

# BEING PREGNANT DURING THE COVID19 PANDEMIC

**UPLIFT** PEOPLE  
POWERED  
CHANGE



# THIS REPORT

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This report has been compiled in response to the HSE Maternity Care Guidelines published in October and in response to the campaign to ease restrictions introduced for people accessing maternity services since the start of the pandemic.

During October and November 2020 Uplift members directly impacted by the restrictions on maternity care shared their views. 709 people from across Ireland and covering a majority of services participated in a survey shared with Uplift members.

54% of respondents are currently using maternity care services. 17.4% had been pregnant during the Covid 19 pandemic and the remainder were either partners, close family members or interested in this issue.

7 respondents said they also worked as healthcare professionals.

Names have been changed as some people fear being negatively treated while using maternity services. Only a small number of the hundreds of stories and experiences shared by the 709 people who participated could be included in this report.

It is the intention of all involved in contributing to this report are mindful of health and safety of healthcare workers and respect public health advice. However if we are all in this 'together' then an equitable, inclusive and humane approach to maternity care is essential.

It is also vital that the experiences and voices of those affected by the changes imposed are heard in the design and development of maternity services now and into the future.

## ABOUT UPLIFT

Uplift is a people-powered campaigning community of 336,000 people who take coordinated action together for a more progressive, equal, socially just and democratic Ireland.

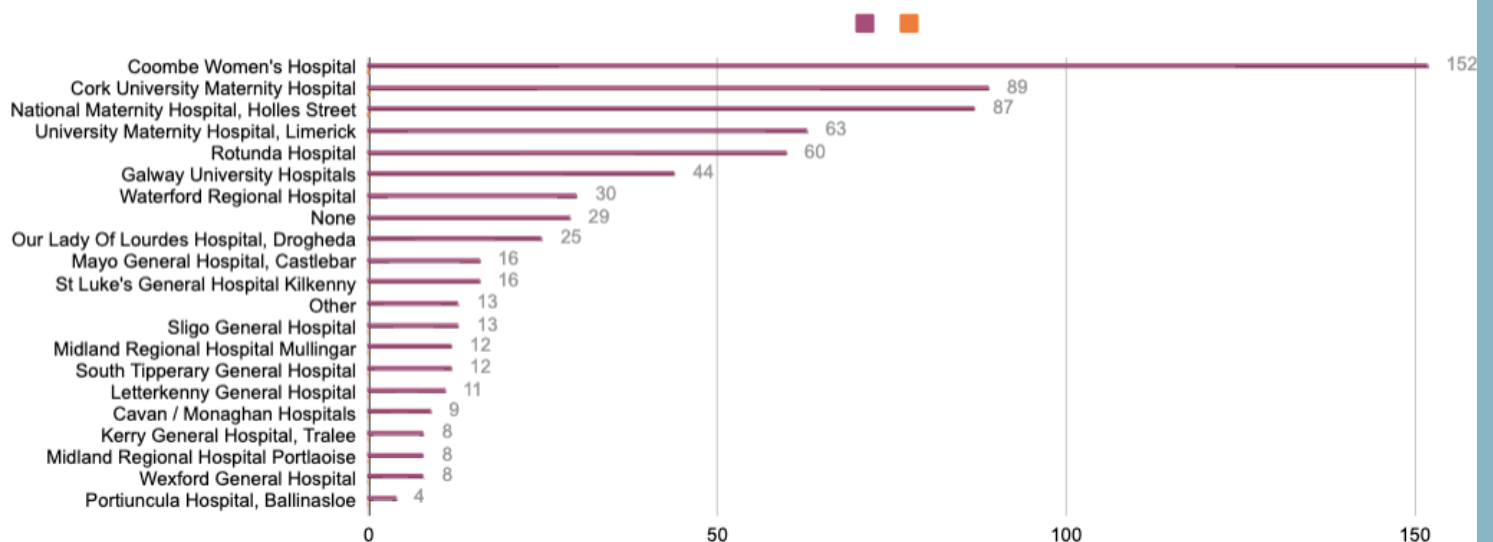
Uplift members seek to bridge the gap between members of the public and decision makers through powerful technology, events and consultation through surveys for submission such as this one.

