for both partners?

Concluding, the silencing of pregnancy losses leaves its traces mentally and physically through generations and should therefore be taken seriously. The misunderstanding and overlooking of the impact pregnancy loss could have, takes place on different levels of the social systems surrounding and within the relationship of the couples in question (i.e. the healthcare provided, friends and family and within the relationship). A start is to provide aid for ones who experience pregnancy loss by designing for this topic, so that these stories may be seen, heard and rewritten.

1.2

project brief

Setting a clear intention

In this chapter a clear purpose will be determined for this graduation project aligning with my personal curiosity, connection to the topic and design ambitions.

My connection to the topic

When contemplating the subject of my graduation project, I arrived at the topic of pregnancy loss, as the topic is not unfamiliar to me and my family. See, I have two brothers called Hidde and Willem, yet they are not here. My parents had a stillborn child, named Hidde, before I was born. And in between my sister and I, they also experienced pregnancy loss. His name is Willem. When growing up I do not remember speaking much about them or being consciously aware of this part of our family history. However, I do remember the moment it dawned on me. When I was about 15 years old, visiting my aunt alone, she told me in depth about my brothers and how it all went down; the trauma my mother and father went through and how my birth was a much anticipated and longed for dream come true. Until that time, I am not sure if I realized the weight of their loss, although not tangible, and how my brothers' presence could be felt so clearly in our family set-up.

This is the basis for choosing pregnancy loss as the topic for my graduation project. This and some initial questions led me to a book called *Maar ik hield al wel van je* written by Marjolijn de Cocq [3]. This book cemented my choice and supported my premonition that my parents are not alone in their experience. What they went through is experienced by many with every experience just as valid in their similarities as in their differences.

Framing the project

My parents experienced both stillbirth and pregnancy loss. Although cases can be made why the two types of loss could be grouped together in terms of impact, depending on the person and their context, I choose to focus solely on pregnancy loss. The reason being that pregnancy loss frequently occurs in a situation with a limited support system available. When pregnancy loss takes place, medical practitioners are not yet involved, and the surroundings are generally not aware that there was a pregnancy in the first place. When a stillbirth occurs, the social system surrounding the couple is aware of the pregnancy (and subsequent stillbirth). Not to say that a pregnancy loss is less than or of a different degree than stillbirth, which is often implied [22].

Given the infrequent discussion of pregnancy loss, a conclusion was reached that it receives minimal attention in terms of design. As silencing the experiences of pregnancy loss negatively influences the mental health of the ones involved. So, there is a need for a design that improves the experience of pregnancy loss.

The ambition is to design something that contributes positively to the experience of pregnancy loss for couples.

To be able to achieve this ambition set, first knowledge is needed of what it is like to experience pregnancy loss, for both partners. This resulted into the following research question:

How do partners currently experience pregnancy loss, both individually and together, and how could design contribute positively?

This research question shall be answered in the next part Discover.



Figure 2 Tombstone of Hidde

1.3

design process

Applying the double diamond of design

In this section the double diamond model [23] of design is portrayed to give and overview of the process of this graduation project. The double diamond consists of five phases, in which both diverging and converging mindsets are used.

In the next section these phases are shown and described, with, on the right, the coordinating activities undertaken in these phases.

1 Introduction

... is the writing that proceeds this section. It includes the project's societal context, set-up, and overall objective.

2 Discover

... is the research phase of the project. This part will go in depth on the knowledge found based on the research questions mentioned in the project brief (chapter 2.1).

3 Define

.... establishes the road to defining the direction and the criteria of the design phase.

4 Design

... describes some design explorations made in terms of aesthetic and narrative where after the final design is be presented.

5 Reflection

... displays my reflection on the project as a whole, the process and my personal goals and is subsequently the final chapter of this thesis.

The double diamond

The double diamond is used to provide an overview of the design process. The actual process is less streamlined. The process constantly hops back and forward between different activities, opportunities, and ideas.

Below, in figure 3, you can find an overview of the five phases and the activities undertaken in said phases.

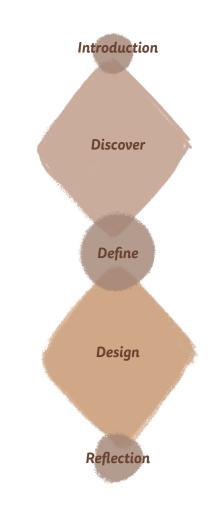


Figure 3 Double diamond

Activities to **discover**

- Literature study on pregnancy loss and the connection between the body and the mind
- Desktop research through the means of podcasts and books which contain stories of pregnancy loss or experts talking about the topic of pregnancy loss
- Consulting experts on the topic of pregnancy loss. These experts have been experts on the topic of pregnancy loss and/or experts in the field of expressive therapy
- Research sessions with couples about their experienced pregnancy loss

Activities to design

- Ideation sessions
- Storyboarding and creative writing
- Artistic explorations
- Prototyping
- Testing the prototype (with experience experts)
- Consulting with experts



In this part the overall topic of pregnancy loss and why this topic should be designed for is discussed. Additionally, the intention for this graduation project is set.

In chapter 1.1 the widespread phenomenon called pregnancy loss is discussed and shown to possibly be damaging to the mental health of the couples involved. These negative consequences could be heightened when the loss goes unheard and unseen by their surroundings and healthcare practitioners. Furthermore, the relationship itself of the couple in question could also face friction and hardship as the pregnancy loss is shared but the experience of grief and the physical aftermath is different for each individual. These occurrences within the topic of pregnancy loss, in combination with my personal connection to the topic of pregnancy loss, resulted into the overall objective shown in chapter 1.2 and displayed below.

The ambition is to design something that contributes positively to the experience of pregnancy loss for couples.

To be able to create something that could establish said effect, the following research question will be answered in the next part **Discover:**

How do partners currently experience pregnancy loss, both individually and together, and how could design contribute positively?'

Chapter 1.3 offered an overview of the five steps of the design process of this graduation project, which is in accordance with the double diamond model. The five steps of this these are: introduction, discover, define, design and reflection.

This part discusses the research conducted to identify the experience of pregnancy loss for couplesas well as individuals. Both the approach to the research, in which interviews with the couples are explored, as well as the indepth results found. The results will be communicated through the means of three different themes. Each theme mirros one main insight and is discussed in a separate chapter: 2.2, 2.3 and 2.4. The concluding insights of each of the research chapters will be presented together in chapter 2.5. These insights combined form the basis for the next part, Define.

discover

PART 2

2.1

research approach

Kicking off the research phase

This chapter discusses the research conducted to identify the experience of pregnancy loss for couples as well as individuals. Both the approach to the research, in which the interviews with the couples are discussed more extensively, and the in-depth results found communicated are displayed through the means of three themes, each represented in the three following chapters.

Chapter 2.1 'Research approach' addresses the approach to the research, whilst chapter 2.2 'The (social) practices of grief surrounding pregnancy loss', 2.3 'pregnancy loss and relationships' and 2.4 'the influence of the physical component of the pregnancy' discuss each one insight gained in depth and thematically.

Setting the intention

The objective for this graduation project as stated in chapter 1.2 is:

The ambition is to design something that contributes positively to the experience of pregnancy loss for couples.

This solely states the ambition for this project. No information is included regarding how to achieve this.

This resulted into the creation of the main research question, which will be split in to three sub-questions.

The main research and its sub-questions are formulated as follows:

Main RQ:

'How do couples currently experience pregnancy loss, both individually and together, and how could design contribute positively?'

Sub-RQ1: Manifestation of grief
'How is grief typically manifested
and expressed by individuals,
and what are the recognized and
accepted patterns of grieving
within this context?'

Sub-RQ2: Pregnancy loss and communication in partnerships

'How does pregnancy loss impact the dynamics and communication within romantic partnerships and what are the effects?'

Sub-RQ3:Pregnancy loss and the physical body How does the (lack of the) physical component of the pregnancy affect the individually perceived experience of pregnancy loss?

Research activities

Below a list can be found of the several activities undertaken to answer the research question. The interviews with the couples who have experienced pregnancy loss are discussed in more detail in the next section, as these were conducted through a less conventional method. The others are discussed to support my findings (see chapter 2.2 – 2.4), although less extensively.

- Literature study on pregnancy loss and the connection between the body and the mind, to accumulate scientific knowledge on the topic whilst detecting possible gaps for which other activities are needed.
- **Desktop research** containing stories of pregnancy loss told by women who have experienced them and by people who work in the field, to gain empathy and more in-depth knowledge of the emotional landscape.
- Consulting experts on the topic of pregnancy loss and/or experts in the field of expressive therapy. To gain both a comprehensive contextual understanding in current times (i.e. what words to use when interviewing, sensitive up-to-date knowledge) and to acquire their specific outlook on the topic from the perspective of their occupation (i.e. experience and/or movement therapist) and possible specialism in the topic.
- Research sessions with couples about their experienced pregnancy loss to increase deep empathy for the people in question and their situation, to generate deep and rich insights.

Experts consulted

On this page and overview can be found of all the experts who contributed their knowledge and time to this graduation project.



Natasja Walst
Body-oriented psychosocial
therapist . Owner of her own
specialised practice regarding
infertility problems
In tune

Natasja Walst is an experienced therapist, proficient in several types of practices ranging from massage to neurolinguistic programming (NLP). She specialises in support and problems with fertility and unwanted childlessness.

Experience expert



Heidi Serbruyns

Movement therapist and owner
of her own practice called
Lichaamsgerichte psychotherapie

Heidi Serbruyns provided insight into the workings of movement therapy and the functioning of the mind-body connection, through her expertise as movement therapist and her (previous) ownership of a yoga studio.



Janine van Veen
Founder of Sterrenkindje and
owner of her own office specialised
in mourning and loss.

Janine van Veen is a specialized mourning and loss-attendant, inspired by her own experience of loss. Based on her own experience, she decided to found her company Sterrenkindje. Sterrenkindje makes custom furniture pieces and baskets, which can be used to say goodbye to what was lost with care and attention.

Experience expert



Marjolijn de Cocq Writer of Maar ik hield al wel van je and journalist

Marjolijn de Cocq (1967) is a journalist and writer. She has reported on various events including the Yugoslav Tribunal and the Lockerbie trial. She currently holds the position of Books Editor at Het Parool. In 2020, her book Maar ik hield al wel van je was published by De Bezige Bij, presenting a simultaneously personal and universal narrative about coping with miscarriages.

Experience expert



Teun RemijExpressive therapist
specialized in eating disorders

Through his expertise, Teun Remij could offer insight into the practices of theatrical exercises with regards to therapy.



Ruth van den IJsselFounder of Steunpunt Nova and founder of ima afscheidszorg

Ruth is the founder of Steunpunt Nova, an online platform and contact point for parents who have experienced pregnancy loss or any type of perinatal death.

Experience expert



Miriam van der Kreij Founder of Miskraambegeleiding Nederland

Miriam van der Kreij is a pregnancy loss attendant, and the leading player in terms of the pregnancy loss education of obstetricians in the Netherlands.

Experience expert

In depth description of the field sessions method

Sessions were held with couples who experienced pregnancy loss. These sessions consisted of different activities such as talking, associating visual imagery, and drawing. In this section these activities and their rationale are discussed. Below a quick overview is shown of the method. This approach will be further explained on the following pages.





Figure 5 Dixit cards

Quick overview of the sessions

5 sessions of ± 2 hours with 5 couples

Goal

- To understand the experience of pregnancy loss both for the individual and as a couple on 3 different levels:
- What <u>happened?</u>
- How did it <u>feel</u> (emotionally and/or physically)?
- What were the consequences or activities undertaken with regards to those feelings?

Method

- Semi-structured interview method
- Generative session

The topic of pregnancy loss is sensitive. Therefore it was important to create a safe and comfortable atmosphere. To achieve this, a less constructed, conversation-based interview was deemed most fruitful.

The method of a generative session was chosen, since using creativity as a tool in an interview has been proven effective to evoke deeper conversations (24).

Set-up

In the home of the interviewees

Every interview was held at the home of the couple in question, because of the familiarity and safety this environment provides

During the interview, the participants generated a (physical) timeline of events (see figure 4). They attached Dixit cards (see figure 5) to events they felt suited the chosen cards. Optionally, the participants attached body-cards to the timeline. These were shaded to convey a specific emotion or their perception of their body during a particular moment. (see figure 6).

All activities described could be altered or discarded in the moment, if the participant was hindered in sharing their story by the activity instead or if the participant refused. They were clearly informed of their freedom to halt or refuse at the start of the session.

Materials

- Poles and rope for the physical time line
- Blank cards to write
- Dixit cards
- Body cards
- Pencils & markers (in different colours)
- Extra paper (just in case)

Data collection

- Separate hard drive
- Deleted two weeks after graduation
- Pictures taken
- Audio recordings

Analysis

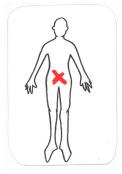
- Statement cards
- Implementing insights and information from the other research activities
- Clustering and regrouping.

No notes were made during the interviews to be able to be fully present in the conversations and to make the participants feel more as if they were having a conversation instead of having a very formal interview about their private life.

For the analysis all the interviews were recorded and re-listened to. While re-listening, notes were made and notable quotes were transcribed.

These quotes were transferred to statement cards [25, 26].

These statement cards were grouped and named in combination with the information and insights generated from the other research activities.



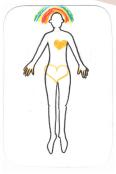


Figure 6 Coloured in Body cards

Hearing their stories first-hand

The session were held with the objective to gain an understanding of what it is like to experience pregnancy loss both for the individual and as a couple. It is significant that their voices are heard and seen first-hand in this graduation project, as they give the design grounding and direction. Immersing myself as a designer, through hearing their experience personally strengthens the empathy felt and understanding towards their journey, which is needed for good user-centered design [25].

Approach

For this qualitative study the contextmapping method was used as the backbone [26, 27]. When employing the contextmapping method the participant is a central and vital part of the value created. This train of thought is also known as participatory design. The participant is challenged to elicit information relevant to the context through engaging in creative assignments which are used to start in-depth discussions. The depth is articulated through participants' needs, desires, thoughts, and feelings, as the creation of artefacts reaches a deeper layer of knowledge [26, 27].

Sampling

Five interviews of ± two hours were held with couples who experienced pregnancy loss. The couples in this study were all of western european decent and hetrosexual. Within the timeframe of this study it was not possible to recruit a more diverse and inclusive sample of participants.

The participants were found through a post placed on the Instagram of Steunpunt Nova, a foundation which provides support for individuals and couples after pregnancy loss, stillbirth and/or perinatal death. Ruth van den IJssel, founder of Steunpunt Nova, was one of the experts interviewed in preparation for the sessions with experience experts.

Location

The interviews were held in the participants' home. This location was chosen because of the familiarity and safety this environment provides for the participants. As the topic of pregnancy loss is personal this is of great importance for the perceived freedom of speech and therefore quality of the sessions. A public place like a café is not able to provide that level of security and comfort.



Figure 4 Constructing the timeline with an experience expert

Set-up

The sessions consisted of a sequence of three activities which could be reflected on either after or during the activities, depending on the preference of the participants themselves and the natural flow of the each session. The activities were carefully selected to be diverse in the means of expression to accommodate for varying preferences (e.g., speaking, writing, visual association, and drawing) [27]. However,

the activities could be altered or discarded if they were hindering instead of deepening the sharing of the story or if the participant refused.

For the full set-up, please see appendix B.

Sequence of activities of the session

Below you can find the steps taken in the sessions. Together they form the sequence of activities of the session.

The participants were asked to focus on the 'what' of their individual experience through the means of creating a physical timeline. In the living room of the participants two ropes were rigged between two poles. The two lines represent each partner's respective timeline. Each partner was asked to create their own sequence of events starting from an agreed-upon starting point until a defined endpoint (see figure 7). For example, starting from the wish for a child till the pregnancy of another child. Blank cards and coloured markers were used to mark the moments in time. Those moment-cards were put on the timeline by the participants themselves. The

Those moment-cards were put on the timeline by the participants themselves. The activities (e.g., speaking, writing, visual association, and drawing) may be adjusted to the participants' preferences.



Figure 7 Constructing the timeline

Associating visual imagery The couples were asked to si

The couples were asked to sit down and focus on the emotional experience of the moments just discussed and placed on the timeline. In the meantime a few rows of Dixit cards (see figure 8) were displayed in front of them. They were asked to pick cards resonating with with a moment on or in between the already placed moment-cards on the timeline. Dixit cards are ambiguous cards which therefore provides support and guidelines in discussing the underlying (complex) emotions through asking questions about the card.



Figure 8 Picking Dixit cards

Connecting to the physical sensations Both participants were asked to fill in bo

Both participants were asked to fill in body-cards and place them on the timeline (see figure 9). Body-cards were used to indicate sensations in the body associated with certain emotions and/or moment-cards on or in between the timelines. These were only filled in and attached to the timeline if such sensations could be remembered, otherwise this step was skipped.



Figure 9 Fill in body-cards



Reflecting on the support found or searched for

At this moment, the timeline was complete, which created the opportunity to reflect on the support found or searched for to deal with the aftermath of the pregnancy loss (see figure 10). Activities undertaken, and the extent to which support was found in the surroundings, were discussed.



Figure 10 Reflecting with the timeline

Data collection

Audio recordings, pictures of the material created and personal information not included in this thesis, will be discarded two weeks after graduation and are stored on an offline disk drive until that time.

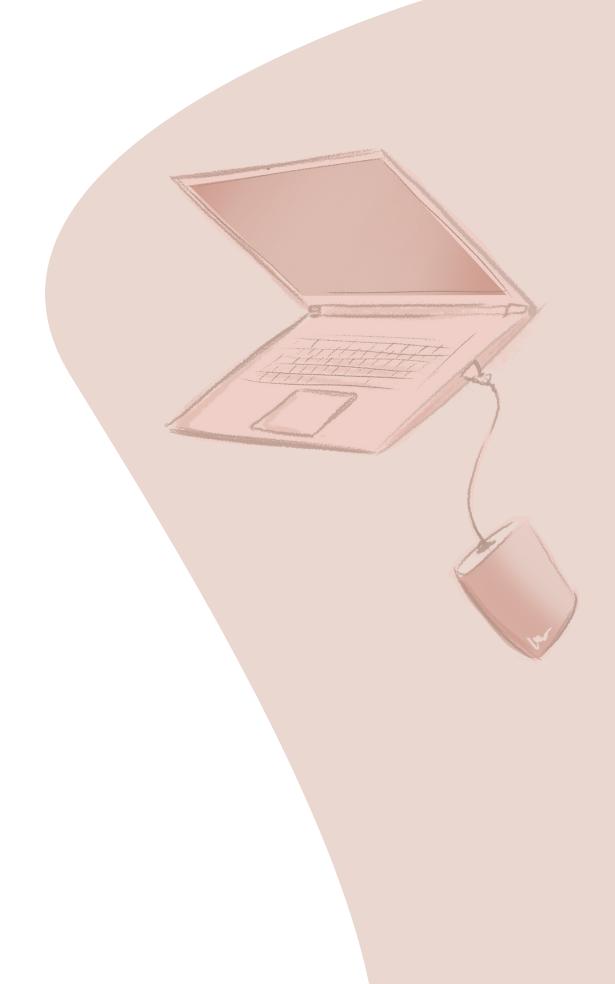
The timelines were digitalized with added quotes from the interviews (appendix C). All the participants were offered the option to change their timelines before they were included in the submitted thesis.

Analysis

Quotes were transcribed from the audio recordings taken during the sessions. These transcribed quotes were then, as is custom when conducting context mapping sessions, converted into statement cards. These cards state the quote and an interpretation of the quote. Additional cards, based on the other conducted research activities, were written and added to the statement cards from the Interviews. This combined collection was clustered until resulting into the three insights, discussed in the following chapters (2.2 to 2.6) [27].

Ethical considerations

The topic of pregnancy loss is a sensitive and highly personal topic. Preventing the session from taking on a therapeutic nature is crucial, as I am not a licensed therapist and entering that realm could pose harm. To avoid this from occurring, it was stressed throughout the session that the participants were free to either answer or discard a question. Additionally, the session was structured to convey what has happened and what was felt in regard to the topic of pregnancy loss, with the sole purpose to generate insights for the study. It was stressed to the participant that it is not a study in aid for their development process. For a full and detaield description of the ethical considerations, please see appendix D.



2.2

the (social) practices of grief surrounding pregnancy loss

In this chapter the question 'How is grief typically manifested and expressed by individuals, and what are the recognized and accepted patterns of grieving within this context?' will be discussed and answered, based on the research activities displayed in the previous chapter. These result into an overall insight, which is presented at the end of the chapter.

First, the changing theories and models of grief and how they relate to the context of pregnancy loss are explained. Then current practices of grief, the human need to share loss, the complexity of sharing loss and how uneducated surroundings make for unsympathetic responses to the perceived loss are discussed. These result into the main insight of this chapter.

The changing theories and models of grief Grief is something of all ages. Contrary to the timelessness of the topic, the theories, and models to create understanding from are psychology standpoint seem to be less so. Over the ages there have been many different models, theories and point of views generated on the topic of grief and bereavement. This development is important to understand, as these different theories (old and new) find their way into the current thought patterns and sayings in modern society.

The first models and theories of grief, created in the early 20th century by famous theorists like Freud and Lindemann, discuss the topic of grief in a static fashion which happens inside of the individual without the surroundings

taking part in the aftermath. In this theory the process of grief is ended successfully by severing the emotional ties with the deceased. According to Fraud and Lindeman, mental illnesses, such as the then called 'melancholia,' stem from not being able to cut those emotional bonds. The process of grief has a clear starting and finishing point and is therefore not continuous [28].

The second generation of grief models, after Freund and Lindemann, created in the late 20th century, still relies heavily on their theory, as grief in these models is still something static with a beginning and an end. According to Bowlby and Parks, and Worden, grief could now be brought down to different steps, tasks, or phases [28]. These phases are encountered linearly. Within these steps, Worden acknowledged importance of the role counsellors and therapists play in the offering of care during the process of loss [28, 29]. Nonetheless, the core concentration of the activities and dialogues revolved around the inner dialogues occurring within their clients, not around the influence of their social surroundings.

The newer models are continuous and dynamic, instead of linear and static. An example of this is the dual process model. This model looks at grief as a dynamic play between reactions to loss-oriented stressors (LO) and restoration-oriented stressors (RO). These stressors are evoked through external events. This model explains how a person in grief can oscillate between confrontational and avoidant coping strategies in daily life. [30] No steps, no phases, but a dynamic play between the internal and the external factors.

The latest grief theories are called 'transformation theories of grief'. These theories suggest that through the experience of grief, a 'new' normal is created. Through grief a transformation takes place into a new reality and identify of the people involved. This is otherwise known as the grief to personal growth theory. Additionally, in this theory social support was found to be able to aid the suffering through helping to find new meaning and purpose in life after the loss [31] This means that the process of grief is never finished, but that grief itself reshapes over time and with it, it reshapes identity, purpose and the surroundings of the ones involved. As Learly, a psychologist specializing in end-oflife issues, bereavement, and trauma, stated: "Death changes a relationship, but it need not end it" [32, 33].

Keirse, a well-known psychologist in the world of grief research, adds to the grief to personal growth Theory. He states that mourning is something you actively survive and not just process through time. Keirse calls this rouwarbeid (labour of grief). You need to undertake so called 'mourning tasks.' These tasks are divided into 3 themes: 'Facing the reality of the loss,' 'Experiencing the pain of the loss' and 'Readjusting to the new world after the loss' [9]. These themes are in accordance with the transformation theories of grief.

An overview of these newer and older theories can be found in figure 11 and 12.

Characteristics of first and second generation grief models



Static

The process of mourning ends and life goes on.



Internal and individual

The process of grief takes place inside of the individual.



Breaking bonds

Grief ends when the relational and emotional ties are severed with what was lost.



Linear steps

The process is divided into clear steps with an endpoint.



A point in time

The experience of loss is only experienced in a limited timespan.

According to these theories, the goal of a bereaved person is to return to a normal situation after experiencing loss. This is achieved through cutting the emotional ties with the deceased. To move on, is to let go.

Figure 11. Overview of the characteristics of the first and second generation grief models

Characteristics of the latest generation grief models



Dynamic

There is no clear endpoint nor clear steps to take.



Internal, external and social

Grief transforms the identity (internal) of the person, whilst also affecting the external (purpose and social bonds).



Transforming bonds

The love that ties you to the deceased is not discontinued, rather reformed.



Waves of emotion

There are no clear steps, rather waves of emotions triggered by external factors. These triggers change over time.



A lifelong process

Grief does not disappear, it reshapes itself

According to transformative theories of grief, the goal of a bereaved person is to integrate the lossinto the current life. This act transforms identity, purpose and changes relationships, into a new normal.

Figure 12. Overview of the characteristics of the latest generation grief models

The social surroundings play a part in the survival of grief as well. In the book Helpen bij verlies en verdriet (translated: Aiding in loss and sorrow). Keirse stresses the importance of the aid of the surroundings in these tasks. However, this aid should be given with respect, care, honesty and with the capacity to listen and be present when intense emotions arise. Nonetheless, in most models they do not [9] appear to play a significant role. Hooghe, a clinical psychologist, proposes in the paper Een model van bedreigde verbindingen (translated: A model of endangered connections) a more expanded model. In this model, although not with the use of different phases, grief affects the person and their surroundings on five different non-hierarchical levels: the self, the deceased, the closer surroundings, the wider surroundings and life (figure 13) [34].

