AIMS For a better birth...

Campaign Update: Removing COVID-19-related maternity restrictions on partners

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Since the start of the pandemic, the AIMS Helpline has been receiving calls from women who are deeply distressed by the restrictions that their local Trusts have placed on their ability to have a partner or other supporter of their choice with them in hospital. You can read some similar stories in our previous AIMS Journal "Pandemic Birth". In this article, we update you on what AIMS has been doing to address this issue.

by the AIMS Campaigns Team

Many of the calls to our helpline were heart-rending. We heard from women who had previously suffered a miscarriage or termination of pregnancy and were now having to face potentially devastating news from antenatal scans and tests with no-one to support them. We heard from many who were worried that they would have to go through the early stages of an induction, or wait in triage whilst already in labour, without the birth supporters they needed – even if they suffered from severe anxiety, had a disability, or their first language was not English. We also heard from women worrying how they would cope alone if they had to stay on a postnatal ward for any length of time and fathers upset that they would be unable to be with their babies and support their partners in the hours or days following the birth. A common theme to these calls was a lack of flexibility on the part of maternity service providers to respond to individual needs or to have any consideration for the mental health impact that these restrictions were having.

Our immediate response was to put in place resources for self-advocacy, including our Birth Information page "Coronavirus and your maternity care" which informs maternity service users about the latest guidance and what we feel it should mean for their care, and a set oftemplate letters for people to send if they are struggling to get their support needs met. We asked people to copy us in, so we know that these templates are being well used, and it is encouraging that at least in some cases, they have met with a positive response. In others, however, Trusts and Boards continued to show a distressing lack of understanding and flexibility. One interesting learning point was that sometimes, when people contacted their Head/Director of Midwifery, they found that options which their own midwife had been saying were not allowed could in fact be made available on a case-by-case basis.

Meanwhile, AIMS Volunteers continued to campaign for the needs of maternity service users to be

considered in national guidance. We submitted responses and queries to the NHS, RCOG and RCM over issues in their guidance and to the Health & Social Care Select Committee inquiry on "Delivering Core NHS and Care Services during the Pandemic and Beyond." You can find all of these on our Campaigns webpage: Campaigns Page 1 of 2 | AIMS.

The publication of new guidance by NHS England[1] in September led us to hope that the restrictions would be eased, but it soon became clear that this was not the case in many areas.

AIMS was then approached by a group of Public Health Registrars to help them publicise their findings from a Freedom of Information request2 (FOI) sent to all Trusts in England with maternity services. This showed that not only were 43% of the Trusts who replied yet to reverse their restrictions in line with the NHS England guidance, but also that 24% intended to reinstate them unchanged in the event of a local or national rise in infections. We jointly created a press release to draw attention to the story, illustrated with a case study from a woman who had contacted the AIMS Helpline and was happy to share her story. We were very pleased that this resulted in stories being published in the Evening Standard, the Mail on Sunday and the Observer.

Meanwhile, several other campaigning groups have also been working to highlight the issue, including the #butnotmaternity social media campaign. AIMS joined with a coalition of these groups (Birthrights, Pregnant Then Screwed, Make Birth Better, the Fatherhood Institute, and the Birth Bliss Academy) to send a letter to NHS England[3], calling for them, as a matter of urgency, to issue clearer guidance to Trusts on removing restrictions on partners or other supporters attending maternity services. The letter calls for Trusts to be advised that "A partner of choice should be seen as an 'essential visitor' and should be permitted to attend all scans, antenatal appointments, induction of labour, assessment (triage) of labour, a significant number of hours per day on inpatient wards and in neonatal units, and that a second birth partner should be accommodated where possible."

The same group (now also including the Birth Trauma Association) has also signed a letter (drafted by AIMS) to the Society and College of Radiographers asking them to review their guidance on partners and supporters attending antenatal scans and an open letter to the Chief Executive of NHS England[4].

At the time of writing, in the midst of a new national lockdown, we are continuing to work with this coalition to emphasise the need for all maternity services to recognise the needs of women and birthing people and their partners and to learn from those Trusts that have found effective ways to lift the restrictions while mitigating the risk of infection for staff, service users, and their supporters. Trusts need to be looking at what they can do safely, rather than what they can't do easily.

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1 www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/09/par001599-framework-for-the-reintroduction-of-visitors-throughout-maternity-services-sep-2020.pdf

2 www.bmj.com/content/370/bmj.m3483/rr-1

3 www.birthrights.org.uk/wp-content/uploads/2020/10/Final-letter-to-NHSE-from-coalition-re-visiting-restrictions.pdf

4 pregnantthenscrewed.com/but-not-maternity