Read more at  
<https://www.uplift.ie>

# MATERNITY SERVICES USED

Respondents to this survey had been or are currently attending 14 out of the 19 maternity services across the republic of Ireland.  
2% of people indicated 'other' and based on comments this is understood to be mainly private homebirths.

Maternity Services Accessed



"A child has two parents. Just because the child comes from one the other should not be excluded from the birth or any ante natal Visits. For some, this is their first experience with maternity services and I feel as of right now, private hospitals are eclipsing the services of the maternity services available on the public forum.

If a mother and father are from one household there should be no reason both cannot be in attendance for the same duration.

Giving birth is the most wonderful, traumatic and important time of anyone's lives. The fact that us ladies have to go through it ALONE is deplorable and should be reconsidered immediately." Ciara

# HSE GUIDELINES ON MATERNITY CARE

Uplift members were asked for their response to the HSE 'Visiting Restrictions in Place in Maternity Services in Response to Covid-19', drafted in response to the concerns expressed by people using maternity services across the country.

It is worth noting that these guidelines are not published on the HSE website.

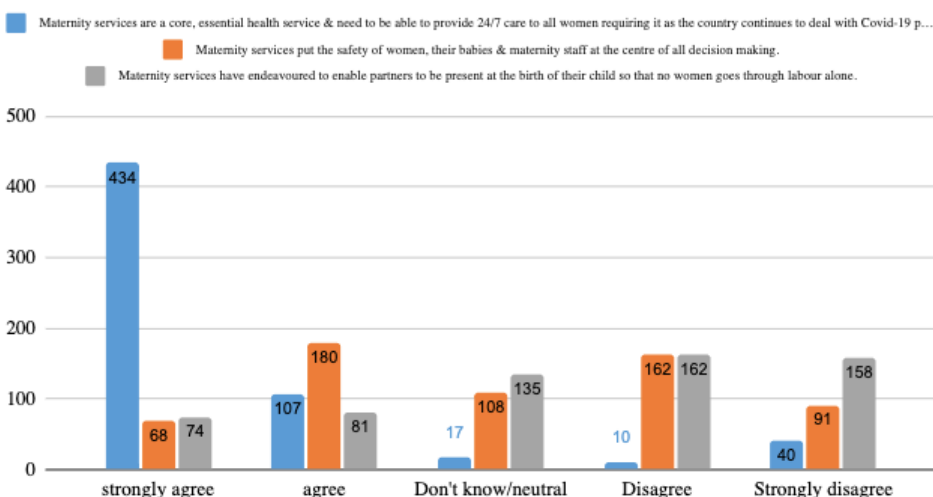
89% of respondents agreed or strongly agreed with the statement "that maternity services are core, essential health services which must be available 24/7 to all women requiring them, as the country continues to deal with the Covid-19 pandemic."

Only 25% people felt that "maternity services have endeavoured to enable partners to be present at the birth of their child so that no women goes through labour alone."

Read the guidelines here

<https://drive.google.com/file/d/1gx85MFcpq6be3IVrNPUWdZnQ2lIHYe8G/view?usp=sharing>

How do you feel about the following statements contained in the HSE's Visiting Restrictions in Maternity Services' Guidelines?



# HSE GUIDELINES ON MATERNITY CARE

41% felt that maternity services do not prioritise the safety of women, their babies & maternity staff in decision making nor have they endeavoured to ensure that no woman goes through labour alone by enabling their birth partner to be present during childbirth.

Maternity services are a core, essential health service & need to be able to provide 24/7 care to all women requiring it as the country continues to deal with Covid-19 pandemic.

**89% agree**

Maternity services put the safety of women, their babies & maternity staff at the centre of all decision making.