Most therapeutic practices, according to Hooghe, focus on the second category: The relation to the deceased. Many practices zoom in on the significance of the deceased to their client or spend time creating rituals to stay in contact with the deceased in a different form. Hooghe proposes in her paper that these rituals could also be created for category three and four, the closer and wider surroundings, as they all hold great importance in the aftermath of loss [34].

To deal with grief, is to deal with these five categories in coherence. The closer and wider surroundings are also subject to transformation after a loved one passes, just as the relationship with self and the deceased is. The dynamic within a relationship, the family dynamic or a group can drastically change after a loss. New dynamics need to be built. This can be challenging, as many factors come in to play (i.e., different coping strategies and perceived experiences) [15].

So, a loved one passing away transforms the current life in several ways (i.e. identity, purpose and the social system surrounding us). This growth and change is a continuous process of shaping and reshaping. Although known to professionals in the field of therapy and adjacent professions, in society this is often not the dominant view. When talking about grief, comments can be made indicating grief being a process with a clear end from which one needs to be healed.

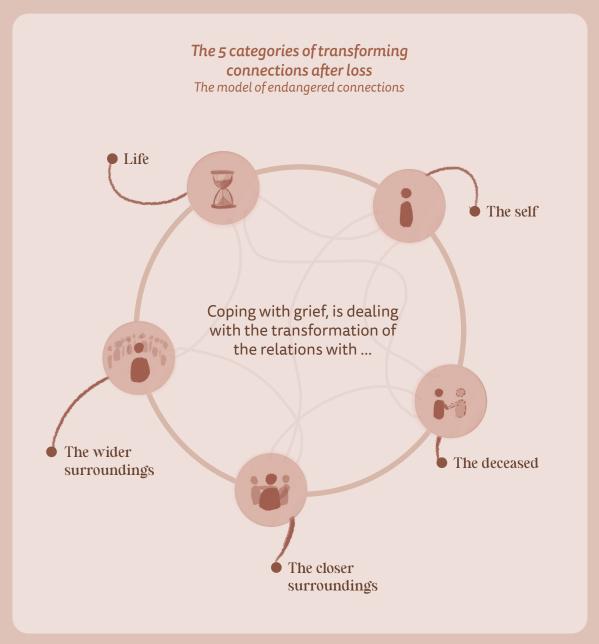


Figure 13 Overview of the 5 categories of transforming connections after loss

Examples such as: Are they recovered yet?, did they process the loss already? and Time heals all wounds. These sayings backed by, albeit dated, theory could hurt the process of grieving, as it implicates that your non-linear and dynamic mourning is abnormal. This could lead to internal conflict and external conflict, through, for example, evoking the feeling of being misunderstood which could lead to possible harm of the relationship.

Concluding, social support and confirmation of our (close and wider) surroundings is needed to find new purpose and meaning in life in the transformational aftermath of loss. This is true for all grief, even if invisible or overlooked, as is often in the case with pregnancy loss.

There is a need to manifest the loss..

Current (social) practices of grief When someone in your surroundings passes away there are all kinds of familiar and recognized practices and rituals in play to process the loss. These range from embalming the body to burning a candle. Over the years rituals have slowly disappeared from our society [9]. We used to have an abundance of (death) rituals to choose from, but we have estranged from these customs. These customs, however, had different important meanings and functions. They gave the individual loss a social and societal dimension [9]. Rituals gave the loss tangibility for the surroundings and created a moment in which time was realized to be needed for grief. Nowadays, we do not realize time is an essential part. We expect that life continues as it was before, a few days after the funeral.

A few established rituals remain, like placing flowers on the grave, visiting the deceased favourite place and the carrying of the coffin. With these known grief practices, there are artefacts left behind from the person you loved which remind you of them. There is also a body to be buried. With pregnancy loss there is often no physical proof the loss took place and no widespread established rituals or customs. How to mourn something that cannot be seen? And how to receive support from the (close and wider) surroundings if these rituals are rarely recognized nor practiced?

With pregnancy loss regulated and recognized manifestations of grief are far and few between. The ones that do exist revolve around the practice of 'making real' but are not regulated the same way, for example, a burial is. With 'making real' the practice of embodying the loss in (physical) artefacts is meant. This makes the unseen tangible and therefore (more) real to the couple involved and sometimes to the surroundings as well [36, 37].

An illustration of this can be observed in Figure 14, depicting a photo album assembled following the occurrence of pregnancy loss, featuring all the conducted ultrasounds.

Another example is this abstract portrait that uses symbolism to portray their family set up, including what was lost (figure 15).

"That happened right after I had the miscarriage. I was upstairs, and you told me, 'You need to come downstairs because there's a little sparrow in the living room' [...] So I went down and caught that tiny sparrow. Then I asked Philou and Job, 'Should I let the little sparrow go, should I release it?' [...] And that was on the same day as the miscarriage. So, to me, that held significance. I needed to release the little bird. [...] I don't usually name them, but it's a symbolic representation."

The water method is an even less recognized example. Through the water method, the biological remains of the loss are captured using a strainer and subsequently placed in a container filled with cold water. The body, at the stage of pregnancy loss, is an embryo, meaning it is still small and without a skeleton. Without a body of water the embryo does not have a recognizable shape. Through this practice what is lost can be held and seen, and can also receive a burial. This method, however is often frowned upon by the surroundings or met with aversion..

"I did find that comforting: I still wanted to show my child. [...] Actually, Bram's sister had said she didn't want to see Moos. I understand that too... that it might be scary. But to me, it was really my child, and I thought, 'Why wouldn't you want to look at my child?'" Iris. about Moos. their stillborn child

... in the surroundings...

The need to share the loss

The existing practices are not widely spread or regulated and focus mostly on the involvement of the individuals involved on the pregnancy loss, not on the sharing of the loss, even though this need was often discussed in the interviews, mentioned in the podcasts and confirmed in the literature discussed previously in this chapter under the changing models of grief.



Figure 14 The photo album of Romée includes all the ultrasounds conducted during the pregnancy of Bojan. The photo album was made after the loss.



Figure 15 This is a decorative object found in the living room of Marjon and Job. The three pawn-like objects in the left corner represent the parents and their tangible child. The bird, the star and the butterfly symbolize the intangible children. The tree is based on the tree of life, which is a well-known symbol for the continuation of life after death.

The sharing of the loss and receiving the sought after responses could give a great feeling of relieve, as illustrated by the following quote:

"... I do want to share what she wrote to me at that time, because it provided me with so much comfort. She wrote: 'Nina, how terrible for you. How sad. A little soul, no matter how short or long it may be there, always maintains a lasting connection with its mother. So, I hope you can perceive it as a little soul that always remains with you, albeit from the other side.' And I found that so beautiful back then. She acknowledged my grief, and I really appreciated that."

Nina, Mama'en de Podcast [38]

Some of the participants expressed this need as the need for physical actions of care, as one of the participants mentioned.

"... Yes, but then they send a bouquet of flowers but do not text me or anything. It's kind, such a lovely bouquet. But I actually prefer it much more when someone gives me a call. Or, well, sends a message like 'hey, I'm thinking of you.' [...] But later on, I thought people probably find it difficult to talk about, I guess. I think that's what it is."

Other participants expressed the need for acknowledgement of the pregnancy loss and recognition of their lived experience.

"... and that it's not considered significant enough. Like 'you're overreacting' in that sense. I think I've avoided it that way. On the other hand... if I said 'I had a miscarriage,' then I did get that acknowledgment I needed. I also don't remember if I really told everyone: 'yeah, but it was just an empty egg.' I consciously didn't say that sometimes. Because then I'm afraid that people might trivialize it, while it was quite a big thing for me.'

Esther

"I think nobody really understands until they actually go through it. So, we did talk to people who went through a similar journey or had a miscarriage."

Marleen

... but it is met with an inability to manifest it and receive it.

The complexity of sharing the loss
The sharing of the loss sounds simple, but
has proven to be more complicated, as many
of the participants in the sessions, experts
interviewed, and consulted literature sources,
have stated.

One complicating factor in sharing the loss is that the surroundings may not yet be aware of the desire for a child or the pregnancy itself, as exemplified in the following quote.

"I didn't bring up the pregnancy at all. Because, well, you usually tell people after, like, 13 or 14 weeks. In that initial phase of uncertainty, you don't bring it up. As a consequence, no one knew I was pregnant. But in your mind, you're already thinking, 'When am I going on leave? And how am I going to manage that?' So, you're already secretly in that mindset."

Marianne Peeters, the founder of a polyclinic specialized in early pregnancy losses, explained this phenomenon in the Podcast Bloedeerlijk.

"[...] women usually tell their friends or family of the pregnancy when they are around 10/12 weeks pregnant. Then they are (almost) certain that the pregnancy is progressing well. This results in only your parents knowing, very close friends or your sister, but not the people around you. It's also very difficult to talk about it in that situation because no one knew you were pregnant, and no one knows that you had a miscarriage either."

Marianne Peeters [39]

When sharing the loss, you are not only communicating the pregnancy loss itself, but also the wish for a child, which causes some resistance.

"The curettage was on the 8th or 9th of October, my birthday is on the 12th of October. We actually hadn't informed the family because... What are you going to say? We had a miscarriage?" Esther Additionally, when communicating the loss couples fear to be asked about their status regarding their wish every time they see that person. Ellyze van Asbeck, a doctor and gynaecologist in training, shared here thoughts on the complexity of sharing the loss in the podcast Bloedeerlijk.

"[...] I think the hesitancy also arises from the fact that the period just before you're pregnant is also very intimate and not so shared, because... that can take a while and you're alone with all that tension. But most women don't share that with a large number of people because otherwise, you get this 'and-and-and' effect. Like 'oh, she's not drinking, is she already pregnant?' And most women want to avoid that. You do hear quite often that women have felt or feel lonely when they experience a miscarriage. Which is, of course, a shame." Ellyze van Asbeck
On the podcast of bloedeerlijk [39]

Uneducated surroundings result into unsympathetic responses

The sharing of the loss sounds simple, but has proven to be more complicated, as illustrated by the previous section and the quote below.

I find 'It will be fine' or 'your time will come' to be such a significant cliché. There are a few more of those cliché statements, like 'You guys deserve it, so it will be fine.' [...] It's better to tell someone, 'I believe I understand what you're going through, and if you need a listening ear or anything else, I'm here for you.' Something along those lines." Bas Janse founder of the platform 'De vergeten vader' on the podcast Bloedeerlijk [40]

Some responses are meant well, but empty in statement. According to Bas this might be, because people do not know what to say and how to deal with the topic of pregnancy loss. This is illustrated by an American national survey on the public perceptions of pregnancy loss, which states that a majority of the participants believe pregnancy losses to be uncommon [41]. This may explain the alienating comments often mentioned by participants in the interviews.

"I remember calling my father... And I said, 'Well Dad, I'm pregnant, but it doesn't seem to be good, so it will probably not last.' He said, 'Oh dear, that's unfortunate.' And I heard his wife in the background, and she took the phone and said, 'Oh, I've had it too, yes, at 6 weeks, it doesn't mean much then.' So then I thought, you really don't know what you're saying." Esther

Others are faced with comments that diminish the expressed feelings of loss both by friends and family, as illustrated in the quote from Esther. This could be explained using the unspoken yet prevalent phenomenon in society called the leedlat (translated: bar of grief). A term introduced and explained by Miriam van de Kreij founder Miskraambegleiding Nederland in one of the conducted interviews. The bar of grief hints at the way people subconsciously classify loss based on different context factors like time and age. For example, according to this system, experiencing pregnancy loss at 5 weeks of pregnancy is allowed less grief than a stillbirth. Or a pregnancy loss of 15 weeks is less sad than a pregnancy loss of 4 weeks when the women who was carrying the child is older, since the younger women still has time to try again.

Based on the research session conducted and literary sources consulted, the perceived loss is not linked to the linear passing of time or context factors, so it is better not to assume, but to ask, even years after the loss took place, as some of the participants mentioned in the sessions. Unresolved grief does not wear out, it is stored.

"When we shared our story, a woman around 72 or 73 years old came up to me in tears. She said, 'Yes, it's so important to acknowledge this. It's been 52 years for me, but when I hear you, I am reminded that I still struggle with it, because it wasn't discussed, it wasn't expressed."

Marcel

The bar of grief is seldom openly addressed or directly acknowledged. However, at times, it is, often unknowingly, incorporated into the remarks and sentiments of those around, as well as in legal frameworks. Janine van Veen, founder of Sterrenkindje, mentioned, in the conducted interview, that there is no (maternity) leave regulation in place in the

Netherlands for women who were pregnant for a duration shorter than 24 weeks[43]. Thus, legally it is decided that no time is needed to process the experienced pregnancy loss. As a result, people who experience pregnancy loss need to, for example, call in sick to obtain this time, as it is not granted. This can be quite difficult to do as it could potentially jeopardize your chances of a promotion.

"It's actually a bit strange that when you have a child, you get 16 weeks of leave, but with a miscarriage, you don't get any, unless you have to call in sick. I do wonder if anyone would dare to say 'I had a miscarriage and I want to have miscarriage leave for that.""

Anoniem on the podcast Bloedeerlijk [42]

Women who undergo pregnancy loss might also find it challenging to grant themselves the time and space needed to grieve, as some might diminish their experience and possible resulting mourning.

"It was also a race. First, we had a daughter. Then we experienced 2 miscarriages. After that, we had a son. And then two more miscarriages. So you have a young family. I had a busy job. I was the head of the political and reporting department at the GPD. I commuted every day between Amsterdam and The Hague. Naturally, I wanted to show that as a woman, I could handle a powerful role with two small children. So, all that thinking and constantly digging into your miscarriages, that didn't happen at all."

on the podcast Bloedeerlijk [44]

"I think it really suits me to keep going. Maybe it's also a bit of me burying my head in the sand: If I just keep going, I don't have to keep thinking about it.' I find it a bit challenging. I actually want to say that you share those kinds of things more with your friends, but I didn't even share it with my girlfriends. So, it's definitely quite a lonely process that you go

Concluding

This chapter explored various aspects of grief and its social context. We found new models and theories of describing grief as a dynamic and never-ending transformative process, in which the surroundings play in important part. These models account for all grief, including the grief that can be felt after pregnancy loss.

Although these newer models are well known in the world of therapists and professionals with regards to the topic of grief, they are not commonly known in society. This is where conflicts might emerge, as individuals might react to pronounced grief in a manner that does not provide proper support to the grieving person.

There is a need for support from the surroundings, nontheless this need is often not met, due to factors such as lack of awareness among those in the surroundings about pregnancy loss. Some surroundings do not even acknowledge the pregnancy loss as an actual loss, with loneliness and isolation as a result for the couples in question. The phenomenon of grief after pregnancy loss being unseen and unheard is reflected in, and influenced by, the lack of established rituals, of which the main purpose is to manifest the individual's grief in the social and societal context.

When considering all the factors mentioned in this chapter, it becomes clear that:

There is a need to manifest the loss in the surroundings, but it is met with an inability to manifest it and receive it.

Summary of chapter 2.2

The chapter started with the objective to answer the research question:

Sub-RQ1: Manifestation of grief
How is grief typically manifested and
expressed by individuals, and what are
the recognized and accepted patterns
of grieving within this context?

At the end of the chapter the following insight was gained:

Insight RQ1:

There is a need to manifest the loss in the surroundings, but it is met with an inability to manifest it and receive it.



pregnancy loss and relationships the influence and effects

In this chapter, the question of how pregnancy loss affects the dynamics and communication within romantic partnerships, along with its effects, will be explored and addressed. Concluding this chapter with an insight, presented at the end of the chapter.

Pregnancy loss profoundly impacts the dynamics of a couple's relationship..

Uninformed

To understand the impact of pregnancy loss on romantic partnerships, understanding the journey leading up to the loss is important. When in the process of trying for a child, a positive pregnancy test puts couples on cloud nine. This is especially the case during the first pregnancy, when everything is new and exciting, or if the previous pregnancies went as expected.

Obstetrician websites and social media pages mostly inform you on what to do and how to prepare for the child to come. Even though most couples are, to some degree, aware that pregnancy loss exists, most do not consider that it could be a possibility for them, as they are often not informed of the frequency rate of these losses (1 in 5 pregnancies) [1].

"You think, this doesn't happen very often. Why me? While it's actually quite common." "Of course, you don't want to raise fear, but on the other hand, you can be realistic. It is about finding that balance. You don't want to 'burst their bubble,' but creating a more rosy bubble can also do harm. And that's what's happening now. They all stay in the bubble together, so if thing do not go as expected, the impact is huge and there's little help and support available."

Ruth van den IJssel founder of Steunpunt Nova

"I could not fathom, the realization of....
realization that I've lost a child to be."
Marcel

As the main priority of the obstetrician is to prepare you for what is expected to come, the child-birth, not all obstetricians prepare their patients for the possibility of a pregnancy loss. So when unexpectedly faced with pregnancy loss, it could be a hard fall from the pink cloud they were on.

When two people mourn, both could mourn differently. The way a person grieves is subject to a range of factors, thier upbringing being one of them [15]. This does not have to pose problem for the relationship, however when expecting to experience the loss in the same way, it could.

...necessitating a process of careful adjustment on both sides...

The process of grief

Grief is a non-lineair and dynamic process according to the latest grief models [28, 31]. Grief transforms over the years, and is therefore, as the experience expert, and host of the podcast Bloedeerijk, Anja Corbijn illustrates, never ending and could be triggered by external factors.

"For example, it often resurfaces for me when watching television or movies. Sometimes it catches you off guard. You don't expect it. You're watching a really enjoyable film, and then suddenly it hits you in the gut, and you're back there again."

Anja Corbij on Bloedeerlijk de podcast [45]

The process of grief not being linear or ending, in combination with mourning being done through different tasks and activities by each partner can result into frustration and in misunderstanding.

"You know that both of you are going through the same thing. You have the same wish. [...] You're just not speaking the same language." Marleen & Willem

This being was confirmed by the research of Hooghe. According to Hooghe one of the main reasons for not wanting to engage in couples therapy after experiencing loss is the difference in needs and ways of processing the grief whilst also not wanting to be a burden to the other's process of mourning [34].

Different appointed roles

The non-pregnant partner could feel trapped in the role of support. They try to take care of the other partner out of guilt for not being able to contribute more to the creating of their child and out of shear helplessness [12, 13]. As their partner is experiencing the physical pain and distress of the pregnancy loss, they are standing on the side-lines. However, the non-pregnant partners too are emotionally affected by the situation. Their loss and experienced distress also deserve to be seen and understood. Pregnancy and pregnancy loss is such a female-centred topic, as it takes place in her body, the partners are often overlooked by friends and healthcare workers alike.

"We noticed that the attention was mainly directed towards Femke with questions like 'how are you doing?" and 'how does it affect you?" I started paying attention to that and I also mentioned it to Femke. I asked her: 'Do you notice that when we talk about it, the question isn't directed at me, but only at you? They forget about me in that aspect.' That's when the idea of starting a platform for men came about. Yes, I am a forgotten father."

Bas Jansen founder platform De vergeten vader on Bloedeerlijk de Podcast [40]

"It is often not discussed. It's kind of a taboo topic. Or, at least, the general consensus is that you can't really talk about it. It's rarely discussed, not even with friends."

Marleen

Difference in experience

Based on what was mentioned in the sessions held, the physical act of being pregnant seems to create a difference between the partners' individual perception of loss. Women seem to experience the loss longer and on a deeper level, whilst the partners often explain that to them the idea of the child to be more abstract, not yet tangible [12]. To them it was still an extremely sad and painful occasion, but more so because of the pain their partner went through than the loss itself.

"I was more concerned with Marjon. Yeah, I wasn't even thinking that much about the miscarriage anymore. That had already happened, it was in the past."

Whilst another man in one of the sessions mentioned he did not understand what he was experiencing as he could not connect the idea of grief to the abstract loss they experienced. "I thought we were just growing apart,

relationship-wise, but I hadn't considered that we were actually going through a process of grief. [...] Because there wasn't officially anyone born or deceased."

... to navigate both the individual and shared experience of loss and the subsequent process of grief.

Finding each other

On paper partners both experienced the same pregnancy loss, but the experience between partners can be completely different, and to be able to communicate about this difference and according needs, effort needs to be made as illustrated in the quotes below.

"That Valencia trip, as strange as it may sound, was really beneficial. Imagine driving there in 23 hours, then wandering around a bit, trying to sleep, and then driving back in 2 days. So that was also a physically intensive form of processing, I would say."

Marcel, going on a trip together after the loss

Others by going to a relationship therapist.

"We had a very refreshing relationship therapist. He just said, 'Yes, you've experienced a grieving process, and you need to accept that. You've had a loss, and you're going through a grieving process now. And that's it.' That was a weight off my heart. So, we're not crazy."

And for some, the effort is put in by going places or attending workshops together.

"...the first session you saw how much grief I had,' [...] When you said, 'Now I actually feel it.' [...] That was really comforting for me. You know, you have this feeling that you're doing it alone, because Job does go to work..."

Marjon

Hooghe outlines four rational reasons for not discussing grief with a partner: words may feel inadequate, creating distance from pain, preserving personal grief, and acknowledging

differing mourning processes [34]. In relationships, grieving involves balancing individual and shared needs, demanding effort to maintain connection.

Concluding

In this chapter the complicated aftermath of pregnancy loss between partners is discussed. Grief itself is already complicated and non-linear, which poses difficulty for the relationship. The not pregnant partner is sometimes pushed in roles that do not leave space to process the loss, while their experiences of loss are on paper the same, but in reality, different, because of the physical aspect of the pregnancy.

This whole ordeal could lead to partners becoming incredibly close and stronger, whilst for others experiencing pregnancy loss could result into losing each other out of sight. A fine-tuned balance must be found between the partners to respect each other's process, without it hindering your own. All these factors resulted into the following insight:

Pregnancy loss
profoundly impacts
the dynamics of a
couple's relationship,
necessitating a process
of careful adjustment
on both sides to navigate
both the individual and
shared experience of
loss and the subsequent
process of grief.

Summary of chapter 2.3

The chapter started with the objective to answer the research question:

Sub-RQ2: Pregnancy loss and communication in partnerships

How does pregnancy loss impact the dynamics and communication within romantic partnerships and what are the effects?

At the end of the chapter the following insight was gained:

Insight RQ2:

Pregnancy loss
profoundly impacts
the dynamics of a
couple's relationship,
necessitating a process
of careful adjustment
on both sides to navigate
both the individual and
shared experience of
loss and the subsequent
process of grief.





2.4

the influence of the physical component of the pregnancy (loss)

This chapter is centred around answering the question of how the (lack of the) physical component of the Pregnancy could affect the individually perceived experience of pregnancy loss. This question will be answered through discussing the effect pregnancy loss could have on the body, and how this is reflected in the process of grief, and will result into an insight, presented at the end of the chapter.

The body keeps a score

The previous chapter briefly introduced the influence the physical experience of pregnancy and pregnancy loss could have on the difference of the perceived loss between partners. This could be, as the memories we make and the world we experience are perceived and remembered both cognitively and physically. Think of your favourite childhood memory. You might remember the smell at your grandma's house or the intense pit in your stomach when you were caught stealing a piece of candy from your mother's desk. These memories can still be felt, yet they are in the past. This is called the mind-body connection. Our brain and body have a way to not only remember what happened, but also how in felt, as they are in connection with one another.

This notion is highlighted by Bessel van der Kolk in his book "The Body Keeps the Score," where he explains that our experiences, especially trauma, are stored in our bodies. According to Bessel van der Kolk the definition of trauma is an event that happened in the past that is not remembered but relived. Traumas are created when there is no proper and/or unconditional support (safety) from

the surroundings. The lack of support from the surroundings and the silencing of the topic could therefore very well lead to trauma's regarding the experience of pregnancy loss [20, 21]. Additionally, loss that goes unrecognised increased over time according to Keirse [9].

Some of the women talked about their experiences, in the sessions or in the podcasts, in detail and with emotion, as if it happened yesterday, even when it took place decades ago. For example, they talked about dates, what they were wearing and could remember names from doctors they haven't seen in ages.

"On the twelfth of October, your sister suddenly came ding-dong to visit before my birthday. I said, 'We haven't actually cancelled anyone, but we're not celebrating. I just had a miscarriage.' She really felt a bit awkward like: 'Oh, what should we do then? Should I go back home?' I said, 'Yes, you should.' That was on my birthday. I still remember which sweater I was wearing. A blue sweater. That sweater has been a real comfort. I was very sad and somewhat depressed at the time."

The talked about the distrust or frustration they felt in their body after it let them down.

"Why does it do that? Why doesn't it do what it's supposed to do? What I really want it to do so badly."

Marleen this quote is connected to her experienced pregnancy loss and a medical condition known as endometriosis

Some of the women mentioned the feeling of failure, failure from their body, but also failure as a woman. This triggered a sense of shame.

"I felt a mission of the soul in this experience. A mission to share this experience and be open about it. That feeling, and actually the urge to do that, came very much from the sense of failure that arose in me. That was very interesting. I constantly had a premonition it would go wrong. And then I thought, 'But what if it goes wrong... What will people think of me then? Because I am Kim, the Ayurveda lifestyle nutrition and voga teacher, and... well... What will happen then? What will people think of me? Will they think that I'm not healthy?' These thoughts went so deep that I decided to just be honest. It seemed so important to bring awareness to the fact that some things are really just beyond your control."

