

all Childbearing Families

Tina Miller (she/her) – Professor of Sociology, Oxford

Brookes University

I'm not sure what it's like for you, but awards don't come along that often in my line of work as an academic, writing about the experiences of childbearing families. So, you'll imagine my joy when my recent book on Motherhood[1] received an Outstanding Academic Title award, noting that it was '*A must-read volume for scholars and parents navigating their own transitions into parenthood. …Essential'.* After 25 years working in this area, with lots still to do, this was gratifying indeed. Importantly, it recognised that childbearing families navigate well-trodden, but individually unknowable journeys into motherhood (and fatherhood). Yes, we have all been born, but experiences of pregnancy, labour and birth can be individually planned but turn out differently. And of course, midwives are on those journeys too, supporting families from eagerly anticipated booking-in appointments, to the early days at home with a new baby – and everything in between. Midwives share and respond to our hopes, plans and experiences as they unfold: the one profession who are there throughout this key life event.

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And I'm emphasising the particularity of midwifery relationships and care because of my growing sense of unease, which has led me to write this blog. This unease has grown as I've noted the cumulative effects of different actions, which are chipping away at the profession of midwifery: both in plain sight, but also away from broader public debate. I also recognise that I'm writing amidst a deeply-troubling landscape where government-commissioned maternity reviews, reports, NHS plans and media investigations sit alongside the unimaginable visceral experiences of baby loss, where things have gone wrong and families have been lied to and further traumatised. This backdrop has clearly not produced the answers for anyone, amidst reviews and recommendations on repeat that have been polarising.

Surely, it is time to see different professional groups pulling together to demand and ensure optimum conditions for safe and personalised maternity care. But rather than this be the case, midwifery is being isolated and scapegoated as things have gone wrong and answers are needed. And the cumulative effect and threat of this is that midwifery provision and maternity care as we know it is at serious risk of being quietly unravelled.

And this is why I find the recent attacks on midwifery particularly troubling. These have been largely conducted in newspaper articles behind paywalls, on social media and in professional publications and include recent journalistic attacks, focused on midwives and now midwifery education. I have to wonder if other related professional bodies are being similarly scrutinised? I'm also surprised that in this case the professional and university regulations that govern such programmes aren't seen to safeguard their standards. But even more worrying has been the personal attacks on individual midwives, pitting overly simplistic, but fixated binaries of 'normal' (and I think they mean physiological or vaginal) birth against caesarean births in unevidenced ways. When my five grandchildren were born, I was thankful for the emergency caesareans *and* vaginal births that brought them into the world – amid pregnancy histories of loss, genetic uncertainty and IVF.

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My worry is that this type of personal and professional attack shuts down debate and silences voices – sometimes even from within the professional bodies – which should be heard. I've thought about this too and whether to write this blog – it is probably easier not to. But what is happening to the profession of midwifery is too important to allow some key actors to orchestrate from powerful positions. Especially without childbearing families up and down the country being heard, or even being aware of these actions. I have worked in countries without midwifery care and contributed to guidelines to improve access to skilled care at birth. I know that the evidence shows that midwives, when properly supported by multidisciplinary colleagues and the wider system, save lives – and I know that harming midwives ultimately harms childbearing families and their babies.[2,3,4]

It’s surely time to disentangle the different press and journalist interests, professional and political agendas, the horror of baby loss and the traumatising treatment received, which are being conflated as a singular attack on midwifery in a toxic atmosphere. But more worrying is that such attacks silence others and so distort any debate, which is vital for understanding all childbearing families and their individual circumstances, needs, preferences and decisions. By silencing voices we, to borrow a metaphor, risk throwing the midwife out with the bathwater. And this surely, no one wants. Midwives matter – when they are weakened, the risks to women, babies and their families are real. Not to be too alarmist, but dear childbearing families, we need to hear your voices too.

References

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