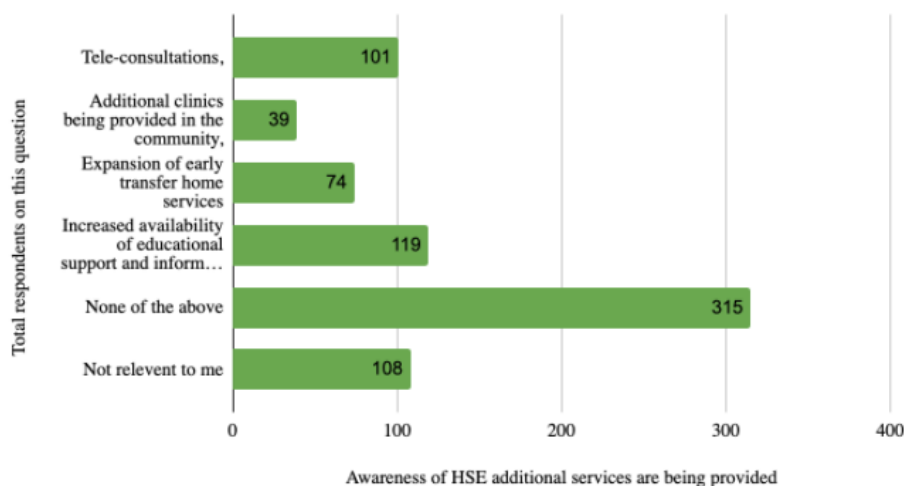
**41% disagree**

Maternity services have endeavoured to enable partners to be present at the birth of their child so that no woman goes through labour alone.

**25% disagree**

The HSE Guidelines state that they are providing a number of additional services i.e. tele-consultations, additional clinics being provided in the community, expansion of early transfer home services, increased availability of educational support and information on line by hospitals. However a stark conclusion is that a significant number of people ie 44% are not aware of these additional services. Respondents reported finding out information second hand or in a casual way.

Awareness of HSE additional services are being provided



"I have had to go to scans on my own I am sixteen years of age it is very scary to not have had any support" Sonia

"During my induced labour the amazing midwives allowed my husband be present with me throughout it all. Their compassion and kindness I will never forget. Women and men need to be together at this time. Surely there are protective measures that can be introduced to allow this happen. PPE, rapid testing etc." Fatima

"While I appreciate the need to keep everyone safe during this situation, I cannot understand how partners are treated as visitors in respect to maternity services, rather than an intrinsic part of the service. Every effort should be made to facilitate their attendance at appointments, labour and after the birth of the baby." Sarah

# THE EXCLUSION OF PARTNERS

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The lack of involvement of partners in antenatal care and during hospitalisation was a dominant theme in the responses received as part of this research.

There was unanimous agreement that partners should be allowed to attend antenatal visits, during labour, the postnatal ward.

86% strongly agreed that people should have partners with them when bad news is anticipated. From feelings of isolation, unnecessary stress, difficulties with bonding, strain on relationships, exacerbation of post traumatic stress – the accounts of how exclusion of partners is affecting both the person pregnant and their family were numerous.

The emotion, worry, upset and sheer heartbreaking was overwhelming in the accounts of people who participated in this research.

Anya shared her experience, *"The partner is also put under extreme stress as they do not know what is happening inside the hospital. The pressure is on the labouring mother to constantly be on their phone, mid contractions, to communicate with their partner. This is not realistic and not conducive to a relaxing birth experience."*

Mary spoke about what it was like when she experienced a miscarriage "I was referred to the early pregnancy unit *"I was told to go back a week later to confirm a miscarriage. Again on my own. This was the most heartbreaking thing we have been through and I had to deal with this on my own. My partner felt very excluded by all of this and it's affected us both a lot but in different ways. I had no support and was scared and felt like I couldn't take in what had happened. This puts pressure on the most secure relationships."*

