

Spotlight: Women experiencing or at risk of separation from their babies

The need for specialist focus

Between 2007/8 and 2016/17, the rate of newborn babies subject to care proceedings more than doubled, reaching 35 newborns per 10,000 live births¹, with significant regional variation across the UK².

There are well-established links between maternal deprivation and care proceedings, and observed high levels of pre-existing trauma, mental health conditions, domestic abuse and substance use among women involved with social services³. Recent analysis has also shown a high and increasing rate of social services involvement among women who die during pregnancy, childbirth and the year after birth⁴; a deeply concerning trend.

It is clear that pregnant women and new mothers at risk of and experiencing the removal of their babies at or shortly after birth are a particularly vulnerable group. At Birth Companions, we believe that specialist focus and dedicated services are required to improve outcomes, reduce trauma, and disrupt intergenerational cycles of disadvantage for these mothers and their babies. Such specialist focus also has the potential to reduce costs associated with recurrent care proceedings.

"If women can get the right support, it can change outcomes for the future, regardless of the immediate outcomes."

Birth Companions' Lived Experience Team member

Maternal mortality among women known to social services

MBRRACE-UK's recent report⁴ looking at maternal deaths during pregnancy, childbirth and the year after birth during 2018-20, found that:

- o 20% of the women who died had social services involvement. This figure has steadily increased over recent years, up from 12% in 2012-14 and 17% in 2017-19.
- o 11% of the women who died by suicide, and 59% of those who died through substance misuse, had had an infant removed into care and/or ongoing care proceedings.
- o For several of the women who died, infant removal led to an escalating pattern of mental health issues, substance misuse and domestic abuse.
- o In 38% of all cases, it was found that improvements in care may have made a difference to the woman's outcome.
- Postnatal support, including mental health services, for women who had their infants removed from their care was found to be severely lacking.
- Fears of child removal often influenced women's willingness to disclose symptoms of mental ill-health or substance misuse, and were poorly recognised and responded to by health professionals.

"You don't want to tell people you've got social services involved, because people automatically think you're a terrible parent. I think that's a lot of the stigma."

Birth Companions' Lived Experience Team member

Better Births

In 2019, Birth Companions published a peer-led research report mapping the experiences of women facing severe and multiple disadvantage onto the National Maternity Review's *Better Births* aims (2016)⁵. A strong sense of fear and distrust of services emerged, with concerns about baby removal noted as a particularly prevalent barrier to women's engagement with support. Several themes relating directly to *Better Births* priorities emerged, including:

- A need to ask women more about their situations, in order to better understand their specific needs;
- o The need for a swift response to problems and early, proactive referrals;
- o The importance of a compassionate and non-judgemental approach;
- The value of continuity of carer, specialist midwives and mental health services, and ongoing support post-birth and post-separation;
- The high prevalence of recent or concurrent trauma and its impact on women's ability to engage.

¹ Nuffield Family Justice Observatory (2018) Born into Care: Newborns in care proceedings in England

² Nuffield Family Justice Observatory (2020) Discussion paper: What explains marked regional variations in infant care

³ Nuffield Family Justice Observatory (2020) Born into Care: One thousand mothers in care proceedings in Wales

⁴ MBRRACE-UK (2022) Saving Lives, Improving Mothers' Care

⁵ Birth Companions and Revolving Doors (2019) Making Better Births a reality for women with multiple disadvantages

"It's like being a child; you feel like you're in trouble.

I don't have a positive outlook on [social services] and I don't think a lot of people do.

It makes you not want to engage with them; you feel like you're being judged for everything."

Birth Companions' Lived Experience Team member

Opportunities for change

Several recent policy developments have presented opportunities to focus on women at risk of and experiencing separation at birth, and to improve the care they and their babies receive.

Continuity of Carer models, and Midwifery Continuity of Carer in particular, bring great benefits to women facing disadvantage and hold huge potential to narrow inequalities. Yet, to date, the specific needs of women with children's social services involvement have been largely absent in Continuity of Carer criteria. At Birth Companions, we believe that specific inclusion of this cohort of women is essential. Furthermore, we urge the development of specialist, multi-agency care pathways, delivered by specialist midwifery, mental health and social care roles, in partnership with navigator/advocacy services that sit outside statutory provision to increase trust and engagement.

"The time of the intervention is important. It needs to be a long time to build the relationship due to the complex trauma women have experienced."

Birth Companions' Lived Experience Team member

Maternal Mental Health Services offer an opportunity to address the needs of women suffering trauma as a result of infant removal⁶. However as these services have taken shape across the country, many have failed to factor in women experiencing separation, due to the 'complexity' of their needs. This is particularly problematic given that more acute perinatal mental health provision is withdrawn from women once a removal has taken place. This means vulnerable women's needs continue to go unaddressed, increasing the risk of substance misuse, suicide, or recurrent care proceedings through future pregnancies.. At Birth Companions, we believe continuity of specialist mental health provision must be a priority for women with social services contact in pregnancy and early motherhood.

"[You feel a] lack of control, feeling like a walking incubator... All the focus is on the baby."

Birth Companions' Expert by Experience Consultant

The new Core20PLUS5 approach to reducing health inequalities creates an opportunity to embed a specific focus on pregnant and postnatal women with involvement from children's social services. At Birth Companions, we would like to see 'inclusion health groups' extended to include direct reference to women who have involvement from children's social services, and work to address the related inequalities in maternity care linked directly with local authority teams via the Integrated Care Systems.

Recent Draft Guidelines for when the state intervenes at birth⁷, published by the Nuffield Family Justice Observatory and informed by Birth Companions and members of our Lived Experience Team, are currently being piloted across England and Wales. NFJO will be publishing final version of the guidelines early next year. At Birth Companions, we believe these draft guidelines offer a great opportunity to shape multi-agency practice around women experiencing or at risk of separation from their babies at birth, and we hope to see them embedded in maternity policies and implementation guidance, and adopted across NHS maternity services and children's social care.

Birth Companions is a specialist women's charity, founded in 1996 to support pregnant women and new mothers in Holloway Prison. Since then we have developed an expertise in the needs and experiences of women facing inequality and disadvantage during pregnancy and early motherhood, with a focus on improving care in the maternity, criminal justice, social services and immigration systems.

In the past year, Birth Companions has directly supported 65 women experiencing and/or at risk of separation from their babies by children's social services. This is a significant increase on previous years, and a concerning trend. We work to support these women through pregnancy, birth and the postnatal period, and to shape the maternity and social care policy and practice that affect them.

For more information about Birth Companions and our work in the maternity, criminal justice, social care and immigration systems, visit www.birthcompanions.org.uk

⁶ Guidance for Maternal Mental Health Services: Implementation considerations

⁷ Nuffield Family Justice Observatory (2022) Born into Care: Draft best practice guidelines for when the state intervenes at birth