Kim on Mama'en de podcast [38]

This feeling of failure and the trauma created in the body can lead to women being more 'inside their head', especially in the possible future pregnancies. Since they lacked control during the moment of loss, they tend to exert control over as many aspects of the body as possible thereafter to ensure a full-term pregnancy in the future. Natasja Walst, a bodyoriented and psychosocial therapist, stated, in the conducted interview, the following:

"Subsequently, I noticed, and I hear this almost constantly from nearly every woman in my practice, that a distance is formed between yourself and your body. That might sound strange, but you no longer have confidence in your body. You no longer want this body. You feel less like a woman, and so on. I also did not want to be touched in any way anymore."

Natasja

The pregnancy loss itself was often mentioned to be more intense and traumatizing than expected. Outside of the pregnancy loss itself being unexpected, couples were not aware that the loss is not some sort of heavy menstruation but is a true (albeit smaller) birth in which blood is lost and the tissue and blood vessels build up in the weeks of the pregnancy are pushed out. Women are experiencing contractions. The week(s) after pregnancy loss it is not uncommon to still bleed, which could be isolating, as it might pose difficulty to leave the house. The intensity of the pregnancy loss differs from loss to loss and from woman to woman, as the experience of childbirth does too.

"Truly the physical aspect, the pain that was especially present and the bleeding, of which I wasn't at all aware that it would become so intense."

Esther about the performed curettage

"I did kind of isolate myself in that period from doing enjoyable things. But I did want that again. I was trying to move on but I couldn't because the bleeding lasted so long." Marjon

"She asked, 'Are these contractions?' And then she thought, 'How strange that I didn't think of that myself.' I already have had a child. I know what contractions are, and yet she hadn't connected the idea of contractions with a miscarriage. She thought, 'Well, you lose blood, and then it stops at some point,' even though you also have to lose the baby, even if it still tiny, inside a little amniotic sac."

Ruth van den IJssel founder steunpunt Nova

These negative emotions and thoughts, regarding what happened in the body, affect the connection to the body, and therefore the mind-body connection. Some of the women in the sessions mentioned that sessions such as reiki or tantra, in which they reconnected with their body through movement and physical contact, supported in the aftermath of the pregnancy loss. They experienced healing through working on and reconnecting physically with the body, as Bessel van der Kolk often proposes in his book [21].

Research by Stang, a frequently published and certified yoga therapist, argued yoga

practices to be beneficial for bereaved adults who experience somatic symptoms (i.e. body tensions or to those who feel disconnection physically or emotionally) [46]. In addition, relaxation responses (which is the opposite of the fight or flight response) were shown to be beneficial for the grieving process. When relaxation responses are mastered, narrative and emotional explorations of their loss experience could greatly benefit thereafter [47].

Concluding

The physical act of losing the pregnancy affects the women in question both mentally and physically. which may result in a reluctance to be touched or an attempt to regain control through an overactive mind.

Some women might therefore find support through physical acts or workshops like yoga or reiki, as these focus on the mind to body connection.

These factors lead to the following insight:

Experiencing pregnancy loss could lead to the partner who was pregnant developing a disconnection with the body.

Summary of chapter 2.4

The chapter started with the objective to answer the research question:

Sub-RQ3:Pregnancy loss and the physical body How does the (lack of the) physical component of the pregnancy affect the individually perceived experience of pregnancy loss?

At the end of the chapter the following insight was gained:

Insight RQ3:

Experiencing pregnancy loss could lead to the partner who was pregnant developing a disconnection with the body.

40

2.5

presenting the insights

In the previous chapters the research questions are discussed and answered. Each chapter generated one insight. In this chapter the connection between the insights is generated.

Connected

The three insights presented in the previous three chapters of this part, shown in figure 16, are connected to each other.

As can be seen in figure 17, all insights exist on different social planes. Insight 1 takes place in the closer and wider surroundings. Insight 2 takes effect inside of the relationship and insight 3 within the pregnant partner.

The third insight lies at the core of the emotional turmoil, often described directly after, or years after, the experience of pregnancy loss. The pregnant partner feeling disconnection to her body in the aftermath of the pregnancy loss affects on an individual

levels, as well as on a social level, including the partnership and the connection with the closer and wider surroundings.

The in chapter 2.4 mentioned distrust of the body or search for control of the body, could result into being less aware of the emotions felt as the mental and the physical are connected [21]. How can one express what they need from their partner and the environment when not in connection with your own emotions? As Hooghe's

Overview of research questions and

insights

Main RQ:

'How do partners currently experience pregnancy loss and how could design contribute positively?'

Sub-RQ1: Manifestation of grief

How is grief typically manifested and expressed by individuals, and what are the recognized and accepted patterns of grieving within this context?

Sub-RQ2: Pregnancy loss and communication in partnerships How does pregnancy loss impact the dynamics and communication within romantic

and communication within romantic partnerships and what are the effects?

Sub-RQ3:Pregnancy loss and the physical body

How does the (lack of the) physical component of the pregnancy affect the individually perceived experience of pregnancy loss?

Insight RQ1

There is a need to manifest the loss in the surroundings, but it is met with an inability to receive it and an inability to manifest it.

Insight RQ2

Pregnancy loss profoundly impacts the dynamics of a couple's relationship, necessitating a process of careful adjustment on both sides to navigate both the individual and shared experience of loss and the subsequent process of grief.

Insight RQ3

Experiencing pregnancy loss could lead to the pregnant partner developing a disconnection with the physical body.

Figure 16 Overview of the insights generated in the previous chapters

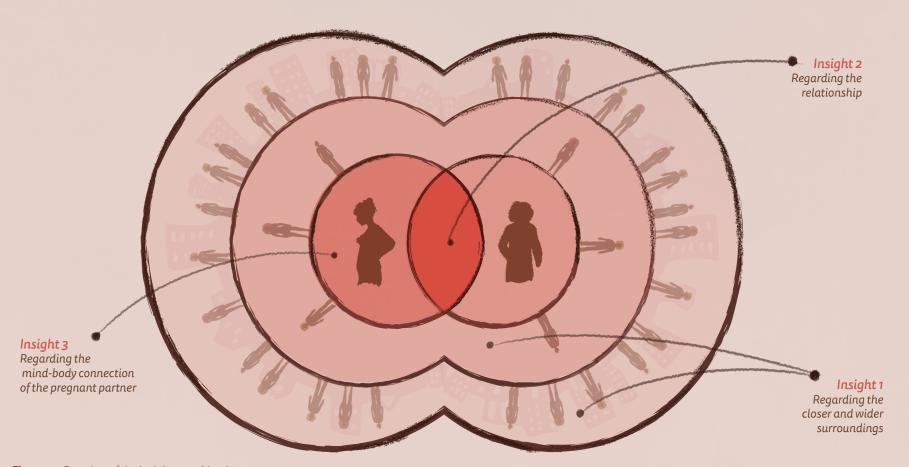


Figure 17 Overview of the insights combined

model of endangered connections portrays, transformation after grief takes place on five levels including the self and the wider and closer surroundings [34]. By not (fully) being in contact with the self or the surroundings, this could hinder the transformation of grief to a new reality.

Discussion

In this section the limitations of the research is questioned and discussed.

About whom?

As stated in the beginning of this part, only heterosexual couples of western European descent were included in the sessions conducted. So, one could state that the insights regarding the relationship only account for heterosexual white couples. However a paper by Wojnar, which discusses the effects pregnancy loss has on the relationship of lesbian women, mentions many of the same differences detected between the pregnant and the non-pregnant partner, as in the session conducted for this thesis. In lesbian relationships the non-

pregnant partner also appeared have a less uniform and intense bond with the child to be, than the partner who carried the child. The non-pregnant partners also noted to be more focussed on the tasks at hand, for example cooking and caring for the partner. They mentioned keeping their sorrow private, whilst trying to remain strong for the partner after the pregnancy loss; some of the non-pregnant, also felt frustrated by their surroundings, as they were often not recognized as a grieving parent [14].

These described effects and differences in perceived experience of the pregnant and non-pregnant partner in the aftermath of the pregnancy loss, seem to be in line with the information given by some of the men in the sessions held during the research phase. These men also reported to not feel recognized by family and friends in their grief, and often implied to take on the role of caregiver in the aftermath of the pregnancy loss. In the interviews it was often mentioned that the male partner, non-pregnant partner, experienced the loss differently to pregnant

partner. To the non-pregnant partners, the child to be felt more abstract as they could not feel or see anything tangible to attribute to the child (i.e. a belly bump or photo's of the child to be).

A difference between the non-pregnant women in the paper of Wojnar and the men in the context mapping sessions conducted, is that the women in Wojnar's research generally expressed their grief more intensely. A reason for this difference could be the lack of vocabulary available and taught to men to describe their loss, as men traditionally are trained to speak in pragmatic solutions, not in emotions [12, 13].

As this paragraph illustrates, there is a case to be made that the difference between the perceived experiences between partners regarding pregnancy loss are not due to differences between gender, but due to the difference of the physical component; one partner being pregnant, whilst the other is not.

Women in the foreground

During the sessions the women were mostly in the foreground of the discussions. They often talked fast and more than the men, which resulted into more quotes and more input for the research. Outside of this being a stereotype of women versus men, it was noticeable that some of the men seemed to be less invested in the session. Some mentioned at the start they were there for their partner because she wanted to be a part of this research.

"I didn't actively sign up for this. I agreed to it, but that's about it."

Kevin

These men did not feel the need to share their information as much as they did not think their own experience of the pregnancy loss to be either interesting enough or emotionally taxing enough to be talked about (often in comparison to their partner). This seems to agree with the statement made earlier in this thesis that the pregnancy and pregnancy loss mostly situated around the women, not the men.

"I also don't really feel the need to talk about that miscarriage. I don't require people to perceive it that way either. I've mentioned it to colleagues before.... after two sentences, the conversation would shift to the miscarriage of another colleague. I found that more interesting than telling my own story. That's a difference between me and Marjon."

This could be explained by the less frequent usage of the emotional vocabulary in the conversations of men [source]. So even if the loss is felt more emotionally than expressed in the session, it might not be as easy to express it in detail as the women in the sessions were able to. For example, one of the men expressed in the session to not be interested in emotions, but did stay home for three months after the pregnancy loss.

"I couldn't care less about any of it, I can honestly say that." Yeah, how I felt and thinks and things like that, I really don't care about that kind of stuff."

Kevin

"Physically I couldn't do anything anymore. I did not feel in control of my life. I think I had no control over anything. The world just keeps moving on."

Kevin

When listening to the recordings taken during the sessions, it was quite noticeable that when a question was directed at both, often the women would answer. Sometimes the women took over or answered questions asked to their partner.

Another explanation for this re-occurrence could be that the men (especially when the pregnancy loss occurred recently) were still in a care giving and supporting role [source], in which they did not feel the space to express their feelings with their partner in the room. This is the reason for the existence of therapeutic group for men who have experienced pregnancy loss Vaders rouwen ook and the online platform De vergeten vader. These platforms and groups give fathers a space to freely speak without the complexity of the relationship on top of it.

These arguments are not made to discredit the experiences told by the men in the sessions. I believe them to have spoken their truth with regards to their experience and I am not indicating otherwise. Similar to women, men's experiences vary, and their stories and encounters should each be afforded time and consideration. However, it might be necessary to take a deeper and more complete look into the partners individual and shared experience, solely. A suggestion for a future set-up, with the goal to find out more about the non-pregnant partner's experience, some individuals of couples should be interviewed separately, and other couples should be interviewed together. Another qualitative study, conducted with men only, portrays deeper and sensitive side to their experience than the men depicted in the sessions discussed in the previous chapters [12]

This implies that the results of this research might not display the men's perspective as thoroughly as the women's perspective. This is something to take into consideration when defining the design direction in the next part, or if the results of these sessions are used in future research.

The influence of (other) recently experienced grief

It is worth mentioning that one of the five couples (Bram and Iris) experienced still birth recently at the time the sessions were held. In this session, the grief felt for their stillborn named Moos was noticeably overshadowing what was felt (or wasn't felt) during the predating pregnancy losses. This is something to consider when evaluating or using this research for other purposes, given that, the information provided about their experienced pregnancy losses, at that moment in time, might not be representative for the felt experience in the long run. The analysis of the research does include statements of Iris and Bram, although most of their statements were not about their pregnancy losses, but about Moos, or their pregnancy losses in comparison to the loss of Moos.

If this research is to be repeated in the future, it would be wise to take into account the time passed between the interview and the experienced loss. One of the couples in this study lost their child, Boyan, at 20 weeks, 5 months prior to the interview. Conducting an interview shortly after such a loss might impact the information shared and the ethical comfort of the session, as the interviewees appeared to be in the process of grappling with the loss themselves.

With this summary part 2 Discover, is closed off. In this part, research was conducted, to understand the experience of pregnancy loss, for couples, to be able contribute positively to the experience of pregnancy loss in this graduation project. The information and insights gained in this part form the foundation for the upcoming parts, 3 and 4, in which the direction for the design is chosen, and the design is presented.

In this part we discovered the topic of pregnancy loss through different research activities (literary research, desktop research, interviews and so on) and by conducting interviews with experience experts, and experts in the field of pregnancy loss. These activities were performed to answer three research questions, formulated in chapter 2.1. Chapter 2.2 to 2.4 respectively answers the research questions, each with a main insight.

In chapter 2.2 the first research question is answered: How is grief typically manifested and expressed by individuals, and what are the recognized and accepted patterns of grieving within this context? It was revealed that few established rituals to manifest grief exist, if recognized by the surroundings in the first place. This could pose harm as, according to the latest models and theories on grief, and the model of endangered connections by Hooge, closer and wider surroundings play an important part in the transformation to a new normal after loss. This important role of support is absent, as the surroundings are often not aware the loss took place or familiar with the implications such loss could have both mentally and physically. Still, the need to share the grief and make the grief known is apparent throughout the conducted sessions with couples. This resulted into the following insight: 'There is a need to manifest the loss in the surroundings, but it is met with an inability to receive it and an inability to manifest it

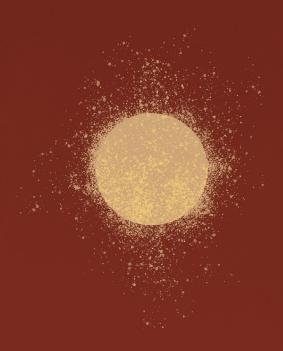
In chapter 2.3 the second research question is answered: How does pregnancy loss impact the dynamics and communication within romantic partnerships and what are the effects? This chapter elaborates

on the differences and similarities couples experience in the aftermath of pregnancy loss. Together they feel unseen and unheard by their closer and wider surroundings, yet both perceive the experienced loss differently. Women seem to be more affected by the loss for a longer amount of time, whilst men are affected less for a shorter amount of time [source]. These different perceptions could be difficult for the relationship, as both sides could feel misunderstood or not valued in their perception of the experience. This resulted into the following insight: Pregnancy loss profoundly impacts the dynamics of a couple's relationship, necessitating a process of careful adjustment on both sides to navigate both the individual and shared experience of loss and the subsequent process of grief.

In chapter 2.4 the research question is answered: How does the (lack of the) physical component of the pregnancy affect the individually perceived experience of pregnancy loss? In this chapter the difference in perception of the loss between partners is elaborated on. It appears the non-pregnant partner views the child to be at the moment of losing the pregnancy as more abstract, than the pregnant partner. For the pregnant partner the child-to-be, as the child grows in their body ,feels already more tangible, which enhances the feeling of loss. This resulted into the following insight: 'Experiencing pregnancy loss could lead to the partner who was pregnant developing a disconnection with the body'

These insights exist on different (social) levels. The first insights takes place in the wider and closer surroundings, the second insight in the romantic relationship and the third insights takes place inside of the pregnant partner. The third insight lies at the core of the emotional turmoil often described directly after or years after the experience of pregnancy loss, as it affects the interactions with the parter, the closer and the wider surroundings. This is discussed in more detail in chapter 2.5.

This part outlines the significant transition from the research phase to the design phase as the research concludes. In this part the design direction is defined through formulating and discussing the design goal and by determining the means and qualities needed to reach the set design goal.



define

PART 3

3.1

choosing a direction

This chapter, in between the research and design phase, will explain and elaborate on the design direction chosen through the means of formulating a design goal.

In the previous part insights, regarding how couples experience pregnancy loss, were found based on the research activities done. These insights are connected, with the influence of the physical aspect of the pregnancy being the centre. Based on this, a direction is chosen and formulated as a design goal.

The focus on the physical disconnection In design a design goal is often formulated at this point of the process to give the project a clear direction and attributes to validate the concept at the end of the design process.

In chapter 2.5 the connection between the three resulting insights is explained. The three insights exist on different levels of the social system, yet they affect each other.

1 Insight RQ1

There is a need to manifest the loss in the surroundings, but it is met with an inability to receive it.

2 Insight RQ2

Pregnancy loss profoundly impacts the dynamics of a couple's relationship, necessitating a process of careful adjustment on both sides to navigate both the individual and shared experience of loss and the subsequent process of grief.

3 Insight RQ3

Experiencing pregnancy loss could lead to the partner who was pregnant developing a disconnection with the body.

As discussed at the end of chapter 2.5, physically experiencing pregnancy loss could lead to developing a mental disconnection with the body. Grief transforms, rather than

resolves, however, a distorted mind-body connection could affect this transformation to a new 'normal.' It affects the transformation of the self and, additionally ,the transformation and the quality of the relations with the closer and wider surroundings as well. How can one express what they need and distinguish their own experience from their partner's, if they are not in touch with what is felt emotionally and physically?

For this reason this graduation project is steered into the direction of the third insight, being the disconnection with the body.

Focus on women

In the previous section, the focus on the physical disconnection was explained. As this disconnection takes place in the body of the pregnant parter, the focus of this design phase is placed on the women who carry the child. The only requirement for these women is that they experience the loss as such, as loss cannot be expressed in time or other context factors.

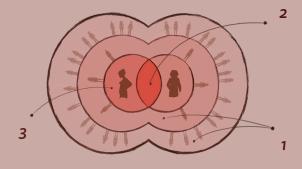


Figure 18 Overview insights generated in part 2

Formulating the goal

In the two previous sections the choice for focussing on the third insight resulting from the research phase was explained. This insight, the possibility of the pregnant partner developing a disconnection between the mind and body after experiencing pregnancy loss, affects the other two insights through it hindering the ability of communicating what is felt and needed to the closer and wider surroundings.

These choices resulted into the following design goal:

The goal is to provide support to women, who have faced pregnancy loss, in rediscovering their mind-body relationship, by providing tools and space to explore and restore the (dis)connection with the physical body.

As the connection with the body is re-discovered, the connection with the partner and the environment should also improve. The experience design will therefore focus on the women, but also keep in mind the surroundings.

With this design goal in mind, design choices are made. These initial choices will be shown and argued in the following chapters, 3.2 and 3.3.

Design goal

The goal is to provide support to women, who have faced pregnancy loss, in rediscovering their mind-body relationship, by providing the tools and space to explore and restore the (dis)connection with the physical body.

3.2

determining interaction qualities

Determining the interactions with which the concept should achieve its desired goald and effect.

The design goal informs about the intended goal of the design, however, it does not describe the interaction qualities needed to achieve it. To explore qualities that fit the aim of the design, two workshops were held. In this chapter the workshop and the interaction qualities determined as a result are discussed.

Determining the qualities

To determine the interaction qualities required to create the desired effect of reconnection with the body, two workshop sessions were held.

In these sessions different tactile materials and physical interactions were explored through the means of making and experiencing poses and movements.

For these workshops participants with awareness of the mind-body connection were selected (actors, yogis, tai chi practitioners) These participants are no experienced experts, meaning they did not experience pregnancy loss. Through their awareness of the mind-body connection and/or experience in acting, they were able to empathize with the experience of pregnancy and could therefore act as though they did experience pregnancy loss. To allow for empathy, the participants were immersed into the context of pregnancy loss through an experience story read.

The decision to work with participants who did not experience pregnancy loss themselves was made from an ethical standpoint. As we could be dealing with stored trauma in the body, it would not be wise to explore said trauma through movement and interactions without the approval and presence of a licensed therapist. Within the timeframe this was not possible.



Figure 19 The participants finding their first poses after being immersed through storytelling

The goal of the workshops was to explore the interaction qualities through creating different poses in different configurations and several tactile materials. The session took ± two hours. To prepare this session my experience and knowledge of (physical) theatre workshops was used. For more information regarding the set up and the trajectory of the session, see appendix E.

After being immersed through the narrated experience story, the participants were asked to create poses that express, how they would feel, and what they would need after experiencing pregnancy loss (figure. This could be very literal or more symbolic.

The poses were made with and without the use of tactile materials and in several

configurations: individually, in couples and as a group (with one member directing the pose).

Defining the qualities

After the poses were made, a contemplating discussion was held about the intention of the poses and the experience of the participants themselves. These reflections, in combination with an analysis the poses after the workshops, led to the three interaction qualities presented on the following page.



Loving

[soft, intimate, safe, acknowledged, connected]

The concept should evoke the feeling of being loved and accepted. This is an intimate and safe feeling, which reconnecting with the body after pregnancy loss requires. In the session this was displayed through many poses that featured an embrace.







Figure 20 Loving poses from the session



grounding

[balanced, centred, relaxed, independent]

The concept should invite grounding, grounding in this moment and grounding in the body. Grounding takes time and space and is of essence to be able to further explore the mind-body connection, which is the very essence of the concept.

In the sessions grounding was often exhibited through breathing and hanging on objects/the floor.







Figure 21 Grounding poses from the session



guiding

[sensitive, empathetic, gentle, trustworthy, connecting]

The concept should guide women in taking the first steps towards reconnection with their body. In the sessions the guiding interaction was seen through the use materials that guided attention to parts of the body, or moments in which participants guided each other's movement, which was said to be connecting and soothing.







Figure 22 Guiding poses from the session

choosing a medium

Finding the path

he aim of the design is to offer support to women who have experienced pregnancy loss, aiding them in re-establishing their mindbody connection. This involves creating a space for them to explore and heal the (dis)connection with their physical bodies. The interaction qualities of loving, grounding, and guiding are crucial in this process. However, the specific medium to achieve these qualities and the design goal remains uncertain. This chapter will determine the medium for the project, considering both personal and professional objectives alongside the design phase's overall aim.

Ambition to merge theatre and design

Since the start of the master Design for Interaction at the TU Delft I have been searching for a way to combine my two passions in life; design and theatre. I think the two disciplines have a lot in common as they both try to evoke emotions or create experiences through the means of interaction. However, it has proven to be a challenge to find the space within the curriculum to explore this combined direction more. This is why, for this graduation project, I was eager to see if such a combination could be made.

Collaborating with Female Economy

Female Economy, a theatre production company in Amsterdam, is known for their innovative theatre productions, which often take place out of the context of the original black box theatre-audience setting. I was inspired by their new production Vrouwen in bad (translated: Women taking a bath) (see figure 23, 24 and 25). Vrouwen in bad aims to reconnect women to their feminine strengths in a masculine focused society [48]. This production could be categorized as being

somewhere in between a 5 part workshop and Bad, please go to appendix F.

Female Economy defines the experience of Vrouwen in bad as a transformative theatrical ritual. This new category seemed to possibly be a fruitful medium that would suit the design goal and interaction qualities, whilst also allowing for my personal ambition to e explored.

After contacting Female Economy I invited to attend one of the try-outs of Vrouwen in bad, which became the beginning of the collaboration with Female Economy during this graduation project. They displayed an interest in the subject of pregnancy loss and were intrigued about the potential form of a transformative theatrical ritual addressing this theme. Lauren Rissik, playwright at Female Economy, became involved as the main contact to the company at the start of the define phase.

A transformative theatrical ritual

But before choosing a medium definitely, other options were explored (go to appendix G). These were assessed, before concluding the medium of a transformative theatric ritual would be an interesting design space with the design goal in mind.

As established in the Discover part of this thesis, finding time and space to process the loss and let the loss be is proven to be quite difficult. Some women and their surroundings might feel that their loss is not worthy enough to be grieved. Others might rush over the loss, because they feel their biological clock ticking and want to get pregnant again as fast as possible. Therefore, experience designed therefore should provide focus, time and loving attention to the body and the topic of pregnancy loss.

Figure 23 Impression of Vrouwen in Bad,

the initiation before entering the ritual

The act of performing a ritual encloses these qualities of loving attention, whilst also being guided. Rituals ground their participants in the moment as for a true ritual everything has meaning and weight. The interaction qualities (loving, guiding and grounding) could therefore be found in rituals [35].

The experiental, narratival, sensory and somatic aspects of a ritual, as they are distinctly cognitive, are said to be able to make a distinctive contribution to people's understanding of the world, including, understanding the transformed relationship with the body and what was lost [35].

Rituals are originally used to seek balance (to aid an illness), through performing a sequence of actions which are done with utmost attention and precision. With illness also illnesses of the soul are meant, which could manifest physically. Most rituals have a more holistic view on life. An holistic view perceives the mind and the physical body as one entity instead of separate [49]. This view connects well to the design goal of exploring the connection between body and mind.

The established collaboration with Female Economy, my own goal to merge the disciplines of theatre and design, and the design opportunities and inspiration the medium transformative theatrical ritual seems to create, cemented the decision explore the transformative theatric rituals as the medium for this graduation project.

FEMVLE ECONOMY

Figure 24 Impression Vrouwen in Bad, the first sight of the space in which the ritual takes place

CHOOSING A MEDIUM





In this part the design goal was set, the interaction qualities defined and the medium chosen.