"It's not fair that a woman could be admitted for hours maybe even days and her partner isn't allowed to be there until the last minute. At the end of the day, we sleep in same bed, live in same house, hell kiss me goodbye at the hospital door. Safe to say anything he has i already have."  
Meave

"My partner unfortunately missed our child's birth despite only living 20 minutes from the hospital as my labour progressed so fast" Tanya

"Women and babies are not put first – Without the support of the father or birthing partner it is a very lonely time. Mental health is not considered. Some men/partners are not allowed in until late labour and some miss the experience. Some men are forced to leave after 15 mins and some get to stay for hours. It is case by case and totally unfair." Cora

# PAUL'S STORY

" I am soon to be a first time father and to say it has been a different experience is understated. My wife and I have gone through the excitement of finding out we're pregnant and being the happiest time in our lives to being the hardest most unfair and emotional rollercoaster that anyone should ever have to entail.

We had to go through the first scan and three further scans with me sitting in the car and my wife alone in a waiting room. I got to see my son or daughter for the first time on a piece of paper sitting in a hospital car park.

We have gone through the last few months with more worry than anyone should ever have to experience. I would love to know the person within the hospital setting that chose this restriction with no movement? I would love to know if this person has children and has ever experienced the joy and happiness of seeing your son or daughter being born? I would love to know how they would feel in my situation of not being allowed to support my wife in labour and see my child being born? How they would feel having their partner in labour or even in labour themselves alone with no support from the one person they trust and love.

I am a healthcare worker myself and fully realise the pressure it is also putting on our fantastic midwives and healthcare workers throughout our maternity services.

I can't accompany my wife while in labour to have our child, but I can go in to collect them and bring them home? It is an absolute disgrace and the Minister of Health needs to step up and acknowledge each and every one of us in this very same situation.

We need solid evidence that partners of pregnant women being accompanied to appointments and labour is a high cause of covid 19 cases? Where is the evidence that a child's father or mother supporting their partner through labour is causing a rise in Covid 19 numbers?

I am fully aware covid 19 is a very serious and life threatening virus that needs strict adherence to all guidelines set out by Tony Holohan and his amazing team. However it is time to also show empathy and support our venerable groups and let partners attend with their loved one for the labour of their child in a safe and organised environment that meets all guidelines effectively and safely.

# THE TRAUMA OF MISCARRIAGE

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Going through a miscarriage is an extremely distressing experience with long term emotional and physical impacts. As conveyed by many of the people participating in this research, Covid19 restrictions are compounding the distress experienced and the the pain and distress is leading to longer term impacts for many.

This section gives just a brief overview of the extent of the pain and distress felt by women and pregnant people affected. A selection of experiences and stories are shared that demonstrate how difficult, traumatic and stressful the restrictions have been for people and their partners who have experienced miscarriage in recent

"I miscarried alone in the emergency room of \*\*\*\*\* hospital without my partner who had to wait outside while I was scanned and the news was given to me. Nobody was able to comfort me in those hours, I was completely alone." Raluca

On the day of her scan Mary and her partner tried to attend her antenatal appointment. Mary's partner was refused access despite the knowledge of medical professionals that devastating information was about to be given, " He went and waited in the car as I went on to have my doctors appointment, midwife appointment and then the sonogram.

I was told by myself that my baby's heart had stopped developing. I was devastated like anyone else would be, and to add to that I had to walk out through a hospital that I work in. When I told my partner we both cried in the car park in each others arms.

Two days later, Mary had to have another sonogram to tragically confirm the heart had stopped beating and discuss their options, "I had a phone call from the midwife specialist who told me I would be able to bring my partner to the appointment. When we arrived we were told that he would not be able to enter, but my partner refused to leave and eventually he was let in.

I was admitted to hospital on my own to have the medical management treatment to induce labour, and I delivered my baby a few hours later by myself in the bathroom.

