



**Birth  
Trauma**

## **Parliamentary Inquiry into Birth Trauma: Call for Evidence**

On 9 January 2024, the All-Party Parliamentary Group (APPG) on birth trauma in the UK Parliament will set up an inquiry to investigate the reasons for traumatic birth and to develop policy recommendations to reduce the rate of birth trauma. Seven sessions to hear evidence will run on consecutive Mondays between 5 February and 18 March 2024.

The inquiry will report in April 2024.

The inquiry is inviting written submissions both from parents and from professionals who work in maternity. It is open to everyone in the UK, and we particularly welcome submissions from people from marginalised communities such as those who are racially minoritised, LGBT, economically disadvantaged, homeless, asylum seeking or displaced, care experienced, neurodivergent or facing any other circumstances which means their voice is less likely to be heard.

**The closing date for submissions is Tuesday 6 February.**

Please read the guidance below on making a submission. There is separate guidance for people submitting a personal story and those submitting their professional opinion.

Please note that by submitting evidence to the inquiry, you consent to our plan for managing your data. There is more information below.

If you have any communication needs which make submitting evidence difficult, please contact us and we will support you with your submission

### **Written submission guidance for personal stories**

At the heart of the inquiry will be the stories of mothers, fathers, trans and non-binary parents, and birthing partners who have experienced or witnessed traumatic birth. We invite you to share your story by making a submission to the inquiry. That will help us understand why people are experiencing birth trauma and the impact it has on them. It will also help us to develop ways of reducing the incidence of birth trauma.

By “birth trauma” we mean any experience related to pregnancy, birth or the immediate postnatal period that left you feeling out of control, threatened, powerless

or terrified and this then had a lasting impact on you mentally and/or physically. distressed you and affected your ability to lead a normal life. Perhaps you:

- Felt frightened or out of control during your labour or birth
- Felt a huge sense of loss because your baby was whisked off immediately to special care
- Suffered losses during pregnancy or had a stillborn baby
- Sustained physical injuries such as 3rd or 4th degree tears which have had a lasting impact on you
- Felt intensely distressed at your experience with feeding

No two experiences are the same. If you continued to replay your traumatic experiences or avoided reminders of it, or became especially worried or highly alert, this could be birth trauma. If you felt detached from others or found it incredibly difficult to return to work, this could be birth trauma too.

Common symptoms that people experience with birth trauma are:

- **Re-experiencing traumatic events.** This might present as: flashbacks, nightmares, smells or sensations which transport you back and distress when reminded of their experiences. It's important to add that for some there will be a physical response too such as pain. Note that flashbacks do not necessarily involve seeing images or reliving events from start to finish. A flashback is a vivid experience in which you relive some aspects of a traumatic event or feel as if it is happening right now.
- **Using avoidance behaviours.** This might present as: avoiding someone or somewhere which reminds you of your traumatic experience (eg pregnant friends, the hospital), isolating yourself from others, physically or mentally removing yourself from conversations which remind you of your distress, deciding that having another baby is an impossibility.
- **Feeling a heightened sense of threat.** This might present as: feeling very jumpy, irritable, extremely worried about the safety of themselves and others or constantly alert. Other behaviours might include destructive behaviours, bursts of anger, difficulty concentrating or sleeping.
- **Negative thoughts or feelings.** This might present as: feeling flat, numb or detached from others; feeling overly self-critical or a strong sense of blame, guilt or shame towards yourself or others; and very distressing thoughts.

**Note: You can choose to make your submission anonymous if you don't want to reveal your identity.**

The most powerful submissions are personal stories from people who have had direct experience of birth trauma. Stories about positive experiences (perhaps, but not necessarily, after a previous traumatic birth) are also useful because they will help us understand what does work. If you follow the guidance below, this will make it easier for us to understand your story:

- Introduce yourself and where you live, eg "My name is Alisha, I live in Birmingham. I'm 35 years old and I have a two-year old son." If you would prefer to be anonymous, you can leave out your name, but it would still be

helpful to know your age, where you live and the age of your child or children, as long as that information doesn't identify you.

- Include the name of the hospital or midwifery unit where you gave birth, or whether you gave birth at home. Include the date of your birth (or births), but don't include the names of midwives, doctors or other medical professionals.
- If you can, keep your story as short and to-the-point as possible, ideally under 1,500 words. Refer to the prompting questions below to help guide you. Do feel free, however, to include information not directly related to the birth. For example, you may have had problems during your pregnancy, or maybe you didn't feel traumatised by the birth at the time, but you sustained an injury that only affected you years later.
- If you are willing to be contacted, include your contact details and the inquiry committee may follow up with you.

### **Some suggestions for what to include**

These questions can act as prompts to get you started – but don't feel you have to answer all of them.