In chapter 3.1 the design goal was formulated. As the developed disconnection with the body lies at the core of the experience of pregnancy loss, as it influences the ability to express the emotions and needs felt, the design goal is geared towards this phenomenon.

The goal is to provide support to women, who have faced pregnancy loss, in rediscovering their mind-body relationship, by providing the tools and space to explore and restore the (dis)connection with the physical body.

With the design goal in mind, workshops were held to determine the interaction qualities needed to achieve said goal. In these sessions physical poses were made by participants, such as actors, yogi's and tai chi practitioners, immersed into the context of pregnancy loss. These poses represented either how the participant would feel after experiencing pregnancy loss, or what they would need. Based on these poses and contemplating conversations held in the participant groups after the poses were made. Three interaction qualities derived from these activities: loving, grounding and guiding.

These interaction qualities are determined and elaborated on in chapter 3.2.

In the final section of this part, namely 3.3, the medium is selected as part of determining the design direction. Based on my own ambitions of merging theatre with design, in combination with the design goal and interaction qualities, the medium of a transformative theatrical ritual is chosen. This choice was inspired by Vrouwen in Bad, (translated: Women taking a Bath) produced and created by Female Economy. From this part on, Female Economy is involved in this graduation project as a collaborator.

With the design goal, interaction qualities, and chosen medium ready, it is time to go to the next part; part 4 Design.

This part presents the concept created based on the research done and the defined design direction in part 2 and 3. In this part, the design approach is explained (4.1), then the concept, *Eclipse*, is presented (4.2), explained (4.3 and 4.4) and evaluated (4.5). Lastly recommendations are made, based on desirability, viability, and feasibility to take this concept into the future (4.6).

design

PART 4

4.1

design approach

The activities undertaken to design the concept

In the previous part, Define, the design direction is established and defined. The direction of designing a theatrical transformative ritual to support women who have faced pregnancy loss, in rediscovering their mind-body relationship, was chosen. This choice was made inspired by and in cooperation with Female Economy, a Dutch theatre company known (amongst other things) for their transformative theatrical ritual named Vrouwen in bad (translated: Women taking a bath). This ritual should adhere to the interaction qualities of loving, grounding and guiding.

With this chapter a new phase is introduced, the design phase. The research is conducted, a direction is chosen, now a design needs to be developed. The process of going from abstract design criteria to a concrete concept that contributes to the issues found and discussed in part 2, can be broken down in five steps, as can be seen in figure 26.

Ideating and incubating

The act of ideating is the first step of the design phase. With the design goal and the interaction qualities in mind, ideas are formed, which later turn into a concept. At first the ideating takes place on a more abstract level, which will be narrowed down through the questions that arise when thinking abstractly. Questions such as Out of what elements does a ritual exist, and what elements can you design? What elements or interactions could support reconnecting with the body? and How could the design involve and exude the interaction qualities?

Incubation is an important part of this step. With incubation the act of finding inspiration

(outside of the scope) is meant. Incubation allows for processing the ideation done. When revisiting the process of ideation you are charged with new energy, inspiration and insights. The undertaken incubation activities during this graduation project are visiting museums, going to several theatre shows, listening to music and going on a walk in nature (see pages 59 to 66)

Exploring the narrative

In order to move to a concrete concept, the next step in the design process to develop the narrative of the concept. With the term narrative, the sequence of events and how they affect the user, is meant. To create such a narrative, first a blueprint of the story needs to be constructed. This story holds the ingredients and the sequence of events that together will form the concept. Through analysing pre-existing rituals and finding inspiration in the Hero's journey of Campbell, the narrative of the concept was found. This narrative is then refined through series of storyboarding and creative writing.

Designing the interactables

Based on the storyline created in the previous design step, interactive elements, with which the people involved in the ritual interact, are derived. In this step, these interactables are further developed through prototyping and sketching. The interaction qualities and design goal are a guiding force for these decisions.

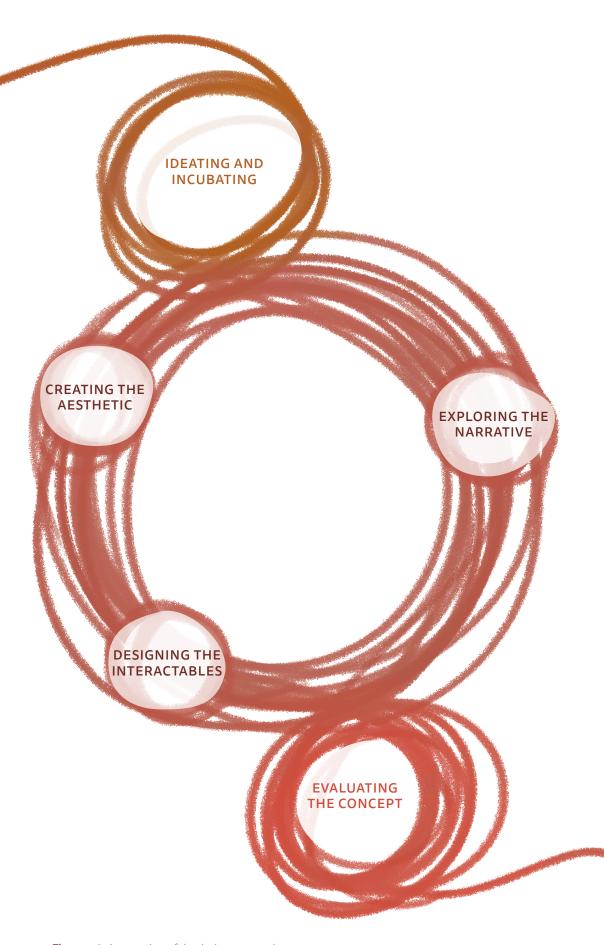
Creating the aesthetic

In the previous step how the interactables feel, respond and act, is established. However, part of their interaction with the participants is in the way they visually perform. Objects and space do not only interact with us through literal active interactions (touching, pushing, moving), but also through their visual performance. The shape, colour, visual

tactility and placement also communicates and interacts with the participants. In this part the aesthetic language of the overall concept is established based on the word loving, which indicates an embracing aesthetic that is friendly, warm and safe. This is in accordance with the interaction qualities, as loving is one of them.

Evaluating the concept

Evaluating what is created is a big part of the design phase. Through testing (with experience experts), new insights can be found, and the design is adapted. The evaluating of a concept through tests can both inform the design decisions as validate (elements of) the concept. Throughout this project several tests have taken place for individual elements of the design, as well as a final test of the whole experience.



Design activities

Below you can find a list of several activities performed. In chapter 4.3-4.5 the most noteworthy of the activities are addressed in detail.

- Ideation sessions
- Storyboarding and creative writing
- Artistic explorations
- Prototyping
- Testing the prototype (with experience experts)
- Consulting with experts

Structure of this part

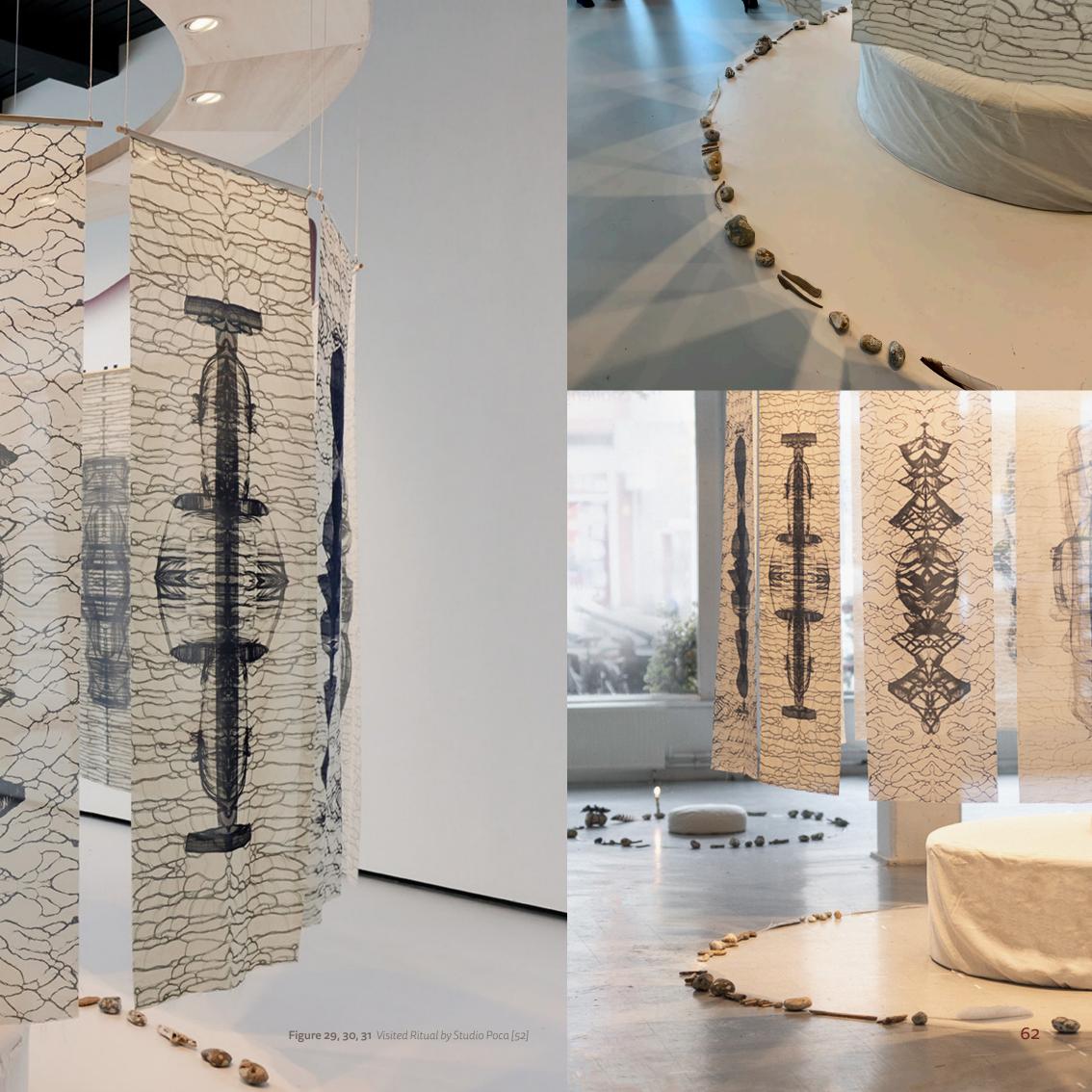
The remainder of this part is divided into four chapters. In the next chapter 4.2, the final design concept *Eclipse* is presented. Chapter 4.3 Conceptualizing the ritual and 4.4 Determining the aesthetic elaborate on the most important design decisions made that lead to the final design. In chapter 4.4 Evaluating the concept, the different tests conducted are discussed. Through these tests the concept is evaluated, with regards the design goal set and the interaction qualities stated in part 3. In the last chapter 4.5, future recommendations are given based on the desirability, viability and feasibility of the concept.

Figure 26 An overview of the design approach









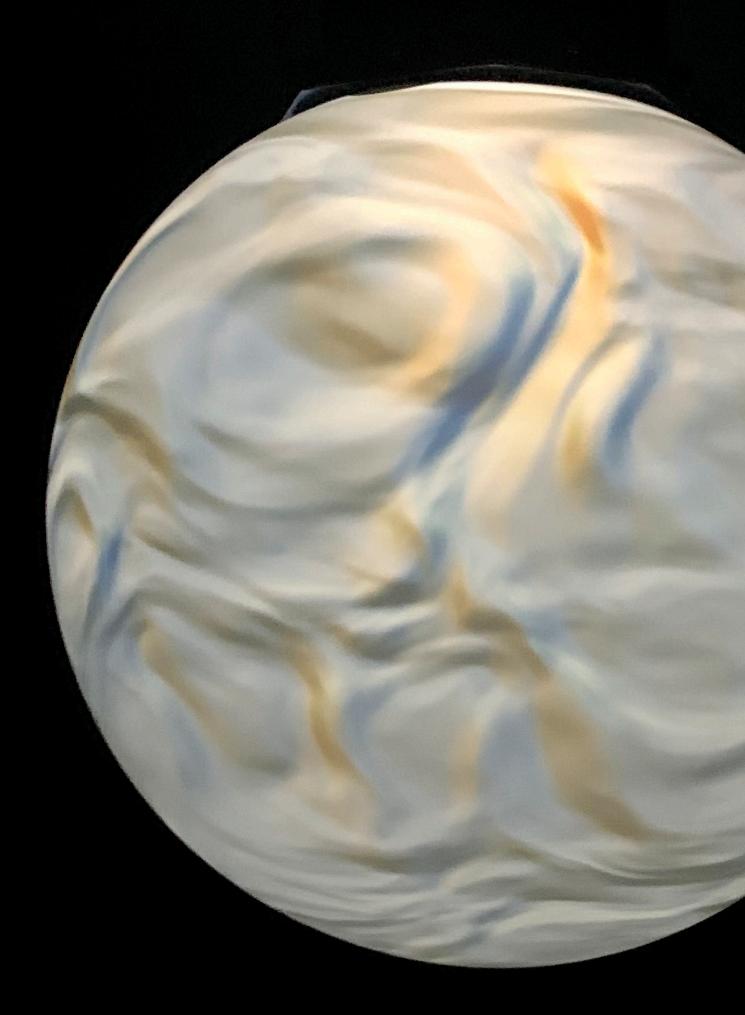


Figure 32 Visited light object of Nick Verstand named Anima, Stedelijk Museum Schiedam.





4.2

presenting the concept

Eclipse, a transformative theatrical ritual for women who have experienced pregnancy loss that puts in motion a continuous cycle of giving space for both the physical and the emotional aspects of experiencing such a loss.

In the previous part, define, the design direction is established and defined. The direction of designing a theatrical transformative ritual to support women who have faced pregnancy loss, in rediscovering their mind-body relationship, was chosen. This choice was made inspired by and in cooperation with Female Economy, a Dutch theatre company known (amongst other things) for their transformative theatrical ritual named Vrouwen in bad (translated: Women taking a bath). This ritual should adhere to the interaction qualities of loving, grounding and guiding. These qualities are based on the analysis of the workshops held and discussed in chapter 3.2.

The transformative theatrical ritual *Eclipse* is created for women who feel out of touch with their body or stuck in their grief after experiencing pregnancy loss. Experiencing pregnancy loss is an experience that affects both the physical and the psychological. In the aftermath of the pregnancy loss some women blame their body for what happened, whilst others try to punish or control the body. The focus on control is mostly present in possible subsequent pregnancies, as discussed in part 2. Discover This creates an imbalance with regards to the relationship one has with their own physical body. Additionally, in society the possible emotional impact pregnancy loss generates is often overlooked and not acknowledged in closer and wider surroundings. *Eclipse* provides these women with a ritual, comprising three sessions, that allows them to reconnect with their bodies. whilst also giving space to the emotional



Figure 36 A render of a 3D scale model of the Eclipse, close-up

aspect through providing tools to explore the body and the mind. Tools used in the sessions are guiding stones, cocoons, narrated experience stories and guided meditation. This ritual is continuous, as it is possible to perform the ritual at home after the sessions are completed. When participating in *Eclipse*, women start their journey of reconnecting with the physical body and come to terms with what happened, their emotions and the realization that they are not isolated in their experiences. The loss will not be processed, but the loss will be transformed into something that is part of the current reality.

The sessions, an overview
Eclipse consists of three sessions each
performed, in the ritual space, with the same
group of ±8 participants. In each session the
ritual, to reconnect with the physical body, is
performed, yet every session slightly differs

in content and actions as it is focussed on a different theme. The themes are: the physical body, it did happen, it may be and you are not alone. These themes were identified in the interviews held and research conducted in part 2. Natasja Walst, a psychosocial therapist specialized in fertility problems, verified these themes as relevant and recognizable for women who have experienced pregnancy loss (see chapter 4.4 Evaluating the concept). Figure 38 and 27 portray the overall experiential narrative of the women participating in Eclipse. In this figure a description can be found of each session and the effect it should have on the women experiencing it.

For a dynamic impression of *Eclipse*, download the video from the TU Delft Repository. The video was produced by Myron Wouts, with roles portrayed by Sophia Brans and Amy den Dekker.



Figure 38 A narrative overview of the concept Eclipse

First session

The women enter the first session with a feeling of disconnection regarding their body, or a feeling of being stuck in the aftermath of the pregnancy loss. When they leave the first session the first steps towards reconnecting with the body have been made. The first session centres around the 'the physical body,' whilst also providing more time to introduce the ritual properly. The

physical body,' whilst also providing more time to introduce the ritual properly. The women are introduced to the space, to the people guiding and supporting the session, to the ritual itself and to the other participants. The initial session will have a relatively lighter content, recognizing that the novelty of the surroundings and new acquaintances can already create a significant sense of intensity for the participants. If, for example, a participant is a bit overwhelmed in the first session, and can therefore not find relaxation, or be in the moment focussed on themselves, then there are still two other sessions to attend in which more ease could be found, as the people involved, the ritual performed and the surroundings in which it takes place should be more familiar (thus safe) by then.

In-between sessions the women are encouraged to reflect on the previous session and set a new intention for the following session, through the means of a booklet they may take home at the end of the first session.

Second session

In the second session, the ritual is performed again with roughly the same sequence of activities, but with content focussed on the topic 'it did happen, it may be.'

After the session the women should feel as if they made a deeper connection with their body and were able to find deeper relaxation. The content of the second session 'It did happen, it may be' could be a bit more emotionally taxing than the first session, as the intangibility, and therefore the lack of proof the pregnancy and the loss took place, is an important ad widely recognized issue faced of the experience of pregnancy loss.

In-between the second and the last session the participants are asked to reflect on the previous session and set a new intention for the last and final session. Additionally, the women are asked to perform the ritual at home, alone or with their partner. This allows them to reflect on the ritual and what works for them in the context of their own home, to improve the chances of continuing the ritual after the sessions are completed. However, having performed the ritual at home is not mandatory or needed to attend the last session.

SESSION 3



After the second session, a connection is made between the mind and the body and how to discover what you feel and allow for these emotions

assignment

Reflection (in the booklet) Perform the ritual at home Setting a new intention for the last session

theme You are not alone Feeling the loss is shared, whilst being in contact with the individual experience

After the second session, the participants do not feel alone anymore. They feel the space to voice their owr story, in connection with the self.

Third session

experience of the women attending Eclipse, as the theme of the session is 'You are not alone.' Even though 1 in 5 pregnancies end in pregnancy loss, an often-mentioned part of experiencing pregnancy loss is the feeling of is the result of the silencing of the experienced pregnancy loss. Even among friends and family it is a rarely discussed topic. Therefore, only statistically know they are not alone, but also feel they aren't. This is achieved through hearing experience stories and emphasizing in who have faced pregnancy loss as well, each should feel connected to themselves, their own story, their body, as well as the other women in the space. They should feel they are not alone in what they experienced and that they are not weird for how they are feeling and This session can unfold in two different ways. It can either be very similar to the previous two sessions, or one participant of the previous group, could share her story in the session, guided by the session guide. This allows a space and time for women who want to voice their story themselves. Hearing an experience story straight from the person who experienced could have a big impact on the intensity and connecting aspect of the session, as well as on the individual sharing her story.

After the sessions tools are provided to be able to continue the ritual at home, either alone or with loved ones. A digital platform is available in which the participants can find audio of the chanting of the sessions, experience stories and guided meditations based on different topics.

The creation of the ritual

To create the ritual, inspiration was found through analysing already existing rituals and forms of storytelling. Through attending, looking at and researching rituals (o.a. by going to performances, museums, seeing documentaries, and reading the book Healing power living traditions, global interactions) elements forming a ritual were derived.

Examples of these elements are music, language, nature, and symbolism. The ritual incorporates these elements. Music is made, rippling water and hot stones are integrated from nature and in the space, subtitle shapes and aesthetic choices are used to represent femininity and womanhood.

A ritual is often lead by someone. This person has many names, such as shaman, seer, or spiritual specialist. This spiritual specialist possesses special knowledge that allows them to perform this ritual. They have a big influence on the feel of the ritual, as they guide and determine the steps of the ritual. In *Eclipse*, this role, the one who navigates the session, is called 'the guide.' The guide ensures a clear focal point for the session, serving as both a reference point and as a friendly confidential face for the participants.

These elements in combination with the analysed narrative sequence, together with and inspired by Campbell's hero's journey, form the (narrative) blueprint of the design. Chapter 4.3 elaborates on these sources of inspiration and the design decisions made.

The ritual journey

In the previous paragraphs, we have talked about the overall concept and intended effect of the transformative theatrical ritual, however the ritual itself is not yet described.

Starting the first session, the participants enter the ritual space through a entrance filled with strips of soft fabric. Then each participant is initiated into the session as the guide washes their hands. The participants pick a guiding stone, of which the warmth, shape and weight help to explore and focus on the body. The stone is taken from the pond in the middle of the ritual space. Then a cocoon is picked to spend the remainder of the session in. When in the cocoon, the participants listen to other experience stories followed

up by a guided metitation, as explore their own body and mind-body connection. The session is concluded by allowing a moment of Reflection. These reflections could be shared in the group. The participants have been given a booklet and an assignment to reflect on and set a new intention for the next session.

The next session follows the same sequence, with the exception of the stones being brought in and heated up in the space first. The assignment given after the second session is to perform the ritual at home, for this audio from the session is provided. The

In the last session the same sequence of activites is perfromed, with the exeption that a participant of a previous group could be present for this session to share her story. Then the ritual sessions have been brought to an end, hower the ritual itself could continue, as the participants receive the tools, the guiding stones and more audio files including the music and guided meditation, to conduct the ritual at home.

The above explains the ritual in summary, however, to fully understand the ritual it is best to view the ritual in detail places in a context. Therefore, on the following pages, the ritual is explained through the means of a scenario. The sequence of events and the interactions inside of the ritual are explained through a sketched-out scenario from the perspective of Sam. The first session is shown extensively, but as the second and the third session are similar in essence, they are covered in a more summarized manner.

Words in a **bold** font, signify their present in the next section; the interactables and story elements.

Important to note is that this scenario is a blueprint for what the sessions might entail, as, depending on the guide, their personal style and their perspective on the topic, the sessions could be adapted. However, it remains crucial the sessions are conducted with sensitivity and care, as a requirement for the experience is that the participants feel safe and looked after. Only then the participants can let go and experience the session in the moment [47].



It has already been some time since Sam and Alex experienced their pregnancy loss. Although time has passed, for Sam it feels like she barely did. After the pregnancy loss, she feels out of touch with her body. Even though Alex says she shouldn't, she feels the loss is her fault; her body's fault. Even Alex seems to be moving on, the world is moving on, yet Sam seems to stand still.

Sam is scrolling on Instagram and an advertisement caught her eye. It says: 'Eclipse, a transformative theatrical ritual, created for women who have experienced pregnancy loss.' After reading the description, she closes the application and decides to think about attending. Maybe this could help?



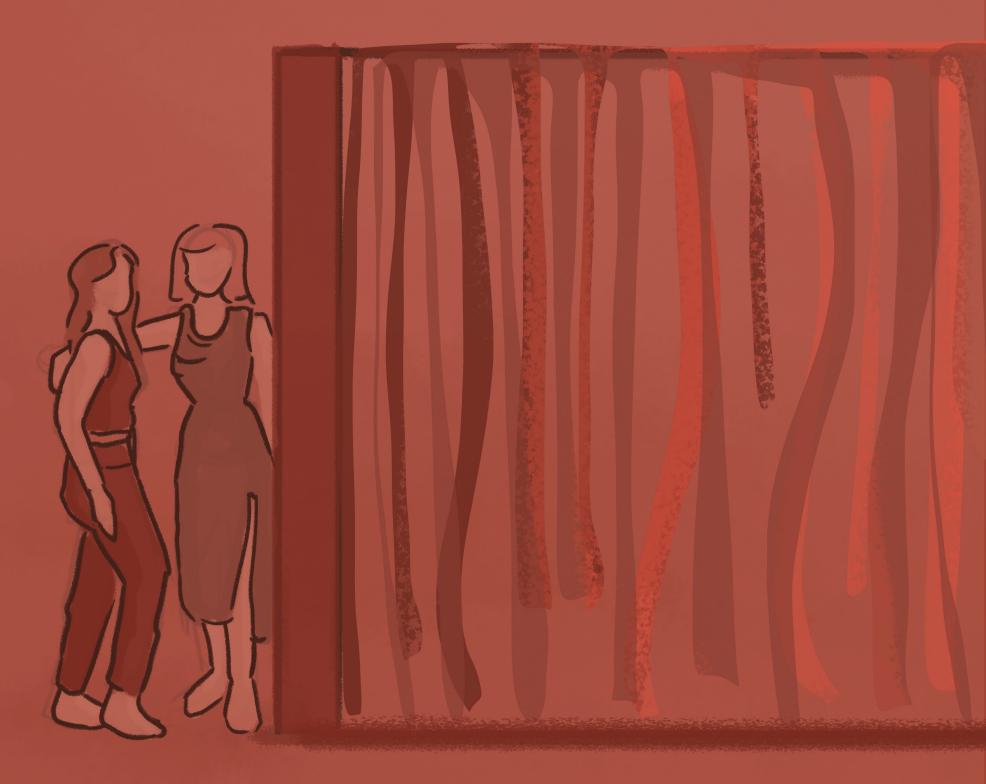


Sam has decided to participate in *Eclipse* and receives a welcoming email with information about the time and place of the session. A recommendation is given to wear clothing in which you can move freely and feel comfortable. The email also includes a question for Sam. It states: 'Before coming the first session, we ask you to think about your intention for the first session. What made you decide to attend *Eclipse*? What do you hope to gain from this experience?'