To go through this process alone was extremely difficult. I wanted my partner with me, if not him I wanted my mam, I just felt so alone and needed support."

I received news during an emergency room apt that I had miscarried. It was late on a Saturday night and there was only 1 other patient in a huge waiting room. I was there for nearly 8 hours while my partner sat outside in the car. They never let him come in to hear the news, support me or be involved in the loss that was also his. . Then I had to tell him that we had lost our baby. It was a harrowing experience and inhumane treatment. No element of compassion was shown to us once.  
AnnMarie

# MISCARRIAGE

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Rachel had surgery for a miscarriage at 13.5 weeks. She describes her experience of going through the process alone and her feelings of vulnerability and of being a burden on the system, "With the miscarriage, I found out alone, I told my husband in the car on the side of the road. I went back in for another scan alone and surgery alone. I wasn't allowed a general anaesthetic due to covid and I was made to feel like an imposition for even asking. I felt very alone and vulnerable. Rachel is now 20 weeks pregnant again and describes her anxiety at attending maternity services and effect the previous experience has had on her husband, "And now that I'm pregnant again, I'm feeling immense stress and have difficulty going back in for care. I really struggled with fear for the first few scans, terrified I'd be told there's no heartbeat again. Still, I was alone for all of it. I'm dreading the birth as I just associate the hospital with being vulnerable and scared with really strict unfeeling rules. It seems it's just women that need to bare the brunt of the restrictions. My husband is also affected by all of this, after all, it is his baby and he did lose our last one too..."

Rebecca experienced a miscarriage in July of this year, had to come into hospital alone while bleeding badly and in distress, " (I) found out during ultrasound alone that I was losing my baby and my husband couldn't even come in to help walk me out. I received a follow up phone call to check on my condition over a month later. Rebecca explains her decision to have a private scan and to miscarry her baby at home, "I was so traumatised by the hospital experience and not wanting to return to have a D&C alone that I paid to have a private scan to find out if I would need one, and with the help of my GP passed my baby at home. She describes the anxiety she now feels during her current pregnancy "I got pregnant 2 weeks after this and experienced bad anxiety through my pregnancy and fear getting bad news alone and having to go through that again, or even if my pregnancy is healthy having to go through labour alone, which can last days, and baby can come so fast that my husband could miss it."

"I went through my second miscarriage alone and scared while my partner was sat out in our car for over 5 hours alone scared and with no idea what was happening me or his unborn baby its cruel you wouldn't treat animals like this. I am currently pregnant again 16 weeks along and every appointment is torture on my own scared I will be told the worst again and alone it needs to change its not fair." Dee

"Our last baby was diagnosed with a fatal fetal abnormality which resulted in her being delivered stillborn at 25 weeks last year. After becoming pregnant again I have had to sit in the hospital for every appointment, every scan by myself only with the constant worry and fear and anxiety for company!" Irena

# CLAIRES STORY

I had surgery for a miscarriage at 13.5 weeks in May 2020 and now I'm 20 weeks pregnant again.

With the miscarriage, I found out alone, I told my husband in the car on the side of the road. I went back in for another scan alone and surgery alone.

I wasn't allowed a general anaesthetic due to covid and I was made to feel like an imposition for even asking. I felt very alone and vulnerable and now that I'm pregnant again, I'm feeling immense stress and have difficulty going back in for care. I really struggled with fear for the first few scans, terrified I'd be told there's no heartbeat again. Still, I was alone for all of it.

I'm dreading the birth as I just associate the hospital with being vulnerable and scared with really strict unfeeling rules. I work as a doctor in another specialty and my patients are treated with much more dignity and compassion.

It seems it's just women that need to bare the brunt of the restrictions. My husband is also affected by all of this, after all, it is his baby and he did lose our last one too...

# PREGNANCY & POST PARTUM CARE

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Women and pregnant people describe in great detail how their pregnancy care in general is being affected by Covid 19 restrictions. The general conclusion being that, despite the efforts of many professionals, antenatal care is not adequate with antenatal classes being canceled and little support for mothers wishing to breast feed. These are particular problems for first time mothers who have no experience of what to expect and are distanced from close family and friends with no one at hand to advocate for them.

