

Researchers find lack of personalized maternity care is causing more unassisted 'freebirths'

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The number of women having unassisted births, or 'freebirths' across the UK is believed to be rising, as more expectant mothers are unable to

access high-quality individualized maternity care.

A Ph.D. study at Robert Gordon University in Aberdeen is exploring the experiences of midwives across the UK to find out why women are opting to 'freebirth' which means they are choosing to give birth without medical or midwifery assistance.

Midwives are the lead health care professionals during pregnancy and the frontline of maternity workforce, so researchers wanted to collect their perspectives on freebirth to find out why there is an apparent increase in women free birthing.

Between August '22 and February '23, researchers interviewed 14 clinical midwives across England, Scotland and Wales with diverse clinical experiences and roles, from newly graduated midwives to midwives in senior positions within the NHS and independent midwives.

Many of the midwives interviewed said some women want to have an attended home-birth, but because so many home-birth services are being cancelled due to poor staffing, women are opting instead for a freebirth as plan B.

The midwives interviewed also said that many women are choosing freebirth after poor experiences of care within maternity services or after facing inflexible policies when trying to negotiate personalized care plans.

The study, led by Maria Velo Higuera, a registered midwife and lecturer from the School of Nursing, Midwifery and, Paramedic Practice at RGU, follows concerns raised last year from the Royal College of Obstetricians and Gynecologists about the safety of 'freebirthing.'

The regulator, the Nursing and Midwifery Council, has also said that it is

in the 'early stages of collaboration' with colleagues across the profession, including the Royal Colleges of Midwives and Obstetricians and Gynecologists, and the Department of Health, to understand concerns about free birthing and what steps organizations may need to take.

Lead researcher, Maria Velo Higuera said, "For most midwives in my study, it was important to convey their support of women's right to make choices during pregnancy and to ensure women in their care felt this support, even when they were considering freebirth.

"While some of the midwives interviewed expressed concerns over the potential negative outcomes for mother and babies opting for freebirths, their main concern was that many women are considering freebirth because maternity services are failing them in their care, and they are unable to access homebirth care or personalized care in hospital.

"Policymakers need to listen to both women who freebirth and to the midwives who care for them. The increase in freebirth highlights a systematic failure in maternity services that is affecting a woman's right to choose, but also the midwives' ability to support women with their choices.

"I applaud the initiative of the Nursing and Midwifery Council, The Royal College of Midwives and the Royal College of Obstetricians and Gynecologists, to explore freebirth in more detail and the drivers behind the apparent increase in freebirth. It is however also important to be mindful of the language we use when doing so.

"A woman's decision to freebirth is rarely impulsive or impromptu, but a very meditated and researched one. Women often explore all their options. If they are unable to access care that meet their needs within maternity services, they will find ways to meet their needs somewhere

else, with some opting to [self-care](#) instead of accessing professional care during birth.

"Maternity policymakers should address the systematic failings that are driving women to feel freebirth is their only option, instead of raising concerns or blaming women for exercising the only choice some of them are left with."

The study is still ongoing and an [online survey](#) will soon be launched to gather more experiences from [midwives](#) across the four UK nations.

Provided by Robert Gordon University

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