- Did you receive disrespectful, inappropriate or abusive treatment in pregnancy, labour, birth or after the birth?
- Have you experienced birth trauma as a result of how you were treated? How did this affect you physically, emotionally or financially?
- Were you given information on all your options for maternity care? This could include, for example, home birth, planned caesarean or access to an interpreter
- Did you feel pressured or coerced to have an intervention such as an induction or forceps?
- Did you have procedures (eg vaginal examination, waters being broken) without giving informed consent?
- Were you given unbiased, evidence-based information to make informed choices in pregnancy, labour and postnatally?
- Did you have any circumstances you felt disadvantaged you? (eg maybe you have a disability or had experienced previous trauma, and felt that this affected your experience)
- Were you able to access appropriate mental health support after the birth?
- Were you able to access medical care for any physical injuries? How have you found the process of accessing medical care? Do you continue to suffer with the emotional and/or physical impact of these injuries?
- If you made a complaint, did the hospital respond appropriately?
- What changes or solutions would you like to see to improve maternity care?

We understand that retelling the story of your birth can be hard and may bring up difficult memories. At the bottom of this page is a list of organisations that can offer support.

### **Written submission guidance for experts**

We welcome submissions from people with experience or expertise in the area of maternity, including midwives, obstetricians, GPs, mental health professionals, health visitors, doulas and physiotherapists.

Please make sure your submission:

- Is no more than 1,500 words and includes an executive summary
- Where appropriate, references other sources
- Includes some background information about your area of expertise
- If you are willing to be contacted, include your contact details. The inquiry committee may follow up with you

It is absolutely fine to share an expert opinion and/or your own lived experience of birth trauma as a professional. We understand that vicarious trauma significantly impacts many professionals working in the area of maternity and that many factors can make providing safe and high-quality care very challenging.

## **How we will use your data and submitted evidence**

Some of the written evidence submitted to the APPG inquiry will be made publicly available by the Birth Trauma Association in the digital archives of the inquiry report. The published report may be quoted in the media.

Any quotes or extracts will be attributed to the authors of the written evidence and made clear in citations and footnotes.

Full names and the affiliated organisation of those that submit evidence will be listed in the acknowledgements of the report, unless you have made an anonymous submission.

Submitting evidence to this inquiry confirms you are happy to consent to this use of your data.

All data will kept in line with GDPR practices and will be deleted within 12 months.

**Please send your submission as a Word document to [inquiry@birthtraumaassociation.org.uk](mailto:inquiry@birthtraumaassociation.org.uk)**

## **Seeking Support**

Owing to the nature of the evidence being considered by this inquiry, some of the evidence received in submissions and during hearings may include sensitive content that you may find upsetting.

If we have concerns that you could be at serious risk of harm, we will contact you about this in confidence using the details you provide.

If you feel distressed as a result of sharing your story, either in writing or in person, please contact one of the organisations listed below:

Birth Trauma Association peer support: [support@birthtraumaassociation.org.uk](mailto:support@birthtraumaassociation.org.uk)  
The Birth Trauma Association supports parents who have been affected by traumatic birth. Its email is staffed by peer supporters who have all themselves experienced birth trauma.

Make Birth Better: [hello@makebirthbetter.org](mailto:hello@makebirthbetter.org) Make Birth Better also supports parents affected by birth trauma as well as professionals affected by vicarious trauma. Their email is staffed by mental health professionals (psychologists and a psychiatrist).

PANDAS helpline: 0808 1961 776

PANDAS supports parents with prenatal or postnatal depression, as well as other perinatal mental health challenges. Its helpline is open Monday to Friday between 10am and 5pm.

Bliss: [hello@bliss.org.uk](mailto:hello@bliss.org.uk)

This offers support for parents and families of premature and sick babies. You can request a video call if you prefer.

MASIC: [info@masic.org.uk](mailto:info@masic.org.uk) or 0808 1640 8333

MASIC supports people who have experienced injuries as a result of birth.

For help and support please visit their website: [Where to seek help - MASIC](#)

National Domestic Abuse Helpline: 0808 2000 247

The helpline is run by the charity Refuge. It is open 24 hours a day, seven days a week and offers free and confidential advice. A translation service is available if English is not your first language.

Samaritans: 116 123 or [jo@samaritans.org](mailto:jo@samaritans.org)

The Samaritans helpline is open 24 hours a day, seven days a week. It is available to anyone experiencing emotional distress.

SANDS: 0808 164 3332 or [helpline@sands.org.uk](mailto:helpline@sands.org.uk).

You can call the helpline if you need support after the death of a baby, whether it was recent or long ago. It is open from 10am to 3pm Monday to Friday and 6pm to 9pm Tuesday, Wednesday and Thursday evenings.

GP or health visitor: You can also contact your GP or health visitor if you want support with your mental health. If you feel daunted by the prospect of speaking to a health professional about how birth trauma has affected you, this site has some suggestions that may help: <https://pandasfoundation.org.uk/i-need-help-download/>