"This is my first pregnancy after going through 2 pregnancy losses and the recent death of my own mum. Attending every antenatal appointment without my husband to support me has been upsetting, unsettling and has without doubt had a negative emotional impact on the pregnancy experience." Lia

"Antenatal care was good. All was well until I was induced in the hospital. It progressed really quickly and staff weren't listening to me. At the point at which I needed to be moved to the labour ward there was no staff available. It took my mother to ring the labour ward for something to happen." Sonja

"All women who chose to breastfeed should be seen by a lactation consultant before they leave hospital. There is little support in the community because of Covid & this affects the continuation of feeding at home." Akila

"I went through my second miscarriage alone and scared while my partner was sat out in our car for over 5 hours alone scared and with no idea what was happening me or his unborn baby its cruel you wouldn't treat animals like this. I am currently pregnant again 16 weeks along and every appointment is torture on my own scared I will be told the worst again and alone it needs to change its not fair"  
Lottie

# GIVING BIRTH

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Giving birth is a momentous moment in any person's life. With the right supports in place it can be an empowering, beautiful experience. But for some people it can also be a very difficult and distressing one. Many people shared stories of how the birthing experience was negatively affected by the restrictions.

Fran was one of many people who spoke about being left alone during labour. "I had a quick labour. But laboured on my own and gave birth on my own. I had to ring my husband in the height of labour, the midwives I feel should be doing this he ended up missing the birth and was with me for approximately 2 hours after.

In conjunction with not being able to attend antenatal visits, the absence of Birth Partners was the other top concern relayed in survey submissions. This was expressed in many ways and numerous experiences shared. These ranged from the belief that partners/fathers have a right to be present throughout, to the impact not having an advocate present, the loneliness and enhanced fear and stress caused by being left for long periods.

A number of stories relayed problems that arose during labour but because they were alone it was difficult to get the attention they needed. *"Partners should be there for all of this! Having a stranger be there instead of the person you are experiencing this with is outrageous. They may have an idea of how you are feeling but they are not going through this. They are not your partner, they are not the father/mother of your child. And they cannot support you in the same way. It's traumatic and wrong. Why are others allowed support in other areas of the hospitals but maternity is different?"*

"There should be a time limit on the amount of time that a woman is left labouring alone after induction as some people take a very long time to get to the established labour phase but are still in need of their partner's support. Leaving women to labour alone is never OK." Mary

"Antenatal classes cancelled and to be honest it did take too long for online option to become available. (Approx 3 months)" Alex

"Partners are NOT visitors. The HSE need to have compassion for the women they are allowing to labour alone, receive bad news alone and mind their newborn alone. Things need to change and they need to change now." Giovanna

# IMPACT ON MENTAL HEALTH

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Many people in sharing their experiences talked about the effect of being pregnant during Covid19, giving birth, having a miscarriage or problems with pregnancy has had on their mental health.

The word 'traumatised' appears on numerous occasions and there was a particular focus on scans, appointments, early stages of labour, the post natal experience in hospital. Respondents expressed anger at their experiences, and at the anxiety, fear and mental and emotional strain being imposed upon them and their partners.

"I suffer very bad with my mental health to where I can't travel on my own anywhere via bus or train etc so I have to have my partner with me everywhere I go as we don't drive. So I have to now have my partner and 2 year old son travel on the train and Luas and wait outside in the freezing cold until my appointment is finished." Len

"The worry that my husband wouldn't be able to attend the birth or postnatal ward had a huge effect on my mental health to the point where I was signed off work due to severe anxiety." Ellie

"The bonding between father and child is disrupted and I feel this will have long term effects on all members of the family. I also feel the mental health of mothers is at risk especially those who like myself have previously suffered from postnatal depression." Helen