With this email in mind, and comfortable clothes packed in her bag, Sam leaves after work to the location described.



When she arrives, she is welcomed with open arms by **the supports**, these are people supporting the session. Sam is told they are there to help run the session, yet they are not an active part of the session itself. The session will be led by **the guide**, whom she will meet in the ritual space. The support also tells Sam where the toilets are, where she can change and is offered tea. As Sam is drinking her tea, other women start to arrive as well.

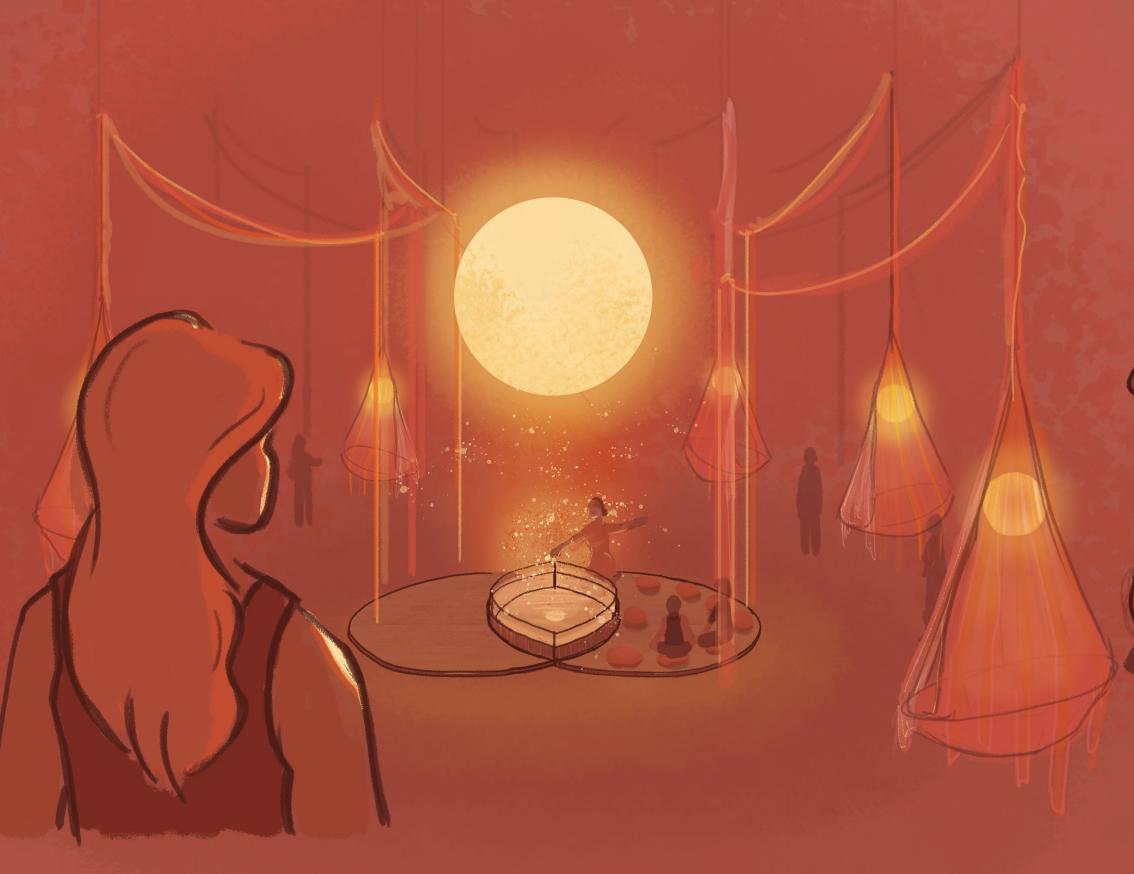


When the tea is finished, Sam is asked if she is ready to enter the space. Sam is guided to the entrance and walks in. The entrance seems dark as there are many strips of soft semitranslucent fabric hanging from the ceiling. She breaths in, breaths out, and decides to walk in

The entrance is dark, but as she is walking, orange welcoming starts seeping through the strips of fabric. As Sam walks, the strips of fabric softly brush against her face and

body. While navigating through the fabric Sam smells a faint pleasant scent. As she comes closer to a warm orange light, the scent becomes stronger. The scent is sweet and warm. While Sam is walking, she detects a faint humming and the sound of rippling water.





Sam enters the ritual space. A warm orange light is spread through the space, coming from a **pond** in the middle of a room. She smells the sweet scent of oranges and cloves as she breaths in. Sam notices the humming of three women, all standing in-between the hanging cocoon-like objects, facing the middle of the room. The humming is repetitive, yet soothing.

A woman, the guide, sitting next to the pond in the middle of the room gestures Sam to come and walk towards her. She welcomes Sam and points at a cushion across from her for Sam to sit on.

While Sam is sitting there, the guide is moving her hands slowly through the water. Sam takes a moment to take it all in; the humming women (the voices), the smell, the refraction

of the water, the guide in front of her and the other women in the space. She feels a bit overwhelmed at the beginning, but as she is sitting and looking around, Sam is getting used to this new space she's in, and Sam feels more ad ease. While Sam is sitting and looking around, other women start to enter the space one by one. The guide welcomes each individual and directs them to their seats.



When all the seats are taken the woman in the middle of the space, starts to speak. She introduces herself as the guide of this session and explains her connection to the topic of experiencing pregnancy loss. She welcomes all the women in the session and allows for a moment to be aware of the other women participating in the session.

Thereafter **the voices** are introduced.
These are the women standing in the room, humming. They will contribute to session through song and narrated experience stories from others.



The guide walks towards Sam and extends her arms. Sam takes the guide's hand and lets her help to stand up. Then Sam is guided to the pond. 'What is your name?' the guide asks. 'Sam,' Sam says. 'Welcome, Sam.' The guide proceeds to softly wash Sam's hands with the fragrant water from the pond. While she washes her hands, she asks Sam if she promises to be kind to herself and the other women in the ritual space, to not judge, but to

experience. Sam nods 'yes.' The guide explains that the stones in the pond, will be used in the session. Every participant, including Sam can pick one. From that moment on the stone picked, becomes Sam her own personal stone. 'The stone represents a part of her life, that is stored in her body', the guide explained. The stone is warm and can be moved to places in which tension is felt, or places that help relax.



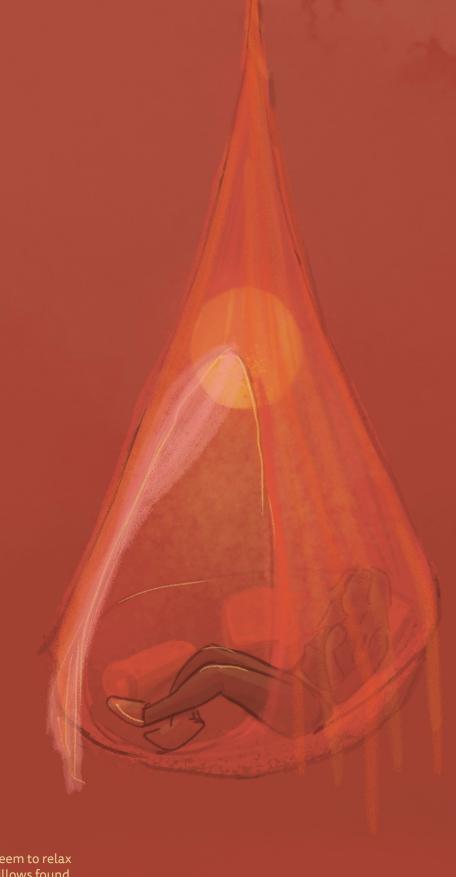
Now it time for Sam to pick a guiding stone. She looks around in the pond, and one stone catches her eye. It has an almond shape and a green colour. Sam takes it out of the water. As she is looking at the stone, the guide gently dries Sam's hands with a round towel. While she is drying her hands, she asks Sam if she has formulated an intention for the session, and if she does, if she maybe wants to share it with her or with the group. If she did not set

an intention yet, then Sam could use the next few moments to think about what she hopes to gain from this session. Sam, Nods. Sam did already formulate an intention, but decides not to share it. When dry, the guide wraps the towel around Sam's hands. Sam sees that a rope has been threaded through the towel, allowing you to use it as a pouch for the stone by pulling on the ropes.

The guide tells Sam that she can pick a **cocoon**, hanging in the ritual space, that feels right to her. If she does not feel comfortable with the idea of a cocoon, there are also places on the floor available called **nests**.



Another woman, one of the supports, extends her hands to Sam and guides her to the place of Sam's choosing. Sam picks a cocoon a bit left of the centre of the room. The support helps Sam to get in her cocoon and asks her about her preferences with regards to the opening, the direction, and the movement of the cocoon. Sam decides she wants her cocoon open, hanging still in the direction of the pond.



While lying down in her cocoon, with the warm stone, Sam hears the names of the other women in the session and sees them, one by one, go through the same initiation Sam just went through. In the meantime, Sam holds the stone in her hand and places it on her body.

The stone radiates warmth and has a certain weight that feels comfortable on her body. She puts the stone on her shoulders, through the

weight and the warmth, they seem to relax a bit. She moves some of the pillows found in the cocoon. Sam is making the cocoon her



When everybody found their place in the ritual space, the voices stop humming for a second, yet you can still hear their slow and deep breathing patterns. The light dims slowly and turns more orange. The guide speaks and explains that now different experience stories will be told by the voices. All Sam has to do is be in the moment; listen and focus on her body and breath.



The voices take turns telling an experience story. When one is telling a story, the other two softly hum or are silent. The stories told revolve around the bodily experience and what happens within the body when experiencing a pregnancy loss, from the moment you are wishing for a child, to the moment the loss takes place.

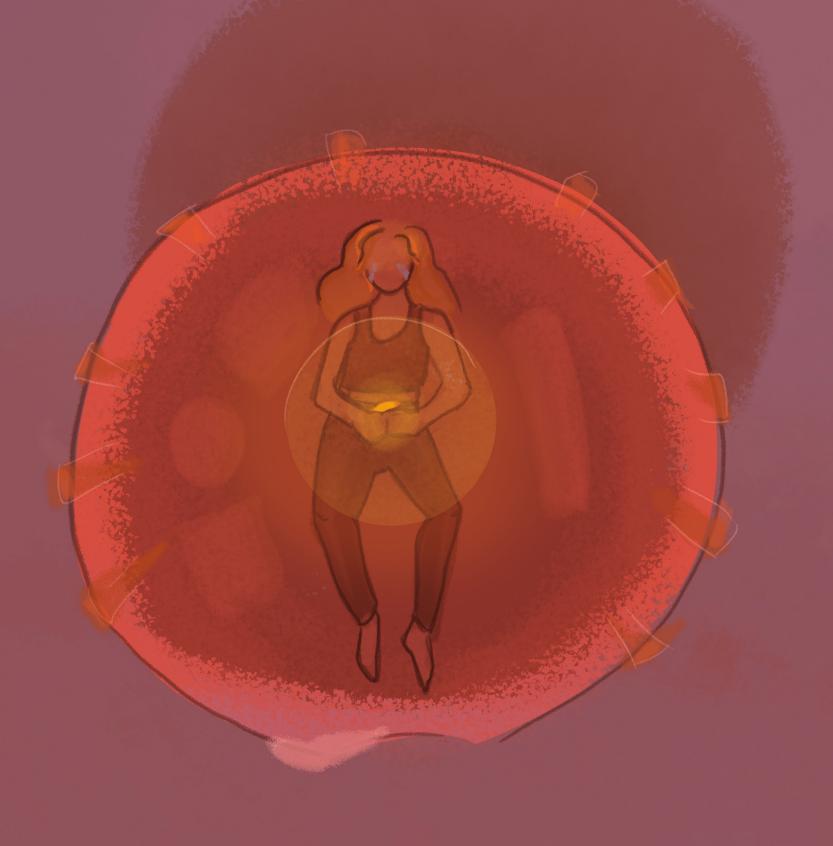


sam is especially touched by the second story. The story described how helpless and vulnerable the physical experience of the loss; the pain of having to let go whilst not knowing what is happening. Sam feels her throat tighten and her belly ache. Sam moves the stone to her chest and breaths. The warmth and the weight of the stone helps Sam to relax.

After the third story, the humming softly resumes, but with a different melody. The tempo of the rhythm of the breath is even slower this time. The lights dim even more and turn a deeper orange The sound of the rippling water slowly diminishes. The guide starts to speak. Sam closes her eyes. A guided meditation takes place, in which the guide first places attention on the body through the breath. From there they go over each part of

the body, from the bottom of the feet to the crown of the head. Introspective questions, with regards to the stories they just listened to, are asked. These are questions such as: 'Was there anything you heard that resonated with you? If yes, could you go back to that moment? What did you feel emotionally, but also in your body? Go to that place. What colour does it have? Is it dynamic or static? If it moves, follow it without judgement.'

The guide reminds the participants to keep breathing in-between these questions.



When the intrspective question 'Is there anthing that resonated with you?' is asked, Sam immediately knows which moment it was for her. Sam is asked to explore to this moment, as she relates it to her own experience. She feels the pain in her stomach as a round red circle, which slightly pulsates. She places the stone on her belly while laying on her back and breaths. She feels tears welling up and lets them come.

During the mediation Sam picks up another scent, a minty and eucalyptus scent. Sam takes a deep breath in. The scent slowly takes over the room as the light in the ritual space turns gradually to a mixture of purple, orange and blue.





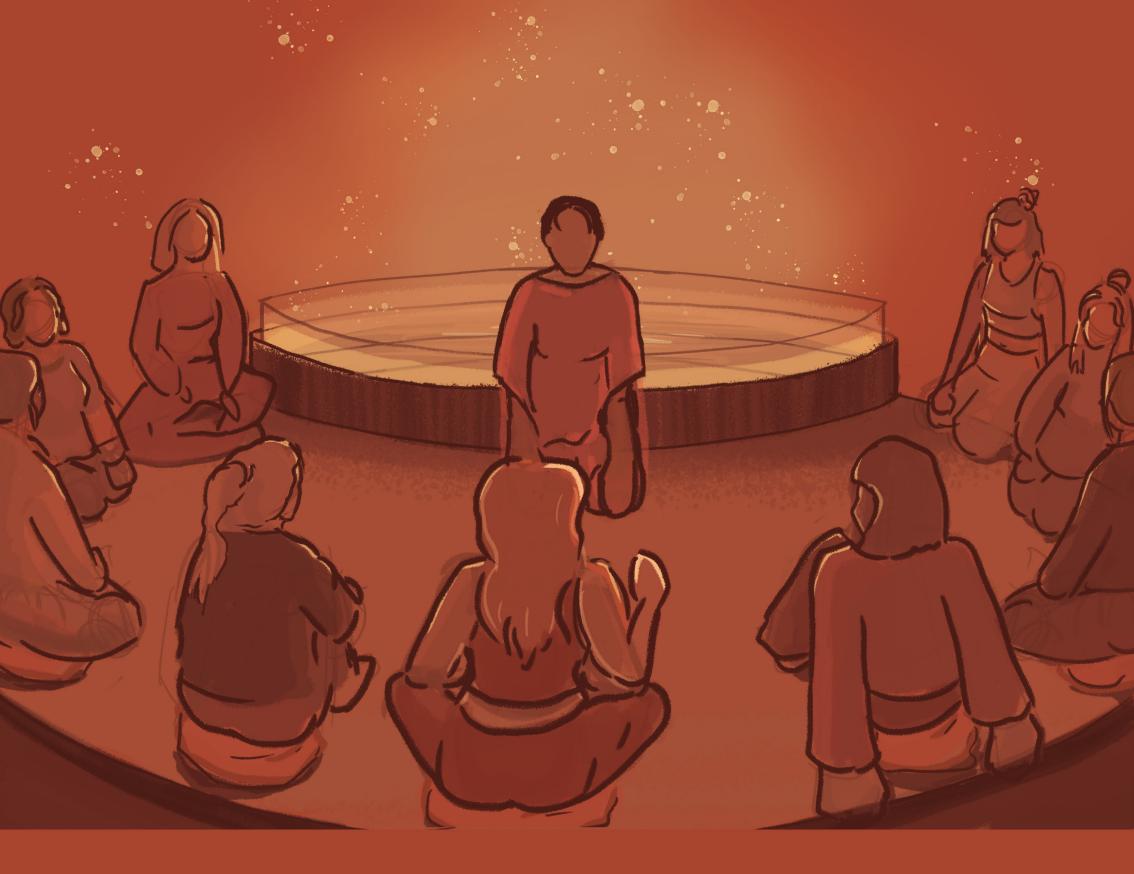
As the guides resumes talking, the voices also continue their humming, gently, and the lights increase in intensity again. The guide guides all the women back from their meditative state and prepares them to come out of the cocoon or stand up from the floor. Slowly all the limbs and digits are moved, until the participants feel ready to move again.

Sam slowly gets up. She feels rested and relaxed, as if relieved. One of the supports helps her out of her cocoon and makes sure she stands secure.



The guide is now seated on the other side of the pond and gestures everyone to come sit with her. She and the support help the participants sit down on the cushions on the floor. A different scent is spread across the room, a bright and citrus-like scent. The scent of bergamot. The lights slowly transfer from a dimmed orange to a brighter yellow, orange.

When everybody is seated the guide starts talking. She grounds everyone in the current time through asking questions like 'How do you feel now?' and 'How does your body feel?' The guide says 'Look around in this circle, see all the other wonderful women with whom you have experienced this session, each of them with their own individual yet shared story.



Then there is time built in for a reflective moment. This reflection could be shared, but this is only a suggestion. The guide asks: 'Is there anything you experienced that you would like to take with you when we leave this space? Or anything you experienced that you would like to share?' Sam knows exactly what she wants to take with her from this session. She feels a bit anxious, but she decides to share her revelation anyways.

Sam says: 'I want to take the softness and the kindness found towards my body with me.'
Some of the other women nod in agreement and others share their story as well.



The guide closes off the session by introducing one last musical piece. This musical piece includes all the melodies and motives hummed throughout the session. The guide invites the women to hum or sing along, if they feel like it. She adds: 'You are welcome to stay seated until the end of the piece, but if you want to leave before that, you are welcome to do so. I will be standing near the exit of the space. You are welcome to bring your stone

home or to leave it here in the Pond. If you leave it here in the pond, you need to mark your stone before placing it back in the Pond, so you'll recognize it next time. In these last moments what feels good to you, right now; the choice is yours.'

Sam stays seated until the song has ended. She does not feel like humming along but felt great just listening. Sam decides to pick up her stone to take home. She stands up and walks over to the guide. The guide takes her hand and thanks her for her participation. She also gives Sam a booklet. She tells Sam to use this booklet to reflect on this session as it might help to prepare for the next session. Nothing is mandatory though. Sam takes the booklet and with the stone in hand she walks back through the soft strips of fabric.

SESSION 2





When home, Sam reads the booklet and fills in her reflection of the previous session. While filling in the booklet, she keeps her almond-shaped stone next to her, and rubs it occasionally. It helps her to remember. Through reflecting, Sam is able to formulate a new intention for the following session.

A week later, the second session takes place. This session follows roughly the same sequence of actions as the first session, albeit with a different and more intense theme. This theme is mainly reflected in the experience stories told and in the guided meditation. Another difference felt by Sam is, when entering the room, the space, the women and the ritual feel already more familiar.

When Sam goes home after the ritual she feels even more in connected with her body, but also with the loss. Sam also recognizes the significance of her experiences, both in the

past and the present. It did actually happen, and it is allowed to take up space. Feeling and knowing this, is a huge relieve.

At home, the assignment from the booklet is to reflect on the previous session, set a new intention and perform the ritual at home. Some guidance is written on how to perform it at home and how to prepare for it. Through a link to a website, Sam can access audio she can use to guide her session. Sam performs

SESSION 3 theme You are not alone

the ritual in the bathroom. At first it feels a little bit uneasy, but the audio recordings and the lit candles and incense helped. Next time she might perform the ritual in the bedroom, as it might be more comfortable.

The last session is a bit different, as a new woman, who previously participated in *Eclipse*, is joining the session to share her story. When Sam enters the ritual space, the woman is already there. The session unfolds quite

similarly to the previous sessions, however instead of the voices telling experience stories, now the woman in the centre near the pond tells her story guided by the guide and accompanied by the humming of the voices. Hearing a story from the person themselves felt very powerful to Sam. She knew already she was not alone in experiencing pregnancy loss, but now Sam felt it too; Sam and the other women attending the session.

When leaving the session space, Sam feels grounded in her body, loving towards her own experience and not alone anymore. She has seen these other amazing and strong women with a different, yet shared experience. Many she might never speak to again, but with whom she did share this moment in connection.



After the sessions, Sam and the other participants were granted access to a website where several audio files can be found of the humming and guided meditations, sorted in different themes as well. These audio files can be used to conduct the ritual at home individually, but also together, for example, with your partner.

Sam asks if Alex would like to join her in one of the rituals at home. Alex has seen glimpses of the ritual, as Sam has performed it at home a few times by now. Alex's curiosity wins over the first felt apprehension.

In their bedroom Sam and Alex practice the ritual together. Sam heats up the stone, lights some incense and puts on the audio. As the audio plays, they move the stone together over Sam's body and then over Alex's.

After trying the ritual once, Sam and Alex start performing the ritual more often. It feels good to do something together again, to connect.



A few weeks after the session, Sam gets an email. *Eclipse* is searching for someone who might want to share their story in the next group participating in *Eclipse*. Sam thinks about it, maybe she will.

Interactables and story elements
In the remainder of this chapter the interactables and the story elements will be described and the design choices for these elements will be explained. First, the people involved in the session are discussed and explained, then the interactables are listed in chronological order. As the people involved carry a certain role in the narrative of the ritual, these are called story elements. In chapter 4.3 and 4.4 further explanation can be found on the overall flow of the sessions and the aesthetic choices.

Please, go to appendix H for the ideation that led to the creation of these interactables and story elements.

Story elements

The women who guide, voice and support the session are all recognizably dressed. They wear clothes made of chiffon, to create clarity on who are facilitating the session and who are participating.

The supports

The supports are working behind the scenes, and in the ritual space, to support the session. They welcome people at the location and make them feel at home through offering tea and reassuring them, if they have any questions before the session and look after the participants after they have left the ritual space. During the session they help the participants in and out of the cocoons or from the Floor. They provide support for the session as well as for the participants, in the moments the guide cannot.

The guide

One of the central points for the session is to be guiding and loving, and through this means allow the women to feel safe, and comfortable. For safety trust is needed. Through the guide, a vocal point and a trustworthy face, is implemented. This is a woman you can touch, and you can talk to. This allows the women to find a point of reassurance. The guide should be kind, understanding, yet also clear in her guidance. For the participants, not knowing what to do could cause doubt. Doubt triggers feelings and an alertness that is the opposite of safe and secure.

The guide should have a good understanding of what it is like to have experienced pregnancy loss, either through experience, or empathy and research. Additionally, she should be able to guide, all the while preserving the autonomy of the women taking part.

The voices

The voices are three women who, throughout the session, hum a capella ,without instrumental backing, different musical motives throughout the different activities of the sessions. The humming never takes centre stage, but is present almost throughout the entire session. The slow pace and the audible breath are meant to give the ritual space, and the session, a calming and relaxing ambiance.

The choice for three women physically there humming live, instead of using instruments or recorded singing, is based on research conducted by Jordania, a well-known ethnomusicologist. He states that 'humming and singing are powerful means to relax a person experiencing a physical or emotional pain, and can help to alleviate panic attacks' and that 'humans feel more secure when hearing the voices of other humans, and if no one is around, even hearing one's own voice can create a soothing background to relaxation' [57]. Humming has a calming and connecting effect on humans, which would enhance the concept's purpose.

The voices voice real experience stories of women spoken to and interviewed before the sessions take place. Through this, a clear difference is made between the guide and the voices. The voices are singers/actresses voicing other people's stories, whilst the guide is not acting or saying anything that is not true to her personal story or expertise. This is important as it would be unjust to expect the participants be vulnerable, whilst being guided by an actress who is playing a role, and therefore not being her own true self.

Figure 39 Picking a stone, an image from the video created to present the concept

Interactables

The interactables listed below are all designed with the design goal and the interaction qualities in mind.

Entrance/exit

To create a clear moment of transition between the ritual space and the ordinary world, an entrance is designed, shaped similarly to a tunnel, with strips of soft fabric suspended from the ceiling. Whilst walking through the tunnel, the body will be gently touched by the soft fabric, as it brushes against the body and the face, while the participants are finding their way to the ritual space, and back. The strips of fabric softly touching the arms legs and face, gently creates the first contact with body. Additionally, this entrance/exit allows the participants to leave the ordinary world behind for a moment and take their time to come back to it.

Pond

The pond is the centrepiece of the session. In many rituals circles seem to be a recurring symbol; Circles of people sitting, standing, dancing, holding hands, gathered around a centred element. The pond itself is not round, but shaped after vesica piscis, which will be discussed further in 4.4 Determining the aesthetics.

Having such a centrepiece creates structure and focus, as the sessions both start and end near the pond. The pond also adds to the feeling of wellness, as we often relate elements of nature to the idea of taking care of yourself. The pond is panelled with wood and from the pond light is refracted through the movement of the rippling water. The refracted light that is scattered throughout the space gives the space a feeling of nature and soft fascination. Soft fascination occurs when looking at slightly changing light patterns often occurring in nature. For example, refracting of light from water, the shadows of trees, and so on. These phenomena are found to support the restoration of mental fatigue, in other words, relaxation of the brain [58]. For some women, this relaxation of the brain, might be beneficial for the reconnection with their body, as their head might overstimulated by thoughts of worry and future plans.

