



Shackled WOMEN

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“No one shall be subjected to torture or to inhuman or degrading treatment or punishment.”

Convention for the Protection of Human Rights and Fundamental Freedoms

On the 2nd January 1996 Annette (above, right) gave birth in the Whittington Hospital. She was accompanied by Beverley Beech, who, two days later returned to the hospital to film and expose the barbarity of shackling pregnant women around the time of birth. The above photograph was taken within an hour of the birth, when the prison officers insisted on shackling Annette when she went to answer a telephone call from her husband. This journal considers the issues surrounding shackling pregnant women when they visit hospital.

It cannot have escaped anyone's notice that, in recent years, there have been some spectacular escapes from prisons in the UK. All of these escapes were by male prisoners. Some of whom were extremely dangerous.

The prisoners' lack of consideration for the sensibilities of the Government (and Michael Howard in particular) has resulted in a knee jerk reaction from the Home Office. Michael Howard responded, not by

resigning, but by sacking the Prison Governors involved. He issued an instruction that *"all female prisoners were to be handcuffed on escort, as was the case for men prisoners."* As a result, there is a climate of fear in our prisons about any potential escapee, and the prison officers, also fearful for their jobs, rigidly implement the rules.

Michael Howards decree may be appropriate for strong, dangerous, men, but when it is applied to women it is a gross over-reaction. Shackling women, who are not Category A (and therefore not a potential danger to the public or themselves) is barbaric, degrading, and should be stopped. It is particularly unacceptable when the women are pregnant.

Women who are about to give birth to their babies are incapable of running away, they are barely able to walk. It is a nonsense to suggest that they are a security risk and are likely to abscond. Once they have had the baby they are not going to go anywhere without their child, and it is very difficult to run away carrying a baby. No woman has escaped either before or just after a birth.

PROFESSIONAL RESPONSIBILITIES

Hospital staff noticed, in April last year, that women prisoners were much more closely guarded. In August, the management at the Whittington Hospital wrote to the Governor of Holloway protesting about the presence of male officers and shackled women, but the letter did not provoke any change.

Shackling a pregnant woman, or a woman in labour, raises profound moral dilemmas for the staff. Obstetricians have been telling us for years that they not only look after the pregnant woman, but also the baby, and when there is any dispute about care they stress that they have the baby's interests at heart, as if the woman does not. This argument has even been used as a means to force reluctant women into agreeing to caesarean sections.

Following Channel 4 News' expose Dr Iain Kidson, the Whittington's Chief Executive, justified his hospital's practice by saying: *"I think this is an area which we have to... take a balancing act, there is a balance between the rights of the patient and the responsibilities of society in forms of custody."*

interviewer: *"You could refuse."*

"No we could not in practice because refusing to provide care to the patients unless they had the chains removed, would be inappropriate because it would lead to delays in appropriate medical care."

Dr Kidson did not appear to be concerned about the risks to the woman should there be an obstetric emergency while she was shackled to a prison officer.

Ann Widdecombe sought to justify Home Office policy by claiming that no woman is shackled in established labour, no doubt assuming that shackling the woman before has no effect. Little has been said about the effects on the baby.

It appeared that the midwives, while unhappy about the Prison Service rules, were not willing to

challenge them seriously. It seems that the Prison Rules allow for the shackles to be removed should the medical staff consider it detrimental to the woman's health. (As the majority of women are cared for by midwives, why does the Prison Service not acknowledge the role of the midwife?).

It was possible for the staff to insist that no woman should be shackled within the hospital, yet we have no evidence that this was done. It may have been that individual midwives and doctors protested, but without vigorous management support such protests often get nowhere. How often do midwives make excuses for the consultant who is not on the labour ward when he ought to be; for the fetal monitors which do not work properly; for the staff shortages which put all mothers and babies in jeopardy, or the hard faced sister who ought to be transferred somewhere else as soon as possible? While individual midwives and doctors may treat women prisoners in a kindly manner, all they were doing was what midwives so often do – put a pleasant face on unacceptable conditions.

There is a considerable body of research evidence which shows the adverse effects of stress on the mother and the baby. By failing to act upon the research evidence available, and not relating this to Home Office policies, the hospital management failed the women and babies. They let the Home Office and the Prison Service take the blame, but co-operated with, and perpetuated, a totally unacceptable regime.

The means of effectively challenging the Home Office was available, unfortunately there is no evidence that the medical and midwifery management were prepared to consider the research and use it. One of the principles of *Changing Childbirth* is that practice should be based on research evidence. If ever there was a case for applying research evidence to practice this was it. Instead, the Director of Women's Services and the Chief Executive concerned themselves with policy decisions and liaison with the Home Office (see p7).

THE EMOTIONAL IMPACT

As every woman who has given birth knows, it is very important indeed that a woman has privacy, security, and a stress free environment, if her pregnancy and birth are to be given the best chance of proceeding without problems. Annette's first letter (see *You Write*, p14) revealed how upsetting it was to be taken in chains to hospital. She was very stressed indeed by the idea of being shackled during her labour and the thought of the guards in the delivery room. Numerous research papers reveal, the adverse effects of stress on labour (see *Research*, p17) and it is not insignificant that her labour was almost twice as long as previous labours, and very painful during the last half hour¹.

AIMS members have yet to find anyone who supports the idea of shackling a woman who is going into hospital for maternity care or to deliver a baby. Apart from Ann Widdecombe (Minister for Prisons), who, in defence of Michael Howard's policy on Channel 4 TV News, said that Home Office rules had not been breached as the woman was not shackled during her labour, but only when she went into the public areas. As I was with Annette throughout her labour I know this was not true.

It is vital for a woman to have control over decisions about treatment and care and what happens to her during pregnancy and birth; not only for her well-being and satisfaction with her birth experience, but

vital too for her subsequent emotional health. A woman in labour is vulnerable. Many women prisoners are from deprived families and live in poor social conditions. It is even more important that they are cared for, and cared about, during their pregnancy and labour. If treated with little respect, if their efforts to maintain dignity and control are rebuffed, the consequences can be serious and their impact permanent (3, 4).

Annette's baby was given a brain scan before she left the hospital. She was required to walk, in chains, to the ultrasound department carrying her baby. Upon her discharge she was also required to walk out of the hospital, in chains, carrying her baby. This parading of a newly delivered mother in chains is utterly unacceptable. Annette was sentenced to two years imprisonment for stealing a handbag, she was not sentenced to public humiliation and degradation.

Section 9 of the Declaration of Human Rights refers to the rights of individuals not to be subjected to "unusual or degrading treatment." On Monday 22nd January, AIMS, the Howard League for Penal Reform, the Maternity Alliance, the National Childbirth Trust and Women in Prison met with the lawyers, Steven Grosz, and Simon Creighton of the Prisoners' Advice Service, to discuss what legal action Annette and the organisations could take. A QC's advice has been sought to investigate the possibility of seeking a Judicial Review and an application to the European Court of Human Rights, on the grounds that Michael Howard's ruling is in contravention of national and international Human Rights legislation.

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