"It's vital it's important that women have their partner with them during what could be one of the most traumatic experiences that they ever have. The mental health of pregnant mothers is just as important as their physical health. What happens during this period can have a long lasting psychological effect which can impact on maternal mental health and therefore that of their baby." Carol

"I was so scared to deliver on my own, my plan was to labor in the car in the hospital car park so my husband wouldn't be separated from me and go in when I was far enough along that he could come in with me. My blood pressure did go too high towards the end so I had a section. I stayed 1 night and went home the next day because I needed my support person in my most vulnerable state. Physically I needed the care of the hospital as I recovered from surgery but it would have destroyed me mentally. I should not have been forced to choose between my physical and mental health."

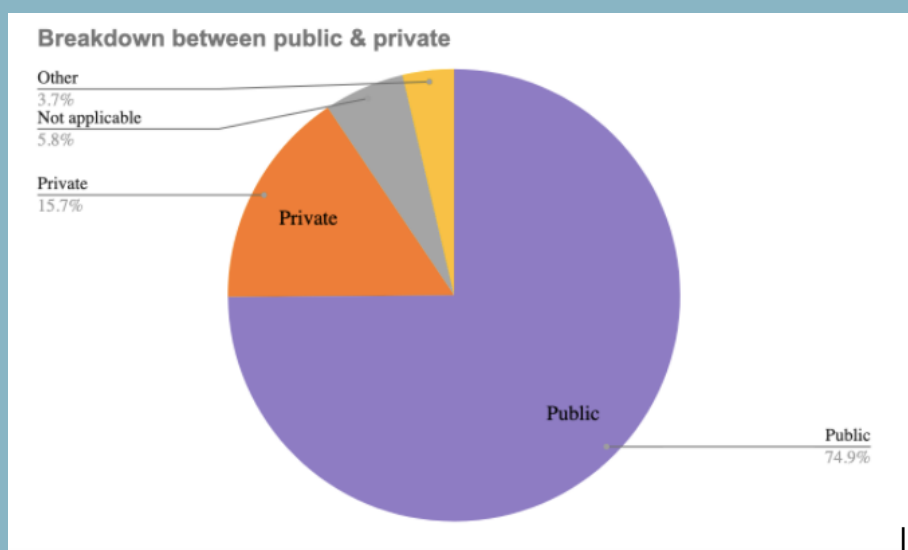
Kathy

"I'm a first time, soon to be, mom and my anxiety about not having my husband with me is through the roof."

Siobhan

# DIFFERENCES BETWEEN PUBLIC & PRIVATE

75% of people responding to this survey were public patients. 15% said they were private patients. A pattern from the respondents is the use of private scans as when using these private services birth partners are permitted. As we have seen, this is not now permitted in most public services.



"I was only 5 weeks pregnant when they thought I was having an ectopic pregnancy or miscarriage. Left sitting on my own with no reception for two hours whilst my partner stood outside the hospital main doors worried sick. Then sent me home for two days and had to come back in, alone again when they told me baby was actually fine. Imagine the confusion I felt and had to inform my partner who was more confused from not hearing it first hand? I'm 19 weeks pregnant now and I'm still traumatised each appointment I have. Yet, last week we went to a private scanning place and he was allowed in? I just don't understand it." Fran

"I am ordinarily quite a chilled out person but I am highly anxious with this pregnancy. I have had two panic attacks whilst in the hospital I think partly because my partner wasn't there to reassure me that everything was going to be ok. Because of this anxiety I wanted to face time my partner when I was getting my initial, 12 week, scan. I was told I wasn't allowed. When I then asked if I could video the scan, to show him later and give him the opportunity to ask questions at a later date, I was told no, I couldn't do that either.

