AIMS For a better birth...

Handling threats of Social Services

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It is not uncommon for AIMS to receive helpline calls from women who are being coerced into accepting interventions or antenatal tests by being threatened with Children's Services (formerly known as Social Services) if they do not comply. However, the law is clear: in the absence of a court order, pregnant women have the absolute right to decide to accept or decline interventions or care offered to them, from scans to vaccinations. Using the threat of Children's Services to scare a woman into compliance is coercion, and it is illegal to coerce a person into an intervention[1].

In Stephanie's case, after persistently declining an offer to attend a routine ultrasound examination, the midwife stated that in that case she would be referring her to Social Services (as it was then known). This tactic is not uncommon and, on AIMS' advice, Stephanie wrote to the Chief Executive at her local Trust. The Chief Executive passed the letter to the Head of Midwifery who responded immediately and positively. Stephanie is not her real name although she has given AIMS her permission to publish this article under a pseudonym, and all other names have been removed.

Dear [Chief Executive], I am 20 weeks pregnant with my 5th baby and I have had the first meeting with the midwife. I am larger than expected and suspect that I may be expecting twins. The midwife wanted to refer me for an ultrasound examination, I declined her offer as I am not prepared to expose my babies to the risk of ultrasound. I home educate and also declined vaccinations. The midwife didn't inform me of any concern at my appointment and I thought all was well. The following week I received a copy of my case notes.

I was asked if I took drugs and informed her that I had taken Ecstasy once in my teens and ended up in hospital. I have not taken drugs since and no other midwife or health visitor attending my previous pregnancies has found a problem. I found in the notes that midwife S of [the] medical practice intends referring me to Social Services as she considers me 'high risk'. When I called to find out why she had not discussed anything with me at my appointment she was rude and said I could still be taking drugs because of that incident as it shows I have a tendency for erratic behaviour. And also because I home school and she said she doesn't know if I am doing what I should and because I wanted midwifery led care and home birth as I did with my last 2 pregnancies where I had no problems. I am in regular contact with the local authority for my homeschooling and neither they nor my health visitor has any concerns.

Those are not grounds for an SS referral and should I be referred I will be making a report to the Nursing and Midwifery Council on the grounds that this midwife has used bullying tactics to force me to comply with her advice. Furthermore, bullying a woman into consenting does not comply with the requirements of informed consent.

I do not intend to see midwife [A] again and I would be grateful if you would appoint another midwife to attend me, as she is causing me unnecessary stress which is not good for me or my unborn baby/babies. Should I subsequently have my suspicions confirmed, that I am expecting twins, I trust that your staff will be making the necessary arrangements to ensure that I am attended by midwives who are experienced in attending twin births.

I look forward to your response.

Regards,

Stephanie

The Trust responded positively, as follows:

Dear Stephanie,

[The Chief Executive] has shared with me your email, received yesterday. I am sorry that your experience of our midwifery care and communication has not been as we intend and appreciate you contacting us so that we can address this immediately and ensure your on-going care is more positive.

I have tried to phone you a short while ago to discuss how we can best proceed however appreciate Sunday mornings are not always the best time to make contact.

I have spoken to the community midwifery team's manager [B] and she has identified a different midwife to be your named midwife. Your lead and buddy midwives will be [C] and [D]. The intention is that we will be able to afford continuity of care to you through the antenatal and postnatal period, through the allocation of a lead and a buddy midwife.

[B] will aim to contact either tomorrow morning so that they can make contact and arrange to meet you.

I have reviewed your records and cannot see that any social services referral has been made however will explore this further with Midwife [A] before confirming this to you later in the week.

In relation to your choice to birth your baby or babies at home, this is far better chatted through in person so your midwives will ensure this takes place.

I will try to call you again during Monday/ Tuesday and look forward to speaking to you then when I can explain how I would like to use your experience to improve the midwife's care for future women.

Kind regards,

Director of Midwifery

It is extremely important to note that not all Trusts respond in this way, and in some situations women have reported midwives continuing with the referral, and some women have alleged that midwives have made up reasons for referrals. In some of these situations we have been given clear proof that the reasons were indeed fabricated. However, it was good to hear that in this situation, the Trust did respond appropriately. Families who are being coerced by medical staff in this way might find the Birthrights' sheet "Social Services and Maternity Care" to be helpful (http://www.birthrights.org.uk/resources/factsheets/), and also the charity "Family Rights Group" may be able to offer free help and advice from solicitors who specialise in supporting this type of issue (https://www.frg.org.uk/).

1. http://www.birthrights.org.uk/wordpress/wp-content/uploads/2013/01/Consenting-to-treatment-1.pdf