The pond features hot water of $\pm 45^{\circ}$, which is used to heat up the stones, but also to spread

the different scents through the space. The vapour coming from the water together with the scented oil helps to spread the scent through the ritual space quickly yet gradually. Additionally, the pond heats up the stones in the hot water and afford the ritual to take place connected to the pond, the centre of the experience.



Figure 40 The pond prototype, with the cocon in the background. Final test set-up.

Guiding stones

The stones function as a tool to reconnect with the body. They are made from different colours soapstone sculpted into several kinds of tactile shapes. These stones can be found in the pond in the middle of the experience, in which they are warmed up. The stones symbolize a certain part of the experience of pregnancy loss that is stored in the body. The warmth and the weight of the stones can be used to focus on, and relax these parts that require attention.

The use of a warm stone, heated in water, is preferred over an electronic device that could heat up is because the tool should be simple. It should not have buttons or other distracting features. The meaning of the stone is not derived from the complexity of the element itself, but of the meaning attached to it by the participant.

With the guiding stone, a complementary towel is given, as the stone is softer to move on the body when dry. Additionally, this towel, as a thread runs through it, allows the participant to transport the stone in a pouch.

Cocoon

The cocoons allow the participants to be part of the group, whilst also having their own private space. This is important as the sessions focusses on the individual, whilst being in a group. The meeting and presence of like-minded people at a certain location and moment in time can be beneficial to the experience, however the idea of being in a group should not take the overhand. Similar to going to a yoga class, you are there for yourself, with your own intentions and goals for the session.

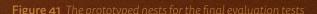
The cocoon offers different levels of privacy. The curtain at its entrance lets participants adjust their space's openness, allowing for more or less privacy and connection to the group. However, as the curtains draped on the cocoon are semi-sheer, the participants are never fully sheltered from the group.

The sense of connection is visually depicted by the interlinking of cocoons through fabric strings leading to the centre of the ritual space All cocoons feature a similar built-in light that resemble the light above the pond.

As autonomy is important, when vulnerability is requested for the experience, the cocoon should allow for different positions. The cocoon with 1,5m in diameter is big enough for the participants to lie down or sit in, or find any posture they feel comfortable in. The cocoon supports the body while softly rocking in space. The swaying of the cocoon and the pull of the gravity could help with the feeling of relaxation and Safety. One of the participants evaluating the concept even compared it to being in a mother's womb (chapter 4.5). In the cocoon different pillows and a blanket are found for more comfort and adaptability; Everyone can make the cocoon their own.

Nests

To provide the participants the choice to find their spot in the ritual space, next to the cocoon, places on the ground are also made available. These could also be used in the last session for possible duo interactions, but also offer a solution for participants who prefer connected to the ground. This could have a variety of reasons, feeling afraid the cocoon might not be able to carry their weight is one of them. These nests should not feel 'less' than the cocoons, as the participants should not feel this is a lesser choice. The nest consists of a soft mattress as an under layer, many pillows, a thick blanket, and chiffon curtains that allow for a range of privacy. Above the nest a similar light is placed, that ties the nests to the cocoons and the lamp above the pond.



Booklet & Digital platform

The booklet received at the end of session two, at the platform entered after completing the sessions are created to support the women through the experience and after. The booklet provides the women a space to reflect in and set a new intention, whilst the digital platform offers the participants instructions, and a way to continue the ritual at home, alone or with loved ones.



4.3

finding the blueprint

Conceptualizing the ritual

In this chapter a book 'Healing power living traditions, global interactions' is discussed, to distil the components used in a ritual, so these can be designed with. Additionally, a narrative structure, the hero's journey by Campbell, is employed and adapted to be used as the blueprint for the narrative of the design.

In the book 'Healing Power living traditions, global interactions' by C. Buijs and W. Welling (eds) practitioners and/or academics share their insights and perspectives on the topic o rituals. Through analysing the discussed rituals and insights in the book, an overview was created which displays elements and artefacts that often occur or appear in a ritual (figure 44). This figure and some of the components shown will be used as a foundation for the ingredients needed in the concept. On this spread some of the terms shown in the figure are explained.

Elements of rituals Spiritual specialist

The term 'spiritual specialist' introduced by Buijs and Weldings, refers to the shaman, the mentor, the wise person who mediates between both realms (earth and the spirit world), the guide of the ritual. The spiritual specialist, the guide of the session, should be able to enter and both realms. This ability allows for special knowledge to be granted. The spiritual specialist therefore holds special wisdom.

So, the session should have a guide in some shape, way or form that lead the ritual and has special knowledge about the mind-body connection.

A question to be answered

Rituals, as described in the book, are done with purpose. They are either performed to restore balance (to aid illness) or as a rite of passage/transformation (for example from childhood to adulthood). Depending on the tribe, the goal and the people who are there, a certain ritual is performed.

A set of conditions

Witchcraft is recognized and thriving in Romania in the current times. The Minca family, a family existent out of Romanian witches, perform a ritual called 'Sânziene' yearly, with each summer solstice (figure 43 and 45). The ritual allows them to predict the future. All the women gather at night and dance around bonfire with floral crowns on their head and look into the stars. The ritual needs to take place at midnight on the evening of the summer solstice. It is believed the sky will then open up, so they can read the future of mankind the stars. The spiritual specialist, with a burning broom in hand, is chanting a certain hymn, allows them to see the future. Additionally, it is important to wear beautiful white clothing, with metal or stones attached to reflect light, as it is believed to spread happiness, love and beauty. You cannot take part if you do not wear the right dress [59].

These are some examples of the conditions that create the platform in which the ritual can exist. These conditions, or rules, can also determine the sequence of events of the ritual. An example of this is rituals starting with awakening or calling the spirits (through different actions). Without the link to or communication with the spirits these types of rituals cannot be held.

Most rituals have some directly or indecently agreed upon conditions. These conditions can be seen as a set of rules that build a (safe)

platform in which the session can take place. An example of these rules is that the ritual can only take place at a certain location and time with a certain set or amount of people. An example of this is the summer solstice.

Another example of these rules can be found in a more unexpected place when thinking about the realm of rituals, the theatre. Firstly, one could argue going to the theatre is a ritual of some kind. People dress for the occasion, agree to meet at a certain special place and time, drink and eat accordingly and listen to the people on the stage to gain knowledge or be entertained.

Peter brooks, a world-renowned British director famous for his renewal of the way we look at theatre through his thought-provoking book 'The empty space.' He made the following statement, in which he portrays the rules and conditions needed for something to be engaging and to be called theatre.

"I can take any empty space and call it a bare stage. A man walks across this empty space whilst someone else is watching him, and this is all that is needed for an act of theatre to be engaged." Peter Brooks

This phenomenon Peter Brooks describes, could be seen as the bare constraint for something to be a theatre. For the design, we therefore need a (safe) platform in which the ritual is performed with a certain set of rules is clear to everyone who attends [60].

Artefacts used in rituals

In the previous section, some artefacts were already mentioned i.e.; a broom set on fire, a certain hymn, white clothing and crowns made from branches and flowers (figure 43). In



Figure 43 Screen shot taken from the vice video Witchcraft in Romania [59]

figure 44, the different categories of artefacts often used in rituals are shown. Artefacts such as these can hold great power. Sometimes this power given to these objects or actions through another ritual, during the current ceremony, or they already have innate spiritual power through being made from elements found in nature.

Additionally, these artefacts can create meaning through **symbolism**. The drums used in Norway to prepare for coming in contact with the world of the gods are also a good example of the meaning symbolism can hold. The drum helped to transport the healer to the other spheres through the images depicted on the drum (skies, boats, birds, whales, fish and reindeer).

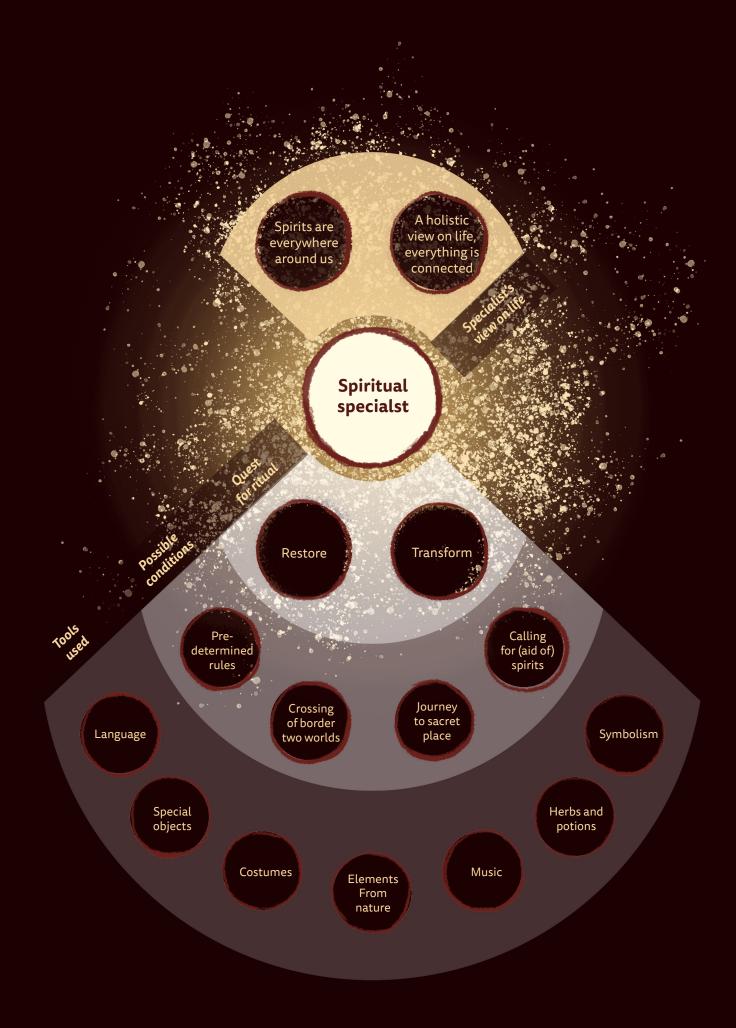
These drums also serve as an illustration of the frequently employed **music** within rituals. The beating of a drum, singing, or using other either recognized or special instruments is often used to either awaken or communicate with the spirits [49].

Clothing also communicates the role or ability someone takes on within a ritual. Special gear is often made with special materials (from nature) all deliberately picked with a certain meaning attached.

Whilst analysing rituals, a often recurring symbol is the **circle**. As illustrated by the ritual of the Romanian witches explained in the previous section, rituals often take place

around a centred object. This object holds a certain meaning or power. It could be a bonfire, a secret object or, in case of rituals featuring dancing, a sacred dance. While designing, I was inspired by this recurring phenomenon.

Language is an important part of rituals. The words used or created to describe specific phenomena or artefacts create a great part of the importance. There is meaning in what is said, done and the sequence thereof, even down to the sentences said or repeated.



Explanations of figure 44

Specialist's view on life

This refers to the way the spiritual specialist views the world, and thus, performs the ritual. Across the rituals viewed and analysed there were two predominant views on life; a spiritual word, in which every thing could harbour a spirit or energy, and a holistic world, in which everything is connected to each other.

Quest for the ritual

The analysed rituals are often performed with a question or goal in mind. The aim could be to restore spiritual imbalance, which could cause sickness or health problems, or to transform the participant of the ritual. These rituals performed for rites of passage are often practiced when someone is transferring from one group to another. Current day examples of these are weddings or funerals. There might be additional quests that could be addressed through rituals; nonetheless, within the examined rituals, these were the predominant objectives.

Possible conditions

Before starting a ritual, the participant, the guide, or the ritual itself, must adhere to both spoken and unspoken conditions. Some rituals can only be performed at a certain time of the year at a specific place and time, whilst others require special knowledge from the spiritual specialist. Some even require the aid of spirits, which first need to be called, as part of the ritual.

Tools used

The analysed rituals incorporate various commonly used tools, encompassing specialized language, significant objects, and natural elements. These objects, which could be functional items like staffs or braziers, as well as attire referred to as costumes, hold symbolic significance and often bestow power upon wearers. These rituals are interwoven with nature through the incorporation of elements like costumes and objects, while music, herbs, and potions play roles in invoking spirits and creating the ritual ambiance. Symbolism is consistently employed, seen in engravings and carvings on items and clothing, aimed at imbuing them with purpose and potency.



Creating the blueprint

The idea of circled led me down a thread which ended at the Hero's journey of Campbell. This is a circular framework that describes the journey hero's, known from fairy-tales and books, go through. This circle can also be used to design with, as Wouts has proven in his thesis about death education for children [61].

The Hero's journey is based on rite of passage rituals, amongst other things, as to why it connects and can be somewhat applied to the rituals analysed and visited, such as *Vrouwen* in Bad. In figure 44 an example is shown of what these transformative theatrical ritual entail, and the elements used. To get a better idea of *Vrouwen* in Bad and the inspiration I have drawn from it, please, go to appendix F

The Hero's journey uses different terminology and slightly different sequences than rituals analysed and experienced. Consequently, a new blueprint for rituals is created based on the heroes journey mixed with the analysis of *Vrouwen in Bad* and other rituals shown in this chapter.

This resulted into the blueprint, named *The ritual journey*, shown in figure 46 and 47. This blueprint, together with the artefacts and elements derived from the analysis of rituals, form the foundation of *Eclipse*. The sessions of *Eclipse* follow the sequence of events shown in the blueprint, whilst using the elements and artefacts in the ritual itself.



The ritual journey explained Ordinary world

The ordinary world is the current, day-to-day world. From the ordinary world a journey is made towards the special world. This journey is made with a quest, a quest to reconnect with the physical body and restore the mind-body connection.

Special world

The special world is where the ritual takes place. This world is special as it looks and feels out of the ordinary, and different rules apply inside this space.

The journey towards

The journey towards encompasses the call to the journey, the feeling of disconnection with the body after experiencing pregnancy loss, and wanting to reconnect again.

The dive

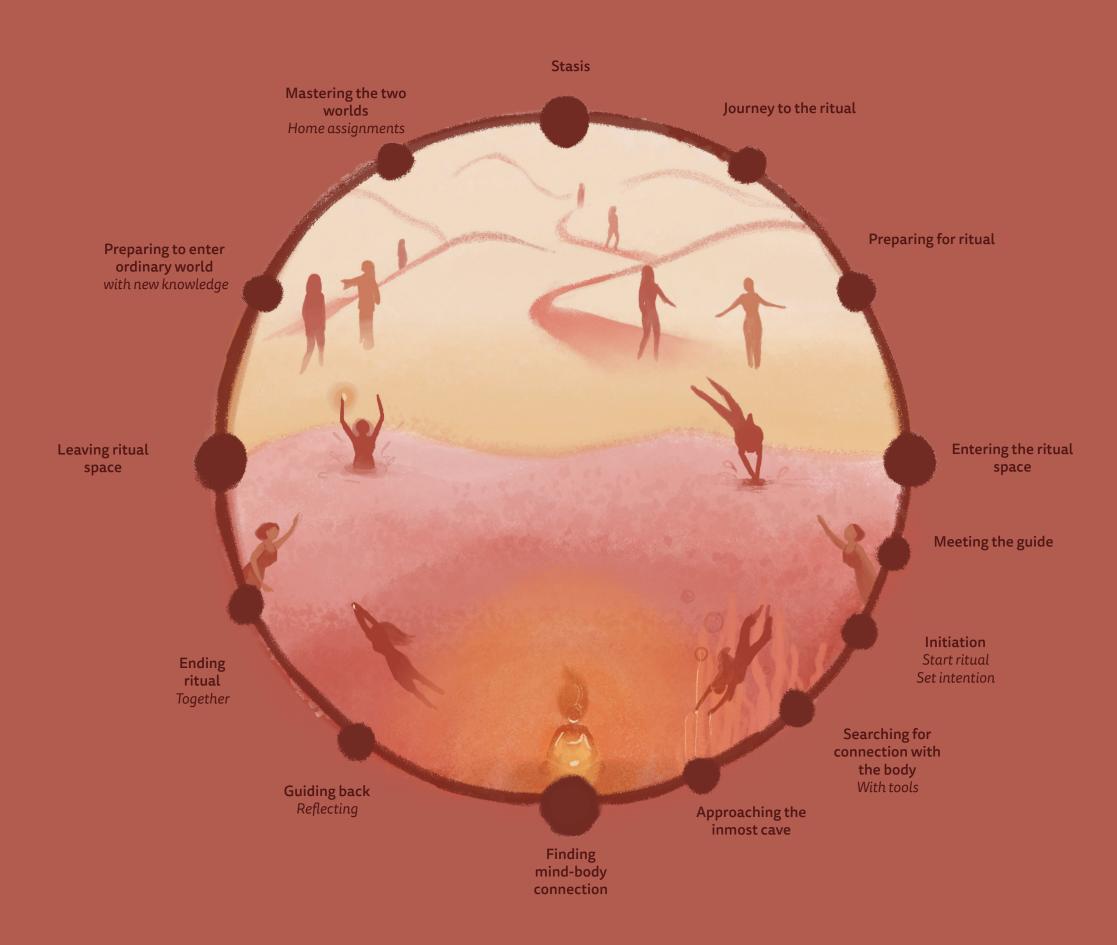
Inside of the ritual, with the dive, the act of reconnecting with the body through listening to experience stories and meditation is meant.

Surfacing

When a connection is made, it is time to leave the meditative state of mind, end the ritual and resurface. Slowly the participants are guided to go back to the ordinary world.

The journey back

The last steps to the ordinary world are taken, whilst the special world is processed through reflection. This is the act of mastering the new-found knowledge, whilst putting it to use in the current world.



4.4

determining the aesthetics

A visual exploration

To create the feeling of being loved (one of the qualities) the space and the artefacts used in the rituals should be shaped accordingly. These should convey a certain type of safety and care. To obtain this, explorations for the aesthetic language were made. When the language is found, the shapes are explored and a final aesthetic for the concept is created.

Finding an aesthetic language
For the concept to cater to the design goal
and to convey the determined interaction
qualities, the look and feel of the theatrical
ritual is very important. This look and feel can
also be called the aesthetic language.

Finding an aesthetic language can be difficult. Anything you make, any shape you place in a certain context performs and conveys a certain message or mood, as Brand-de Groot stated in her elective PerFORM taught at the TU Delft. In the case of a ritual a space, where people are invited be open and sensitive, everything should contribute to the feeling of safety and being taken care of. The space and all the elements combined should add to this message. Therefore, it is of importance to first create and overall understood and defined aesthetic language.

A technique to find an aesthetic language is to create and review form collages. This is also a technique used in the elective PerForm of Brand-de Groot. According to Brand-de Groot, in these form collages it is important that you cannot fully recognize any object, animal or person as it might hinder the mood, or the message of the actual shape presented. To be able to achieve this, first many different images need to be collected. These are combined, reshaped, recoloured, and, finally,

reviewed by others to pinpoint what they communicate in terms of mood/emotion.

'Loving' is one of the interaction qualities, which is at the centre of the whole experience. Loving expresses a feeling of safety, whilst also the feeling of softness and being carried. It is soft and warm. This is why, the form collages are made with the term 'Loving' in mind as focal point.

Creating the aesthetic language
To find the aesthetic language, different

these collages are made. The journey of making these collages is the journey of finding the form language. During the making of these collages, you are constantly reflecting on why it does or doesn't portray the aimed mood. This knowledge, you take with you to the creation of the next collage. These steps are portrayed in the 9 collages shown on the following pages.

These collages made, are peer reviewed by others and discussed with Brand-De Groot, as the interpretation of shape is related to one's personal window of reference. Consequently, to choose an aesthetic direction based on these collages, reviewing them with others is important, to conclude which one evokes the mood of 'loving' (or adjacent feelings). On the following pages the iterations and collages made to find the aesthetic language are displayed and discussed. The collages shown in figure 56 and 57, represent the chosen aesthetic language.

Form collage 01

The colours are too grey and not warm enough in tone. The materials seem soft, but their edges are too sharply cut for it to read that way. The collage gives of the feeling of being dense and heavy, which does not seem to coincide with the feeling of being loved. The asymmetry evokes a feeling of unexpectedness or unruliness, which seems to be the opposite of safe/inviting.

Form collage 02

Because of the gold drops and the thinness of the orange vail, the collage seems to convey festive fragility more so than loving. To evoke the feeling of being loved, the collage should have a more tangible body than this example. The orange colour mixed with the gold of the drops does seem warm and inviting.



Figure 47 Form collage 01



Figure 50 Form collage 04



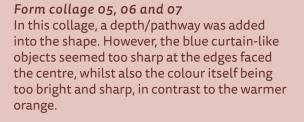
Figure 48 Form collage 02

Form collage 03 and 04

The shades of blue and orange used in combination with their material properties do not evoke the mood 'loving,' rather the moods of sadness and festivity. The symmetry in the collages gives off the feeling of rest/ safety to the collage. You can see how the shape placed in front of the orange/blue flowy shapes changes affects the meaning. The first object is too big/broad, it almost seems to come at you. Whilst, without it being there, the collage seems to be soft, sad and//or weak. Concluding, the colour mix of blue and orange does not seem to evoke the feeling of being loved, whilst symmetry does over a sense of safety and the flowy and half-translucent shape of the orange/blue objects does seem to evoke the feeling of softness.



Figure 51 Form collage 05



Form collage 08 and 09
Something somethin, moet nog geschreven worden!!



Figure 52 Form collage 06

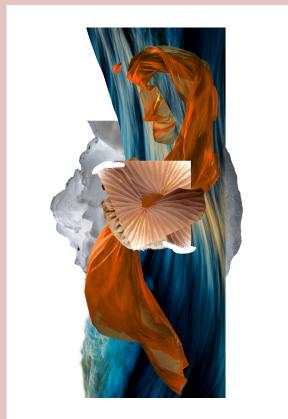


Figure 54 Form collage 08



Figure 53 Form collage 07



Figure 55 Form collage 09





Figure 56 Form collage 10

Form collage 10 and 11

After the previous explorations, two final collages were made. You can see both have elements of the other collages and have been adapted based on the reflections. Both have translucent and flowy qualities, whilst also displaying sharper edges, a balance is found. Both use more orange and pink hues, which could be interpreted as feminine or intestine-like. It appears that the form qualities of 'loving' can be found in a more feminine orange to pink hue, whilst also displaying a

Figure 57 Form collage 11

careful balance between soft & harsh lines in the structure.

In the collage on the left a vulva-like shape is engulfed by clouds with water underneath to softly land in. In the collage on the right a soft white ball can be seen to be embraced by a pink fluffy object. The contrast between the softness of the collage in combination with the sharp rectangles displayed in the centre, gives off the feeling of being secure yet soft. The collage on the right was chosen, as the

upward, growing organic movement in the vertical and horizontal direction, whilst also the protective element of the white fluffy object seemed to resonate more with the mood 'loving' based on the reviews.

Applying the aesthetic language The aesthetic language found in the previous

section is now applied through drawings that portray objects and spatial elements used in the design. A few concept drawings will be made and reviewed.

The cocoon

In figure 48, you can see different versions of the cocoon, informed by the collage created. All cocoons have a certain organic and/or dripping element, however some of them are too literal. For example, option 2 seems too similar to an actual mushroom. Option number 1 is too sturdy/big, as the shape is wide and the material seems less translucent. The third option seems out of balance, with the bottom being too big and the top too small. This makes the shape look less safe. Option number 4 seemed to be the most relaxed and inviting because of the pink colour as a base, the more balanced wide-to-small shape and the multi-coloured ribbons that seemed to be dripping from the side.



Figure 58 Concept drawings of cocoons



The space

Cocoon option 3 and 4 were used to put into a concept idea of the space. The space should include a pond in which the stones can heat up and few cocoons in which people could sit. With these requirements and the found aesthetic language in mind three concept directions were created. All three concept directions place with the balance between softness and harsh lines (in shadow and the objects itself), whilst also having a slightly different colour scheme.

Concept 1, with the intense bright orange hues and big overhead curtains gave the feeling of being in a fun and light fairy's home, whilst concept 2, with the darkest and most brown-like hues and sharp shadows created by beams, gave off too much of a circus vibe. In these two examples one was too soft and brightly coloured and the other had too much contrast in the shadows and dark colour use to be described as loving.

Concept 3 displayed the interaction quality 'loving' the most with the softer, darker, and warmer pink to burgundy hues in combination with warm and orange lighting. The strands of fabric pointing to the middle gives the concept the feeling of being connected, which resonates with the feeling of safety.

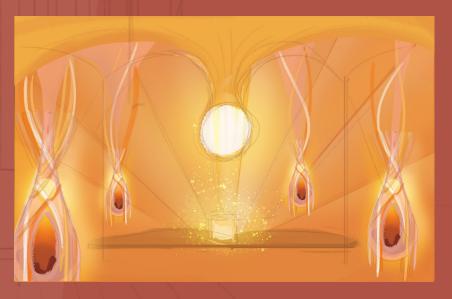




Figure 59 Spatial concept art 1, bright and orange, and 2, darker with shadows



Figure 60 Spatial concept art 3

Incorporating vesica piscis

In concept 2 the shape of the pond was inspired by the often seen but rarely recognized symbol called vesica piscis (translated from Latin: Vessel of the fish). Vesica piscis is a symbol consistent out of 2 circles intersecting (figure 61) and is often used in art and architecture throughout the ages [62].

