



Freebirth, Unassisted Pregnancy and Unassisted Birth

What are freebirth and unassisted childbirth?

There is no specific definition of freebirth, but broadly speaking, a woman freebirths when she intentionally gives birth to her baby without a midwife or doctor present. Some women prefer to use the term 'unassisted childbirth' or UC to describe this. This is different from the situation where a mother births without medical support unintentionally, either because a midwife refuses to attend a homebirth or because she births before her midwife can get there. The latter is classed as Born Before Arrival (BBA).

Freebirthing is an entirely legal thing to do, but freebirthers often report stigma and condemnation for giving birth this way. The legal position is explained in this factsheet from the charity Birthrights www.birthrights.org.uk/factsheets/unassisted-birth

Freebirth is an umbrella term for a variety of pregnancy and birthing journeys.

What is unassisted pregnancy?

Freebirthers may choose to have some, all, or no antenatal care. 'Unassisted pregnancy' is the term most frequently used to describe the situation when a woman decides to have no antenatal care from a midwife or doctor at all.

Women are not obliged to inform any health services about their pregnancies, as antenatal care is offered and not compulsory. Most freebirthing women do register their pregnancies with a midwife or GP. However, a small number of women will decide not to.

An unassisted pregnancy is an active, legitimate and legal decision to not pursue antenatal care, and it should be respected as such.

This is different from a concealed pregnancy where a woman, frequently vulnerable and experiencing a crisis pregnancy, is concealing her pregnancy from *everyone* – including friends, family, colleagues etc. In some cases, a woman may be in denial that she is indeed pregnant, or she may be totally unaware of the pregnancy.

Is it legal to freebirth or to decline some or all antenatal care?

In the UK it is legal for a woman to freebirth her baby and to decline some or all antenatal care. A woman cannot be forced to have anyone present at the birth, nor can she be forced to undergo medical

interventions. A woman does not have to justify her decision, nor base it on a particular reason. In the relevant case law for this, Butler-Schloss stated that a woman may refuse medical intervention – which would include antenatal and perinatal care - ‘for religious reasons, other reasons, for rational or irrational reasons or for no reason at all.’ (See: MB [1997] 8 Med. L.R. 217MB [1997] 8 Med. L.R. 217 at paragraph 30).

The only exception to this is when a woman lacks capacity as described by the Mental Capacity Act 2005. However, the Act is very clear in that:

- every person over 16 is presumed to have capacity unless proven otherwise, and
- that a lack of capacity is not proven just because a health carer disagrees with a person’s decision or deems it ‘unwise.’

Do I have to inform my midwife or other health carer if I intend to freebirth?

You are not under any obligation to inform your midwife if you intend to freebirth. However, if you do tell her about your intentions, the Royal College of Midwives (RCM) has published [information](#) on how you can expect to be supported. For more on this see the section '[Can I birth at home without a midwife?](#)' on our Birth Information page Coronavirus and your maternity care.

Can I be referred to Children’s Service if I decline care?

Sometimes women declining antenatal care or care in labour can find that midwives and doctors threaten to refer them to Children’s Services (previously known as Social Services) as a means of coercion. The [RCM](#) has recently published guidance that it is not appropriate for midwives to do this solely on the basis that a woman is declining care or intends to freebirth.

Referral to Children’s Services should only be considered if there is a concern about the wellbeing of the baby after it is born, and not just because the mother is exercising her right to decline care. A woman’s right to autonomy and bodily integrity, which is protected by Article 8 of the Human Rights Act cannot be overruled even if there is a concern about an unborn baby, as a baby does not have legal rights until it is born.

If you are threatened with a referral or social workers become involved you can seek support from the Family Rights Group www.frg.org.uk. You may also wish to make a formal complaint and guidance on how to do this can be found in **The AIMS Guide to Resolution after Birth** (principal author Shane Ridley.)

Who can be present when a woman freebirths her baby?

At the birth, some freebirthing women will birth entirely alone, others will have a doula, partner, friends

or family present. When birthing at home, a woman is legally entitled to have whomever she wishes at her birth.

In the past there has been some confusion around who can be present when a woman gives birth without a doctor or midwife. When a woman freebirths, she is not trying to recreate a medical birth at home. Consequently, those present at a freebirth will not - **and should not** - be acting in a medical capacity.

The relevant law on this point appears in [The Nursing and Midwifery Order 2001, Section 45](#) states that "*A person other than a registered midwife or registered medical practitioner shall not attend a woman in childbirth.*"

This section is designed to stop unqualified people claiming to be midwives or doctors and then supporting a woman in childbirth. Its purpose is not to stop a husband, partner, friend, relative or doula from supporting a woman who decides to give birth without a midwife present. The same applies to a husband, partner, taxi driver, shopkeeper etc, who supports a woman giving birth suddenly and unexpectedly.

If I decide to have an unassisted birth, what are my legal obligations?

If there is no midwife or other health carer present within six hours of the birth, the mother or any other person who was present at the birth, or who arrived within 6 hours of the birth, must notify the birth in writing within 36 hours of the baby being born. Notification of the birth is different to registering the birth.

It is not always immediately clear who should be notified of the birth. The [Notification of Births Act 1907](#), states that it is the 'chief administrative medical officer of the Health Board for the area' who should be notified. Women considering freebirth may find it useful to find out beforehand which Local Authority office the notification needs to be sent to. Many areas have a "Child Health Department" which deals with notifications. Alternatively, a supportive midwife may offer the relevant details.

Because it is unusual for midwives to not be present at births, in some areas it can be rather challenging to notify the birth because the system is not set up for this, or staff simply do not know what to do. It is important therefore to contact the appropriate service in advance. You will then be able to ensure that you know who to speak to and what information they will require before the situation becomes time critical and you have to juggle this legal requirement with caring for a newborn baby.