The true origin of the symbol is unknown, as it has known many different meanings all over the world at different times in history. Of all the possible meanings dedicated to this shape, the following two seem in coherence with the design: when the symbol is used vertically, it can be associated with the womb, vulva, fertility, and femininity. When seen horizontally the symbol can embody the intersection of the physical and the spiritual world. Both meanings are well suited for an experience in which the connection between body and the mind is explored and the feminine experience of pregnancy loss plays a central role.

Important to note is that the use of such an old symbol comes with a certain set of geometric rules, that, to be respectful, can't be altered

and should be adhered to (figure 62) [62].

The symbol carrying many different (subconscious) meanings and it not being directly associated with any specific religion or act at first glance, is why it could be appropriate to incorporate this symbol into the shape of the pond. Additionally, the symbol gives the opportunity to start the session on one side of the pond and end it on the other side. The sessions will start and end connected to the same (feminine/almond) shape, but in a different setting.

This contributes to the choice of the final design having the look and feel of concept 3 but with the inclusion of a pond shaped as the symbol vesica pisces.

Further exploration through prototyping
Concept drawings can be made without
any constraints. They offer you the freedom
necessary to explore, however they could
leave the spectator with questions like 'But
how is that going to work?' or 'How are you
going to make that?' To process of prototyping
drawn concepts answers questions like these
and grounds the concepts. Furthermore,
prototyping allows for evaluating the design

through testing. To access further details on the conducted prototyping, please g to.

Conclusion

Any object and/or space conveys a certain message based on its aesthetic and placement. Especially for a ritual that requests of its participants to be vulnerable it is important that all elements involved in this ritual exude a certain type of care and the feeling of safety. Only then, when safety and care is established, the ritual can take place. This is why, for this design, the aesthetic qualities of the space are of great importance. In this chapter the aesthetic language is determined based on the interaction quality 'loving'. Form collages were made and reviewed. This resulted into a style with warm orange to pink tones in combination with a play of soft and harsher lines. Based on these found aesthetic values, concept drawings were created and evaluated. In these concept drawings the aesthetic qualities were applied to individual elements of the experience as well as to the entire space in which the experience takes place. These different elements were then prototyped to ground the sketched concepts in reality.

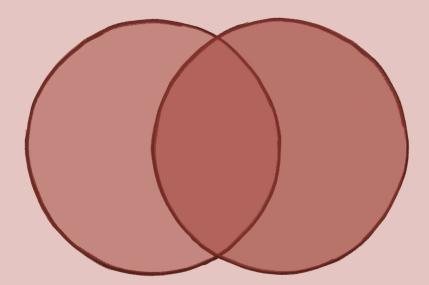


Figure 61 Vesica piscis

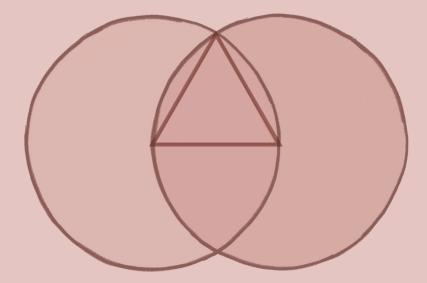


Figure 62 Vesica piscis with geometry [62]





evaluating the concept

Using the design criteria to assess *Eclipse's* impact on the current context.

In this chapter the concept is evaluated. Different tests were conducted of which some informed the design decisions, whilst others were meant to validate the concept. In this chapter a quick overview is given of the tests conducted, where after the concept is evaluated through going back to the design goal set and the interaction qualities determined in part 3 define.

Throughout the design phase 5 evaluation activities were undertaken with different goals in mind.

- Testing an experiential walk-through with experience experts
- Assessing the cocoon
- Consulting with expert in the field of therapy Natasja Walst
- Consulting with expert in the field of theatre Lauren Rissik
- Testing the ritual practice with experience experts

The last evaluation activity, a final test, in which the interactables and the ritual practice was evaluated, was the most elaborate and true to the final concept. This test will therefore be discussed in more detail to evaluate the concept as the results of this test are most relevant to the final concept, thus evaluation.

On the following pages (121 to 134) the conducted tests are displayed in a summarized manner.

Testing an experiential walk-through

Conducted: 2 times

With whom: Session 1: one experience expert

Session 2: experience expert and her

partner

Goal: The goal is to gather feedback on

the concept idea and the

interactables made to assess if these agree with the formulated design goal

and interaction qualities.

Interactables: The pond (incl refraction of water and

scents), robe, massage stones and

humming music

Location: At the home of the participants

Short description of the set-up

Using a presentation, the general idea of the concept was first presented. Then the participants were taken on a verbal walk-through of what the session would be. After the walk-through the interactables that were prototyped at the time were experienced. After the concept was explained and the interactables were experienced a reflective conversation followed in which questions were asked such as 'Are there any elements of the experience that speak to you?' and 'What are your first thoughts on the experience as a whole?'

It was a deliberate choice to walk-through the concept orally, as without the presence of a therapist to back up the test or be present, performing the ritual could not be guaranteed safe, and therefore not ethical.

Limitations

Words instead of feeling As the concept is orally explained instead of experienced, it is hard to feel what the concept would evoke. For this reason, not all questions could be answered, and some the responses give are based on imagining what it would be like (regarding the cocoon and entrance to the space)

At home setting The interactables are build up and tested in a home setting. This does not create the same feeling of a ritual space or being in a 'new world' as an actual dedicated space would have.

Different groupsize and/or familarity in the group
The interactables are tested alone or as a couple,
so this test does not allow to experience what it is
like to experience this concept with the presence of
unfamiliar women.

"When I first listened to the description of the test, it seemed too intense, but once I was by the water, with the stones, it was actually very pleasant."

Kim

Main findings

The concept

- Balance between safety and autonomy is important It is necessary to find the right balance between providing safety whilst also respecting autonomy
 - Aesthetics matter greatly The aesthetic of the experience and the visual communication of the experience can play a big role in the perception and the feel of the interaction and therefore experience.
 - Picking stones yourself adds meaning When a stone is picked deliberately it enforces meaning and connection to the object, before having even touched it.
- Moving in connection Picking stones and connecting to the body together as partners could be an interesting design area to explore as it seems to evoke connection.
 - Discard special robe for participants The participants needing to wear robes could create discomfort, especially the robe presented as it was found to be too dramatic and intense in colour. As the experience should be comfortable and safe, it might be better to let the participants wear clothes they already own that are soft and allow for movement.

The interactables

- Looking at the pond evokes a state of relaxation Looking at the moving water in the pond and playing with the stones with the music in the background has a relaxing and de-stressing effect some participants.
- Different sizes and shapes of stones for added meaning and recognition The importance of stones could be increased by providing different shapes and sizes. Additionally, the participants can recognize their personal stone.
- The stones create focus on and instil relaxation in the body The weight and warmth of the stones feel good and create focus and relaxation on the part of the body where it is placed.
 - The shape of the stones guide the hand The smooth and round shape of the stones in combination with the warming element can provide the feeling of guidance (the stone guides you over your body)
 - The sound of rippling water has a calming effect. The sound of water has a calming effect, as it reminds the participants of wellness and nature

Findings explained

During the first test, the importance of autonomy and safety for the participants was discussed. The participant, Lizette, had had a bad experience in a group reiki session, which stressed the importance of the participants knowing they are safe and cared for yet also have autonomy. With autonomy is meant that the participants should have influence on the session through being able to adapt it to their own preferences and boundaries. This is a balance that needs to be further developed.

The second test, conducted with Lauren Rissik (playwright at Female Economy) and her partner (who experienced pregnancy loss), stressed the importance of the aesthetic as care is also shown through this means. The partner of Lauren, Kim, said that her first impression of the session was quite intense and sad during the oral explanation because of the blue/orange drawings presented (see image). When experiencing the interactives, she found the experience to be soothing and gentle. This stressed the importance of finding the right aesthetic for the experience itself as well as the means of communication.

In both tests the participants mentioned the sound of water moving and the refractive light to be a beautiful and relaxing. The participants in both tests reported to like the weight and the warmth of the stones. It felt relaxing to them, also when used together as was the case with Kim and Lauren. Observing the two experience this together seemed to be a very loving and connecting moment. Lizette did note the stones all having the same shape and colour went against the idea of picking one.

"I think it's a beautiful balance. It's nice that you have this cocoon of space for yourself, yet you're not alone."

Kim

Assessing the cocoon

Conducted: 1 time

With whom: 2 participants, no experience expert

or expert on the topic

Goal: To obtain understanding on how

to achieve the intended interaction qualities, and experience, of the

cocoon.

Interactables: Massage stones, scents, humming

music, cocoons

Location: X TU Delft, the contemplation room

Short description of the set-up

The test was conducted with already existent cocoons found in the contemplation room at TU Delft. In this test the concept was first explained through a presentation. Then the participants were asked to into the cocoons with the massage stones warmed up beforehand. The humming music was put on for the full duration of the experience, which was ten minutes. During the test different scents were experienced by putting the scent on the hands of the participants while in the cocoon. When the ten minutes passed, the participants were asked to leave the cocoons and a conversation in which the experience was evaluated started.

Participants without any experience regarding the topic of pregnancy loss were involved in this test, as these people were available in short timespan, I had to conduct this test. Additionally, the test till could generate valuable information as they are both able to interact with the elements outside of the context of pregnancy loss and report their experience.

Limitations

The influence of the room The test took place in a room meant to be meditative and relaxing. This might have affected the perception of the experience.

Separate from context This test focussed on the experience of the cocoon itself and was not experienced in the context of pregnancy loss. The results could therefore be less representative.

Different spreading of the scents By putting the scents directly on the hands, instead of spreading the scent through the air, it creates more focus towards the changing of the scent, and therefore affects the experience.

"I found it very soothing from the start."

Fenna

"As I lay there, swaying, I thought, 'Maybe this is the feeling of being in a womb?'

Main findings

The experience

- Balance between safety and autonomy is important It is necessary to find the right balance between providing safety whilst also respecting autonomy
- Aesthetics matter greatly The aesthetic of the experience and the visual communication of the experience can play a big role in the perception and the feel of the interaction and therefore experience.
- Picking stones yourself adds meaning When a stone is picked deliberately it enforces meaning and connection to the object, before having even touched it.
- Moving in connection Picking stones and connecting to the body together as partners could be an interesting design area to explore as it seems to evoke connection
- Discard special robe for participants The participants needing to wear robes could create discomfort, especially the robe presented as it was found to be too dramatic and intense in colour. As the experience should be comfortable and safe, it might be better to let the participants wear clothes they already own that are soft and allow for movement.

The cocoon

- Importance of freedom of movement The cocoons, with a diameter of 1.20 m and a slight upwards angle of the sitting area, were too small and angled to facilitate free movement of the body. Free movement, that was said to be desired. The cocoons mostly facilitated sitting or lying down with your arms and legs close to you. To explore the body more space for movement is needed.
- Size opening affects
 perceived safety The opening
 of the cocoon tested was
 reported to feel too large, which
 made the participant feel less
 held and safe as she was still
 'out in the open'. So, the size
 opening of the cocoon needed to
 be able to be altered to be able
 to provide a range of privacy,
 without isolating participant
 from the space. A balance needs
 to be found.
- Deep relaxation linked to swaying and the feeling of being carried The swaying of the cocoon in combination with the feeling of being carried created a safe space in which deep relaxation could be found. One of the participants noted that she imagined the experience of being swayed and carried as being close to what it would be like in the womb.

"I initially moved the stone over my body, but soon that ceased, and I realized I simply wanted to keep the stone on my stomach, resting there. The weight of the stone greatly aided in that."



Consulting with an expert in the field of therapy

Conducted:

continuous

With whom:

Location:

Natasja Walst psychosocial therapist

specialized in fertility problems

Goal:

Seek validation and psychological underpinning for both the conceptual framework and the executed tests, with the aim of ensuring that the concept and tests collectively enhance psychological and physical

well-being, rather than the converse.

In Amsterdam at cafe Dauphine,

online, and at the TU Delft, after the

final test

List of involvement

- Several phonecalls/zoomcalls and text messages
- Walk-through online
- Preparation final test (text used and set-up)



Take-aways

- Holding space The importance of all the people involved who guide, voice or support the session to be able to 'hold' the space. Holding space is the conscious act of being present, open, allowing, and protective of others (source). This is important as you cannot
- Group-size To ensure the safety of the participants in the concept it was recommended for the group size to be 12 people max. This allows for the group to feel like a group, without losing the individual experience. This also allows for the guiding and supporting to be conducted well and with care for each individual..
- Themes sessions Together with Walst, three themes for the sessions were selected based on her expertise and the research conducted in phase two. The themes chosen are: The physical body,' 'It did happen, it may be' and 'You are not alone.'
- The influence of language Walst stressed the importance of language when talking about sensitive topics such as pregnancy loss. The exact words and phrasing used carry meaning. NLP (neurolinguistic programming) a technique in therapy that focusses on use of language to differentiate the self from the experience. One would not say I am sad, but I am experiencing sadness. The guide, should at least, when possibly having conversations with the participants, be aware of this difference and be able to respond in this manner.
- Duration concept The duration of the session inside of the ritual space should be an hour to an hour and a half at a maximum. Walst read, gave feedback, and approved on the fully scripted set-up of the final conducted test the ritual practice, as this test would be conducted with experience experts and include recorded experience stories as well. In the first draft, the test was two hours, which would have been too demanding on the participants. This resulted into the insight that the sessions of the concept should also adhere to the same time constraint as used in therapy practices.

Consulting with an expert in the field of theatre

Conducted: continuous

With whom: Lauren Rissik, playwright at

Female Economy

Goal: Gather feedback on the concept and

its sequence of events (narrative) from the perspective of a play wright and information regarding how to go

from concept to reality

Location: Online, via telephone, the

headquarters of Female Economy and at the TU Delft during the rehearsal of

the final test

List of involvement

- Several phonecalls
- Walk-through at her home
- Sparrings/feedback sessions throughout the define and design phase
- rehearsal of the final test set-up at the TU Delft



Take-aways

- Splitting actor roles from functional **roles** It is important, when trying to direct such a transformative experience, to keep in mind what is real and what isn't. Meaning, when actors are playing a role, they are not vulnerable with reagrds to their own life and experiences, however, in rituals like these this is in stark contrast with the vulnerabiliy possibly shown by participants. This is why the guide, the person who is the face of the experience, should be real. It would be conflicting for the participants to after the experience, want to talk to the guide about what they have went through, and then, it turns out to be an act. This is why the functional role of guide and the actor roles, whom tell experience stories, are split into the functional role of quide and the actor/ musician roles of the voices.
- The devil is in the details When creating a something like a performance, ritual or play everything that is on stage, or in the space should be there for a reason. In the case of Eclipse, the space should feel taken care of. This means, no loose threads or random items in the space where the ritual is performed. This feedback was provided in the rehearsal of the final experience. As Lauren indicated that people will only fully experience the concept, if it feels safe and therefore, more than just 'a test'.
- Find the flow In the rehearsal of the final session, the flow of the experience was performed and gone over a few times, to find a sequence of activites that flow naturally from one way into the next. This is important, as the guide, should constantly be able to provide this guiding force.
- Unsure = unsafe
 The guiding force, stated in the preivous
 take-away, is important, as without this
 force, questions might arise like 'where do
 I put my bag, or my shoes.' This could make
 the participants feel unsure, and therefore

unsafe.

Testing the ritual experience

Conducted: one time (with an additional rehearsal)

With whom: three experience experts

Goal: To obtain understanding on how

to achieve the intended interaction qualities, and experience, of the

cocoon.

Interactables: Cocoon, guiding stones, pond (with

scents), humming music and a vailed

entrance

Location: X TU Delft, freetown 404

Set-up

For the final test, the ritual, as shown in the scenario in chapter 4.2, was practiced inside of a ritual space. The test encompassed all the three sessions in one, as the experience stories and the meditation afterwards included the three themes: The physical body, It happened, it may be and you are not alone. For the test, a ritual space was built in which the cocoon, two nests, meaning the places on the ground next to the cocoon, and the pond were placed. The space also featured and entrance with strips of fabrics hanging from the ceiling. The three women singing was replaced by layered recordings of humming. After the test, when the ritual space was left, the ritual was reviewed and reflected on by the participants.

Before going into the ritual space, the concept, and the differences between the concept in the test were explained orally. The participants were asked to experience the session in the moment. In the ritual space the *Eclipse* is to be experienced, and outside of the ritual the experience will be reviewed.

Materials used

- Transformed ritual space
- One cocoon
- Two nests
- Pond (with scented oil)
- Guiding stones
- Different lamps with lampshades
- Costume of the guide
- Recorded humming
- Recorded experience story

Sequence of session

The evaluation test was structured as follows:

- 1. Participants entered the ritual space one by one, starting the initiation process.
- 2. As the guide, I introduced myself to all participants upon their entry. Following this, the following activities were conducted with each participant:
 - Handwashing to mark the transition into the ritual
 - Explanation of the symbolism and usage of guiding stones, whilst washing hands
 - Selection of a guiding stone by the participant and setting of an intention
 - Participants chose a comfortable space in the room, considering either the cocoon or the ground. If a participant entered the cocoon, this decision was pre-discussed to maintain the ritual's focus.

(Handwashing, stone explanation, stone selection, intention setting)

- 3. Participants settled into comfortable positions, either sitting or lying down, while engaging with the experience stone using the guiding stone.
- 4. A guided meditation, led by the guide, commenced.
- 5. Following the meditation, participants were guided back to the ritual space, where a reflective discussion took place, grounding participants in the present moment.
- 6. The session concluded with a humming end song.
- 7. Participants then left the ritual space.
- 8. Subsequently, the test was reviewed, through a semistructured interview method. The Initial responses were gathered and different elements of the experience were reviewed. Lastly, participants were asked to provide three words describing the session's experience.

Analysis

The interview at the end of the session was recorded, and analyzed. This analysis resulted into the take-aways presented. Additionaly, notable quotes were transcribed.

Limitations

Only one cocoon available Only one cocoon was included in the test set-up, which meant only one of the participants could review this experience.

Distant loss The women included in the test experienced their loss +10 years ago. Meaning that the test results might not be representative for women whose loss is recent.

The women were familiar The women who participated are familiar from prior involvement in this graduation project or from personal life.

Familiarity with the concept Two of the three women were familiar with the concept beforehand as one participated in the walk-through test and the other, Walst, validated the setup of the test. This could have influenced their experience.

"Reflecting back, I would describe it as a ceremony'

"Love for what is not there. And self-love as well, being able to embrace yourself. But also, simply, for the participants. Because when you cry together..."

"I would describe the session in the following three words: Pride, being present with the self, and strength."

Main findings

The experience

- The need for communal reflection During the reflection, it became evident that participants desired to share their experiences. Incorporating communal reflection into the design could enhance its value.
- Participants expressed an interest in sharing their own stories during such sessions for potential healing. The idea that authentic experience stories shared by those who lived them would amplify their impact was also deliberated.
- The impact of humming Live humming was suggested to have a stronger impact, yet it still effectively quided breathing rhythms or served as a supportive background. Some participants took time to recognize the humming's connection to breathing but found it beneficial in establishing rhythm. While one participant initially found the humming intense upon entering, it aided transitioning between worlds, especially given a brief moment to sit before the ritual began.
- No over-dramatization The experience stories were shared in a manner devoid of excessive drama, a quality appreciated by participants. The use of simple words and a matter-of-fact narrative style was seen as both sufficient and normalizing. While the words evoked emotional impact, they avoided unnecessary embellishment for dramatic effect.
- Cooled down stones During the session, the stones cooled down. Participants perceived this as a gradual passage of time, though they indicated a desire for the stones to retain warmth for a longer duration. Importantly, they underscored that they wouldn't wish to disrupt the session for reheating the stones. Therefore, finding a solution to this issue is an area that requires further exploration.
- Find your place in the space
 Not all women might want to
 go into the cocoon for reasons
 such as being scared the cocoon
 might not hold your weight, or
 not liking the idea of hanging in
 the air. For these women, other
 spaces on the ground needed to
 be created, which do not seem
 less than the cocoon. This way
 everyone can find their place in
 the ritual space.

Importance of the guide's benevolent intend The guide's compassionate intention, evident in their interactions, was frequently highlighted by the participants. The guide's impact on fostering a nurturing atmosphere, essential for the success of the session in reestablishing the mind-body connection, was underlined. This underscores the guide's significant role in session safety and effectiveness.

Importance of an uplifting ending Participants expressed appreciation for concluding sessions with interaction among peers, diminishing feelings of solitude. Guiding participants to leave with a sense of insight and self-affirmation was deemed vital. These comments underscored the importance of positive session conclusions in achieving contentment.

Evaluating the design with the design goal The goal of the design was to provide support to women, who have faced pregnancy loss, in rediscovering their mind-body relationship, by providing the tools and space to explore and restore the (dis)connection with the physical body.

As can be seen in the main findings and quotes displayed in the tests on the previous pages, the concept does provide support in the rediscovering of the mind-body relationship. It allows for this rediscovery through the offering of a multisensory space in which women feel guided and cared for.

The space is said to feel as if stepping into another world, which immediately had a calming and relaxing effect as one of the participants said during the final test. She felt overheated, as the test took place on a warm day, but the ritual space made her feel at ease.

"I thought [the space] looked very beautiful. I also did not feel overheated anymore. I entered a different ambiance. It immediately felt safe for me as well. That was the first thing I experienced." Natasja

Within this safe, soft and fragrant ritual space, the women are offered tools, such as the cocoon and the guiding stone, to create focus on the body and help to relax. The emotions are first evoked through listening to experiences stories and then further explored through guided meditation. This was confirmed by a participant in the final test.

"So, it reconnects me with myself. Being wrapped in that cocoon, it felt incredibly safe. It assures me that I'm moving forward, that I'm capable of it. It's almost like a revelation."

Lizette

Important to note is that these quotes and findings are the results of conducting only one session. In one session one of the women said this session felt like a closing ceremony from the experienced pregnancy loss many years ago. If only one session evokes these kinds of responses, curiosity is aroused to what the effect of three sessions would have, especially if the ritual is also practices at home after the sessions.

The lack of testing the concept with one group over a longer amount of time does make it hard to fully state the goal has been reached. However, I think the above illustrates the potential the concept to reach the design goal seeing the effects of only one session.

It must also be stated that most of the comments made on the concept were about the connecting aspect, as the women mentioned they felt not alone anymore more clearly than the being reconnected to the body. This could also be the effect of test set-up being comprised of the three sessions combined, ending the ritual focussed on the last theme 'you are not alone.' Or because being reconnected with the body is a less obvious feeling to express than the feeling of being in connection with other people. To truly ascertain whether the concept reconnects participants with their bodies, further testing is required.

Concluding, based on the evaluation tests conducted, the design goal has been sufficiently reached, as it seems to support reconnection with the body through the tools provided. However, to fully verify it does, additional testing over extended durations is necessary.

Evaluating the design through the interaction qualities
In part 3 interaction qualities were determined based on workshops conducted. These interaction qualities are: Loving, guiding and grounding. Each of these qualities will be discussed and evaluated separately on the following pages.



Loving

[soft, intimate, safe, acknowledged, connected]

The interaction quality of loving was directly mentioned by one of the participants when she was talking about the initiation part of the ritual, when the participants hands are washed, while they are informed about the guiding stones and are asked to be open to the experience, themselves, and the other participants in the space. Lizette described this interaction with the guide as stated below.

"And the water was wonderfully warm, and even the hands. It's loving, it's comforting." Lizette

Another participant, when asked to describe the session in three words mentioned love, love in different ways.

"Life, sorrow, life. And love. Love for what is not there. And love for yourself as well, being able to embrace yourself. But also love for the other participants." Natasja

The third participant described the session with the words 'safe, connecting, soft, ceremonial and symbolic.' Safe and connecting apply to the searched after loving interaction quality. Another participant described the session as a gift to the women who participated, as the session allows for relaxation and new insights.

It really was a gift.' Natasja

These quotes from the final test, in combination with the space being described as beautiful and soft, confirm that the concept both evokes the feeling of being loved and giving love, whilst also interacting with the participants in a loving manner.



grounding

[balanced, centred, relaxed, independent]

The act of being grounded encompasses that you find a moment to relax and be with self. The body literally grounds in this moment in time. This is why quotes similar to the ones below, that illustrate the being with the self, the felt relaxation, the ability to create insights for yourself or journey people went in the session, affirm this grounding aspect of the concept.

Interesting to note is that the grounding aspect mainly was reported during the listening to the experience stories and the guided mediation. One of the participants mentioned she did not connect to everything said in the experience story, however, listening to the story allowed her to just be in the moment.

"I didn't connect with everything either, but I found it enjoyable.
Just taking a moment... because you're not doing anything, you're listening. That puts you in a position where you don't have to think about anything else. So, it does ground me." Lizette

This is also reflected in the three words this participant picked to describe the session as a whole.

'Pride, being present with the self, and strength.' Lizette

Another participant described the connection she felt to the other participants even when each of them was sitting in their own cocoon or space on the floor.

"And, like I said, a sense of connection. You realize that, and that's because of what you [the guide] said [during the session], you're really not alone. We all share a different common factor. That's beautiful." Esther

The experience was also described as a journey, from which you go back to the experiences of the past and enter life again in a positive manner when leaving the session.