Once the birth has been notified, you should be given an NHS number for your baby, and then you can proceed with registering the birth as normal through the local registry office.

Freebirth and the Covid-19 pandemic

The AIMS Helpline has been receiving an increasing number of calls from women who have been denied

homebirths or access to a birth centre due to the Covid-19 pandemic and are now considering freebirth.

We understand that the decision to freebirth is complex and women do not take such decisions lightly. Usually, women who freebirth have spent a lot of time considering their birth decision, but because of the current pandemic we have seen women come to this decision much later in their pregnancies and under difficult circumstances. We have therefore put together a list of resources for you to access if you feel that freebirth has suddenly become an option you want to consider.

Freebirth Information and Support

AIMS articles

In 2013, AIMS produced a whole Journal edition dedicated to freebirth. It can be accessed here www.aims.org.uk/journal/index/25/4

Facebook Groups

It is important to get a range of support if you intend to freebirth. If you do not personally know anybody who has freebirthed, you may find it helpful to seek online support from women who have given birth this way:

Freebirth UK

www.facebook.com/groups/2214433072172660

United Kingdom Freebirth/Unassisted Childbirth Group

www.facebook.com/groups/UKFreebirth.UC

UK Freebirth Information

www.facebook.com/groups/685962181497464

Freebirth Tube

www.facebook.com/groups/319640922121506

The above groups are all open to respectful discussion on freebirth and women often provide information and support based on their own experiences. In order to join, you will likely have to explain your reasoning as the administrators actively try to protect the group from trolls.

Sometimes homebirth groups are open to freebirth discussions - but not all. It would be worth scrolling through older posts to see whether you are likely to be supported or not, before posting about any intentions to freebirth. Sometimes responses from people can be very negative and unhelpful.

The Freebirth and Emergency Childbirth Support Group

www.facebook.com/groups/freebirthemergencychildbirth/

The Freebirth and Emergency Childbirth Support Group was initially created as a response to the Covid-19 pandemic, but it is now a resource base for anyone planning a freebirth or who wants to be prepared for an unplanned Birth Before Arrival. The membership is a mixture of women who have freebirthed, women seeking support, midwives and doulas. There is a joining fee of £25 although exceptions are made for people experiencing financial hardship.

Podcasts

The Freebirth Society

www.freebirthsociety.com/blogs/the-free-birth-podcast

The Freebirth Society is a US based network for women who want to freebirth. They advocate a non-medical approach to childbirth which some people may find extreme and unpalatable. However, within their podcasts there are empowering stories of unassisted births which many UK freebirthing women have found helpful when preparing for their own.

YouTube

Many women contemplating freebirth find it useful to watch YouTube videos of unassisted births. This can help you prepare mentally for what you may experience if you decide to give birth without doctors or midwives present.

Books

Most books on freebirth have been written by American authors, therefore they do not provide information on the UK context. However, they can be useful to understand the experiences of other women who have taken a similar path. The following is not an exhaustive list, but just a few texts that may prove helpful:

Unassisted Childbirth by Laura Shanley (2016)

[Find the book on Amazon](#)

Birth Becomes Hers by Bree Moore (2019)

[Find the book on Amazon](#)

The Birthkeepers by Veronika Sophia Robinson (2008)

[Find the book on Amazon](#)

Spiritual Midwifery by Ina May Gaskin (2002)

[Find the book on Amazon](#)

Other authors known to support and/or write about freebirth include Michel Odent, Sarah J. Buckley and

Jeanine Parvati Baker.

Research

There is very little research on freebirth. The number of freebirths in the UK and the outcome of these births are unknown. This is because women often disguise their freebirths as Born Before Arrivals (or BBAs), and tell health carers that the baby was born so quickly that they did not have time to call for help. Consequently, we do not have reliable and accurate quantitative research (research that relies on numbers and statistics) that focuses on freebirth.

When people do undertake research on freebirth, they usually carry out a qualitative study (one that is based on interviews). These studies generally focus on women's motivations as opposed to any practical or emotional support they may have used. Nevertheless, they may be of interest. The following are the main UK ones:

Gemma McKenzie, Glenn Robert and Elsa Montgomery (2020) Exploring the conceptualisation and study of freebirthing as a historical and social phenomenon: a meta-narrative review of diverse research traditions mh.bmj.com/content/early/2020/04/28/medhum-2019-011786

Claire Feeley (2019) Freebirthing: a case for using interpretative hermeneutic phenomenology in midwifery research for knowledge generation, dissemination and impact journals.sagepub.com/doi/abs/10.1177/1744987118809450?journalCode=jrnrb

Claire Feeley and Gill Thomson (2016) Why do some women choose to freebirth? bmcpregnancychildbirth.biomedcentral.com/articles/10.1186/s12884-016-0847-6

Claire Feeley and Gill Thomson (2016) Tensions and conflicts in 'choice': women's experiences of freebirthing in the UK [www.midwiferyjournal.com/article/S0266-6138\(16\)30123-1/abstract](https://www.midwiferyjournal.com/article/S0266-6138(16)30123-1/abstract)

Plested and Kirkham (2016) Risk and fear in the lived experience of birth without a midwife www.ncbi.nlm.nih.gov/pubmed/26948871

There are also two PhD theses online from the US and Australia:

Rixa Ann Spencer Freeze. "Born free: unassisted childbirth In North America." PhD (Doctor of Philosophy) thesis, University of Iowa, 2008. ir.uiowa.edu/etd/202

Melanie Kathleen Jackson. "Birthing Outside the System: Wanting the best and safest." PhD (Doctor of Philosophy) thesis, University of Western Sydney, 2014 pdfs.semanticscholar.org/4909/a4d7771e0877a9b98b6f1db90a8e10d5f1c9.pdf