"You do make a decision, as this lady who spoke mentioned. And that's part of life, and then there's immense sadness. And then you turn out to be quite flexible and you step back into life. You go back into life, in a joyful way, in my case. It was really like a journey for me in that hour." Natasja

Concluding, the experience stories in combination with the safe space created do allow for grounding interactions and activities, as confirmed by the quotes and reflections of the final test.



guiding

[sensitive, empathetic, gentle, trustworthy, connecting]

With the guiding interaction quality was meant that the session should guide the participants to support the reconnection with the body.

In the walk-through tests, the shape of the stones were described as guiding, which already attributes the interaction quality guiding to one of the aspects of the design.

When evaluating the guiding aspect of the concept, it was interesting to find that it was mostly evaluated through what was said about the guide. Important to note is that I, the designer, took on the role of the guide as, at the time, I was the most aware of the function of the guide and due to time restraint no other person could have been briefed well enough to take on that role. A few of the comments about the guide are quoted beneath, to illustrate the important aspects of the guiding role.

"You have an incredibly kind gaze. That's pleasant. I noticed that. Like, 'oh, it's nice that I can look at you.' Sweet, comforting, or something like that, the gaze you have." Lizette

"You can really feel will to do good. And that, I do find... that when you transmit this, it should remain. You genuinely wish something positive for us. So, you feel that. That is really important in the person who will be the guide."

Based on these quotes, the guiding role and therefore interaction is present in this concept. This can be seen in

the separate elements as well as the overall concept. The stones guide the hand over the body, the guide navigates the session and the voices give direction to the general sequence of activities.

However, to guide well, as mentioned in the quotes above, there are certain conditions one must adhere to, like having a pleasant gaze or general vibe and a goodwill to care for the women in the session.

One of the women did mention that in the set-up of the final test, she would have liked to have been informed (and thus guided) more before the session on the content of the concept.

"I think if I had known in advance that it would be a ceremony, as I categorize it. Then I could have embraced it even more. And now it was like that already. It was a bit out of the blue for me, stepping into that world. And as time passed, especially towards the end, sitting there, it really hit me like 'oh yes, this is truly a ceremony for me."

Were this concept to become reality it might be wise to bring more attention to the guiding contact (online) before entering the session.

In conclusion, the concept incorporates guiding as a core interaction quality, reflected in the role sharing its name.

Notably, tools like the guiding stones and the pond aid in actualizing this aspect through their shape and placement. The guiding facet

of the design presents potential for enhancement in terms of presession contact. While the concept doesn't fully elaborate on at-home rituals, their influence on the session experience was noted during the final test.

In summary, drawing from insights gained through the evaluation activities, it can be concluded that the *Eclipse* concept aligns with the interaction qualities outlined as loving, grounding, and guiding in the "Define" section of this thesis.

4.6

Recommendations

Providing suggestions for further development of *Eclipse* into a realized transformative theatrical ritual

In this chapter, a broader perspective is taken in which the dimensions of desirability, viability, and feasibility are utilized to offer suggestions for the future enhancement of the concept.

Desirability for women who experienced pregnancy loss

In the previous chapter 4.5 the experience of *Eclipse* is evaluated. Based on this evaluation it could be stated that this concept is indeed desirable to take part in for women who have experienced pregnancy loss.

The concept offers space and time to grief, after having experienced pregnancy loss, through reconnecting with the body. As is illustrated by the evaluation chapter, the women expressed to feel connected to the other women in the session in their shared grief, which allowed them to, instead of only knowing you are not alone, also feel you are not alone in the experience of pregnancy loss. Additionally, the experience was described as a gift to the participants, which highlights the desirability.

Further exploration might be needed for the incorporation of the voicing of experience stories by the participants themselves. This need for the possibility to tell their story themselves was communicated by three women in the final test and therefore incorporated. In *Eclipse* one of the women (if desired) could contribute to the last session of the following group. They would be guided in their voices of their story, however how and when this guidance needs to be given, needs further exploration.

A debatable point is the desirability of the experience for women who have experienced pregnancy loss recently. All the women who participated in the final test of *Eclipse* experienced their pregnancy loss several years

ago. These women all have been in therapy for this topic, amongst other things, which means, although still sensitive, the participants in the session were already more aware of their own feelings regarding the topic of pregnancy loss. In the case of women who have recently experienced pregnancy loss, it is hard to say if such an experience as *Eclipse* is then desirable. Joining a session like *Eclipse* in this often vulnerable and possibly highly emotional moment in time could either be a comforting, supporting and pleasant experience, as it creates a space for these women to experience their loss right after it happened, or it could completely overwhelm these women. Further research is needed to determine whether Eclipse would be desirable for recent loss.

Desirability for the non-pregnant partners Based on the effects Eclipse could have on the partner who carried the pregnancy, discussed in the evaluation, one could say the participation of this partner is desirable for the non-pregnant partner, as their insights gained through attending Eclipse could benefit the relationship, as it could support women in reconnecting with their body, which is connected to their mental well-being [21]. Firstly, participating in an experience like this possibly evokes conversation between partners, before, during and after attending. Especially as the partner could become involved after the sessions took place, through joining in the performing of the ritual. As noted in the walk-through test elaborated on in chapter 4.5, engaging in the ritual with partners could foster an intimate and bonding experience, which could be favourable for relationships where due to different experiences of the same loss, the sense of connection might have diminished. Nonetheless, these rituals performed at home should be further explored and designed. For this concept an interesting area recommended for further research would also be the incorporation of the partner inbetween the sessions. An example of this could be through including assignments, in which the partner could play a part, in the booklet the participants take home. However, this should be explored with care, as too much involvement of the partner might not allow the participant to fully explore her experience of the loss.

Desirability for the closer and wider surroundings

Eclipse can be argued to be desirable for the closer and wider surroundings as well. The participants mentioned to feel more connected and less alone on their experienced pregnancy loss. This could result in feeling more certain in what was experienced and therefore could increase the chance the participants might share their story and needs regarding this topic more often with their surroundings, which could aid in the education of these surroundings on the topic of pregnancy loss.

Additionally, practicing the ritual with a close friend or family member might also be desirable as it could bring the people involved closer as the loss is shared. However, this opportunity should also be further investigated before implemented.

Viability

Currently, 1 in 5 pregnancies end in pregnancy loss. This means that there are many couples who suffer such a loss. Not all people experience the loss in the same way, however the existence of steunpunt Nova or the specialised practice of Natasja Walst in fertility problems, indicates that there are people struggling with how to cope with the, often intangible, loss. *Eclipse* could be a way to support women in the aftermath of said loss.

Eclipse is unique in terms of the field of support after pregnancy. Therapy or coaching in one-on-one sessions or couple's sessions is available in many places in the Netherlands, however these group sessions in the shape of designed transformative theatrical rituals in which this this topic gets time and space to breath, is a unique, yet desired concept, according to Walst and the responses given in the evaluation chapter 4.5.

An indication of the viability and the possible

An indication of the viability and the possible opportunities that could be generated in the future, Walst stated during the final test session: 'These could become full retreats or weekends. There are many possibilities with this.'

However, as Lauren Rissik of Female Economy asked during one of the feedback sessions, how to reach these women who have experienced pregnancy loss and have a feeling of being stuck, or a growing disconnection with the body? While utilizing marketing strategies and social media coverage could appear to be a straightforward solution, it might prove insufficient. Depending on the estimated costs and therefore pricing of Eclipse the intended target group might be reached more effectively through collaboration with foundations like Steunpunt Nova or therapists practices who are specialized in the topic like In Tune of Walst. Through these channels, the people for whom the sessions are meant could be reached and motivated to participate. Additionally, by working with these foundations and practices, and when shown to have a positive effect in on the mental and physical well-being of women who have experienced pregnancy loss, the concept could be eligible for subsidies, which increases the viability.

The concept itself is scalable, meaning it can be performed easily in different spaces

with different numbers of participants. This allows for the concept to be performed in big rooms, but also in smaller spaces. The only requirement of these spaces is a heigh ceiling, as otherwise the cocoons cannot be hung at the correct height. Not all spaces could advocate for cocoons being hanged from the ceiling, so an optional framework or standard to hang these cocoons from might be an good addition to the concept, to enhance viability.

Still, a question remains regarding the group size. Walst advised the group to be with a maximum of 12 people. As the concept is tested with a maximum of three people, it is difficult to assess what the influence of a bigger group size would be. Recommended is to try different group sizes to assess what group size is most suited to the experience, whilst also being financially sound.

Concluding, this concept is viable, yet some aspects, like the rituals performed at home or the number of people participating in the session, need further research to go from design concept to reality.

Feasibility

As many elements of the concept are either prototyped or make use of already existent technology, the concept is proven to be feasible and scalable.

The cocoon could be made in co-operation with the company Cacoon. For the prototype, the Lullio (an outdoor cocoon) of Cacoon, is used as the structural basis. Chiffon fabric is sown and draped around it, however, as the structural fabric of the Lullio is green and made from a fabric that cannot be dyed without harming its integrity, the inside of the prototyped cocoon remained green. A co-operation with Cacoon could allow for a different coloration of the structural fabric, and for standards to be bought from which the cocoon can be hung, as Cacoon sells those as well.

The pond, made from perspex, could be thermoformed by an industrial company. This would allow for the pond to be leak-proof, as the pond would not feature any seams through this method. The structural base of the pond could have a similar structure to the prototype and would not pose difficulty to create.

The role of the guide is also feasible to be portrayed by different people, however these people should be selected and prepared for the role with care. As the guide navigates the sessions, it majorly influences the feeling and therefore effect of *Eclipse*. This, however, does not pose difficulty for the feasibility of the concept, as there are many people, therapists, actors, yoga teachers and coaches, who might be able to take on this role, when properly guided.

The guiding stones do pose some difficulty in terms of feasibility. The soapstone stores heat well, however in the final test it became apparent the stone has lost its warmth by the end of the session. The participants said they did not mind this effect, as it also reflected to passing of time and the stone had still a nice weight and shape. However, as the stones are supposed to offer relaxation through the heat exuded, this is a problem that needs to be further investigated. A few solutions spaces for this problem could be explored. An example of such a space is further material research, as a material that retains heat for a longer amount of time whilst also able to be sculpted could probably be found. Another solution space could be the use of a pair of stones, instead of one singular stone, during the session. This would allow for the stones to be heated up and switched halfway through the session. Another possible solution space would be the use of smaller pillars with hot water or steam (±60 degrees), in which the stones are heated quickly during the session, as the water in these pillars could be warmer than the water in the pond, as the participants do not have to put their hands in it.

In conclusion, the components utilized in *Eclipse* are either feasible on their own or leverage existing technology. However, there is room for improvement in refining the guiding stones in terms of feasibility.

This last and final part includes a reflection on this graduation project. It reflects on the final product and the process of the creation of this project. Lastly, the learning goals set at the beginning of this graduation will be discussed and reflected on.

reflection

PART 5

5.1

future of eclipse

Reflecting on the implications of the project outcomes for the future

This chapter marks the endpoint of this graduation project. The research and design work for this project has been completed. Now is the time for reflection - reflection on what this project may have achieved. Firstly, a brief summary of the research and design outcomes will be provided. Following that, light will be sed on the potential future implications of this project for the Female Economy, the academia, and society at large.

At the beginning of this thesis, the project objective was introduced: The aim is to design something that contributes positively to the experience of pregnancy loss for couples? Research was conducted on the current experience of pregnancy loss in the areas of the possible manifestations of grief, the effect this loss could have on the dynamics of a relationship, and the way the experience of pregnancy loss might be affected by the physical component of being pregnant. Among other activities, literature research was conducted, and generative sessions were held with experience experts. The conclusions derived regarded the closer and wider surroundings, the relationship and the partner who was pregnant. The closer and wider surroundings were concluded to not be able to receive or aid in the manifestation of the loss, even though this need is apparent in couples who have experienced pregnancy loss. Based on this research conducted, it was concluded that the disconnection with the body, that could be developed through the experienced loss, for women who carried the pregnancy, affects the relationships with the partner and the close surroundings, as the dissonance between mind and body could affect the ability to proclaim what is needed and what is felt. This insight is based on the session conducted in combination with knowledge from the book 'the body keeps a score' of van der Kolk, which states that the body,

same as the mind, has a memory and can store, for better or worse, certain (traumatic) life experience. Through reconnecting with those experience, these experiences become more of the past and less of the now. Thus, reconnecting with the body, could positively affect the ability to communicate what is felt and needed in the current time. The ability to communicate with the outside world and within the relation is important, as one of the often-remarked aspects of experiencing pregnancy loss is the feeling of loneliness in what is experienced. A positive change could be made through supporting these women by allowing them the time and space to experience the grief through reconnecting with their bodies.

The research insights were used to formulate the design goal and interaction qualities. Together, these form the abstract design criteria, used to inform the design decisions, which lead to the final concept Eclipse, a transformative theatrical ritual. Through experiencing the three sessions, in which the ritual is repeated, the women are supported in their journey of reconnecting to the body, and the forming of a new reality after the loss. Eclipse touches on different themes that are present in the experience of pregnancy loss, such as the physical body, it did happen, it may be and you are not alone. These are respectively the themes of the three sessions. Through listening to narrated experiences stories, guided meditation, and the use of warm guiding stones, women are allowed the space and time to experience their own emotions and the way their body reacts to them. To create a continuous journey the participants are given the tools to practice the ritual at home after the sessions have concluded. Additionally, the sessions themselves also have a continuous element, as there is a possibility for participants to voice their experience story in a following group participating in *Eclipse*. This exuberates the part of the concept that stresses the women

are not alone in what they have and are experiencing, whilst it could also be a healing experience for the participant who allows here silenced story to be voiced. The concept was evaluated positively through a final test in which one of the sessions, although comprised of elements of the three sessions, was experienced by experience experts and feedback meetings with experts in the fields of experiential theatre and therapy.

Implications for Female Economy Female Economy is a theatre production company, which collaborated on this graduation project starting from part 3, the define phase. As the concept Eclipse became a transformative theatrical ritual, it would fit their current portfolio, as it could fit the same category as their previously produced 'Vrouwen in bad' (translated: Women taking a bath). Lauren Rissik, the women who coached me through these last to phases of this graduation project from the perspective of Female Economy, stated that the concept itself and what it tries to evoke fits Female Economy like a glove. She could see Female Economy working on this concept, and within a week it could probably be performed. It would also add to the portfolio of Female Economy, as to date no play, ritual or performance has been produced that so explicitly takes on the topic of pregnancy loss with the intention to transform the participants involved. Additionally, as Natasja Walst, a psychosocial therapist specialized in the topic of fertility problems, said after experiencing the final test, this concept could be merged and transformed into retreats and weekends as well, which means taking on this concept, for Female Economy, could mean taking on the opportunity of forming a whole now branch within the firm. However, as they rarely produce without collaborations or without an assignment being given, before taking on this project collaborators and fundings needs to be arranged. An example of a possible collaboration could take place

in the Baby Loss Awareness Week organized annually by Steunpunt Nova, a foundation that grants information and supports partners in the aftermath of pregnancy loss, amongst other things. *Eclipse* could be a great addition to this week, whilst doing in this in collaboration might provide funding and a location for the session to take place.

Implications for design research

The research conducted in this thesis provides insights regarding the topic of pregnancy loss in relation to the relationship with the physical body of the pregnant partner. Many studies explore the experience of pregnancy loss for women, and the way it could affect their mental health, and how to provide proper care, however little research has been done on how experiencing pregnancy loss affects the physical body and the mind-body connection of the partner who carries the child, and how this influences the relationship of the couple and their closer and wider surroundings. In this thesis the connection between the perceived experience of the pregnancy loss is linked to the physical carrying of the pregnancy as well as to a possible developing disconnection between mind and body, because of the distrust felt towards the body. and the guilt felt towards the partner as they blame their body or lifestyle choices for what happened. This new perspective may serve as inspiration for further qualitative and quantitative investigations into this association. As demonstrated in this thesis, such exploration is compelling and essential to advance the study of pregnancy loss experiences and the support for those experience this kind of loss.

The research described in this thesis was subject to some limitations. One of these limitations was the lessened insights it offered into the experience of the non-pregnant partner. The research conducted in this thesis it was concluded that the experience of the non-pregnant partner is often overshadowed by the partner who carries the child, by the surroundings, the medical professionals, but also in the academia. Few studies explore the non-pregnant partner's perspective concerning their personal experience or their relationship with their partner. This research could inspire more studies to explore the couple's experience, but also the experience of the non-pregnant partner.

Additionally, this project challenges the idea of traditional western medical care, in which the connection between the body and the mind is rarely regarded in society, but also in research. Through the positive evaluation of the concept, backed by the literary research conducted, maybe the stance of (medical) literature and research on the topic of the mind-body connection might become more positive, instead of regarding this topic as airy and non-scientific in essence.

Implications for society

The existence of this thesis and the design created, if implemented, could leave its traces on a societal level.

The project displayed the experience of pregnancy loss and both the mental and physical aftermath of this loss. It allowed to explore the current lack of information known to society, resulting into unhelpful comments made by friends, family and even within the relationship. Experiencing pregnancy loss, is the experience of losing something intangible, yet felt, but felt differently from one person to another. There is not one universal experience of pregnancy loss, yet there are certain topics or themes that often reoccur throughout different experience stories.

This project challenges the idea of what place pregnancy loss has in the current and future society. By voicing stories and allowing the space and time for the possible subsequent grief of the loss, it communicates importance and that, as a society, these losses should be regarded as such, instead of silenced. By voicing these stories and hearing them, knowledge is spread, and the value and impact these stories hold, is recognized.

This different stance of the project could possibly aid in the aid in the education of society, regarding the factual side of the topic of pregnancy loss, the possible emotional aftermath, and how support could be provided to couples affected by this loss. As loneliness was by both partners mentioned because of the experience of pregnancy loss, a better societal understanding, on what pregnancy loss is and how to treat the ones affect, could be beneficial for the individual experiences and society as a whole.

personal reflection

Here I state the process I went through and what I have learned in this final project of this master's program.

In this chapter I reflect on my own learning journey based on the learning goals set in the design brief in the beginning of this graduation project. This chapter will be concluded with helpful take-aways for students starting their graduation in a similar direction, based on my own insights.

Combining theatre and design In the beginning of this design project, I set out to explore the space between theatre and design, my two passions in life. Through the creation of a transformative theatrical ritual, I think I did explore a design space that merges the disciplines of theatre and design. While exploring this in-between space I learned that both disciplines merge well. As a designer you can still design interactables and an overall concept based on the user research conducted. However, a difference when trying to design something that could be categorized between design and theater, is that you have to think more in terms of a whole experience, like a director directing a play, from beginning to end. So, besides designing what the interactions should feel like and what the interacted elements are, scripted walkthroughs also need to be written and acted out before the final test. This is why, for the final test, I rehearsed the session with Lauren Rissik of Female Economy, to be able to guide it. This, having to rehearse the test set-up physically and fully before conducting a test, is not common in the design practice and is something you need to account for when merging the two disciplines.

Concluding, in this graduation project, I have shown that as a designer you can add a meaning full contribution to the wider field of theatre, as a designer could bring a new perspective of the creation of such a production through the user research conducted and the ability to translate it to a concept and aesthetic.

Managing the project & writing the thesis Looking back on the process of the project, I think I learned a lot regarding the managing of a project, although there is still a lot to be gained in this department. Before starting this project, I had already enough self-awareness to know I am not the most structured being on this planet. So, trying to structure the chaos I create myself is a challenge and will always be a challenge for me in one way or another.

This so-called chaos could also be fruitful to me. It allows me to draw inspiration from many places and enables me to ideate and associate freely, sometimes without even knowing it. During one of the meetings with my coach and chair, it was brought to my attention my design process seems to be different from most students graduating from the TU Delft. Based on this remark, I started to look at my own design process. I concluded that I have my own design process in which I use drawing and ideation also to process research data from interviews and literature. Additionally, I look at and draw from many sources all collected throughout the project. My coach Brand-de Groot compared this to a layer of earth that needs to be fed, to be able to, in the end, create a beautiful sprouting plant. Now, I think this is the best analogy for my design process. I am not sure what exactly defines my process, but I think this insight of knowing my process could be hard to follow, without proper explanation or awareness of this issue, for others, coaching or guiding me, is something valuable to carry forward in my journey after graduation.

Not to say that I did not learn some simple tricks and actions to allow me to manage myself better. An example of this is to prepare my meetings with (digital) slides. This allows me to provide structure before and during the meeting for myself and the other people involved. Another example is the act of writing and drawing everything in my process books. This provides me with a chronological

overview of the design process, even during the project itself. I also learned to schedule double the time I for writing the thesis.

Combining user research with aesthetic and spatial design

In this graduation thesis I have immersed myself into the context of the experience of pregnancy loss through the conducted generative sessions. I learned from the conducting of the interviews in a sensitive topic like pregnancy loss, that key aspect of successfully immersing yourself, is to listen, and not to assume. The insights then generated based on these sessions, and other research activities, were used to inform the aesthetic of the (spatial) design. These insights affected the created aesthetic language, as they were transformed into interaction qualities on which the aesthetic language created was based. I think whether I succeeded in the combining of the user research with the aesthetic/spatial design is illustrated best by one of the quotes stated during the final test:

"I believe you're attuned to what others have experienced, even though you haven't gone through it yourself; otherwise, you wouldn't be able to come up with these kinds of things. I think it's more of a sign that you're on the right wavelength."

Esther

Improving in academic writing
One of my intended points of improvement at the beginning of this project was my academic writing. When I started this graduation project, I thought writing less would take less time, however finding the words to clearly communicate what is meant without distraction, takes more time. Throughout this process I have learned that good academic writing that is concise, and sensitive, in the selection of the words used, takes time, as it

can only be accomplished through crafted skill and care.

Now, whilst reflecting on this graduation project, I can only conclude that I need more time still to craft this skill, as my academic writing, as illustrated by the size of this thesis, still could be more concise, and clearer in communication. However, looking at the quality of writing in this thesis, in comparison to the quality of writing delivered in the midterm, I have come a long way in terms of coherence, style and sensitivity.

Improving prototyping skills

In the design phase of this graduation project the interactables were prototyped. I learned that when prototyping, sometimes it is best to just do it. To go into the PMB with a vague idea of what you want to make and how (the workshop of the faculty) and start by trying, as in my experience, the plan often changes after trying out your first idea. I think this is a valuable lesson, as it allows for more fun and exploration even during the prototyping.

Improving visual communication skills
Throughout this graduation project I
have explored different kinds of visual
communication. I used aquarelle, analogue
drawings, digital drawings, and renderings,
each to communicate something different. For
example, the aquarelle drawings were used to
communicate the softness and dreaminess of
the transformative theatrical ritual Vrouwen in
bad of Female Economy. These visualizations
would be adapted in style and size depending
on what they needed to communicate.
Through trying different styles, I think I have
both extended and deepened my visual
communication skills.

Balance work and life

During my masters, I have noticed I was not always able to create a healthy balance between work and life. As I am passionate of what I do and chaotic in nature, work seemed to often take the overhand. I think in this thesis, I found a way to find a way for me to remain (somewhat) balanced. For me, it helped to spend time graduating four days a week, whilst spending one day on something completely different to the sensitive topic of pregnancy loss, a part-time theatre education. Especially during the research phase, in which the generative sessions were held, it helped

to let go in-between these interviews. To go exercise, sing or dance, instead of sitting behind my desk thinking. I hope, in my life after graduation, wherever it may lead me, I could maintain this balance, now that I know what is needed for me to gain it. I need to make it a priority to take care of myself through undertaking activities that I enjoy and are not connected to the project at hand.

Take-aways

For students who might be reading my thesis, below is a list of takeaways that might come in handy for your own graduation project:

Get a logbook lits value becomes evident by the thesis's end as it allows for a chronical overview of the whole process in one place

- Be aware of the sensitive of words It is important, when researching a sensitive topic, to know what words to use when asking questions or having interviews with experience experts about this topic. You do not want to offend or assume through your choice of words. Experts the field you are trying to design for, could provide insightful information, which I would therefore recommend.t.
- Shape your coaching sessions Shape your coaching sessions to match your preferences and communication style. Define what you would like to gain from this feedback session, and set-up the meeting accordingly. This sounds simple, but it could really make a difference for your own progress and the flow of these meetings.
- When stalled, present your findings When analysis stalls, present your findings to loved ones or try to visualize your conclusions; this aids in reaching major insights and finding the narrative of your graduation project and design.
- Involve others Seek writing feedback from friends or family, or the people available at the faculty. Some might say, it takes a village to raise a child. I would say, it takes a village to write a thesis.
- **Use pomodoro** Utilize the pomodoro technique for focused writing during challenging times. It helped me immensely during the last weeks of my graduation to remain focused whilst writing page after page..
- Make it fun Make your thesis you own. Do you what you love or still want to investigate during your final moments as a student. Make it interesting for yourself. In the end, the only spending all their time on their graduation is you. So why not make it enjoyable, if not for anyone, for yourself.

Sam and Alex have been on a journey together after the experienced pregnancy loss. It was a journey of loss and reconnection.

Sam's experience at Eclipse, supported Sam n voicing her experience of loss, voicing it to some of the surroundings, but also to Alex. They even performed the ritual together in their bedroom. This, evoked emotion, and conversation.





Alex and Sam started talking about what was lost. What was lost became part of the present, and will be there in their future.

They started to reconnect.



In one of the rituals Sam felt she wanted to something that symbolises their loss in the living room. This way what was lost will still be part of their family. Alex things this is a great idea, and proposes a star as symbol. Sam felt this was perfect.

other again.



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