I eventually cancelled my scan with the \*\*\*\*\* and booked into the private Evie clinic, where my partner was allowed in and the day was really lovely and a nice bonding experience for us all....one which I would have been gutted to not have, looking back, had I gone ahead with my scan, alone, in the \*\*\*\*\*" Carole

"Friends are giving presents of private scans to pregnant couples, just so the father can be present" Teresa

# FEELINGS OF SHAME & GUILT

"During my hospital stay, my baby fell from my arms as we slept, from the bed onto the floor. I hadn't slept in 48 hours and I was exhausted and fell asleep with her on my chest (not deliberately and still wish every second of every day that I hadn't).

I didn't have the help of my partner as he was asked to leave the hospital 20 minutes after our daughter was born (he wasn't with me for her birth and took care of her for 20 minutes while I was in recovery).

I was so so tired. I needed help, lots of it, and I was too shy to ask for it. Apart from that, the midwives were too busy. And I didn't want to leave my baby with strangers as I rested, even if help was available.

After going through very serious surgery I was taking care of my newborn 24/7 on my own. And honestly? I left the hospital too afraid to tell a professional about what had happened.

The shame and guilt completely overwhelmed me. I spent three days in hospital wishing I wasn't there with my curtains pulled. Most of the time I cried.

It was honestly horrific and I have PTSD four months on." Delta

"The water station was down the hall but it was a bit of a mission as had to walk slow from an episiotomy & hard to leave baby unattended. I was so thirsty & that affected my breastmilk. I needed my husband for support i.e. to refill water, mind baby while I went for shower. I'd also started to run out of things but tried to spare them." Aoife

"The water station was down the hall but it was a bit of a mission as had to walk slow from an episiotomy & hard to leave baby unattended. I was so thirsty & that affected my breastmilk. I needed my husband for support i.e. to refill water, mind baby while I went for shower. I'd also started to run out of things but tried to spare them." Susan

# LACK OF CARE

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There were countless experiences shared about the lack of support women and pregnant people had to endure. This was particularly evident for people going through pregnancy for the first time, managing the birthing process and especially coping with difficult news.

I was left alone on an antenatal ward in labour and was only looked at when I told the nurse I felt like pushing. As a first time mother the lack of support was obvious. My daughter was breech. My fluid was gone. And her feet were out. I was moved to the labor ward and had an emergency c section. My partner not only missed anomaly scan and appointments but the birth of his first child."

"My daughter was born at 27 weeks and 5 days. She was admitted to a neonatal unit for 11 weeks and 1 day. The first time my myself and my partner were together with her was outside the unit leaving to go home.

The stress put on parents especially mothers is not acceptable. I was in labour for 42 hours. Hospitalised for 41 of those hours. I was alone, petrified and traumatised by my situation. I do not intend to have any more children after this experience.

"Unfortunately having to attend the scan alone, to be told I had an ectopic pregnancy, while my husband had to wait in the car not knowing what we were facing. Then to have to wait around alone for emergency surgery was the scariest feeling I've ever felt, while dealing with the devastation of losing our baby. The nurses and doctors were amazing but the loneliness of not having my partner there to hold me was just horrible. For him it was as bad knowing he couldn't be there with me, knowing he couldn't hold me and I couldn't hold him through the devastation. I wish this upon no person."

"The bonding between father and child is disrupted and I feel this will have long term effects on all members of the family." Cora

"I'm a first time, soon to be, mom and my anxiety about not having my husband with me is through the roof." Laura

"My overall experience so far at 28 weeks has been great however this has been overshadowed by my babies impending birth and the knowledge that my husband will not be there to support me for the first hours of labour and the subsequent hours after birth. Our government claim to be reducing gender stereotypes and gender bias but once again proves that the role of the partner in the first few days of life is deemed inconsequential and the mother is expected to be the primary care giver having just gone through pregnancy and labour" Winnie

# PRESSURE ON HEALTHCARE STAFF

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Many of the survey respondents stated their appreciation for healthcare staff. A recurring theme however, was the understaffing of wards and services, the unavailability of staff when they were sometimes most needed.

It is also worth noting that a number of patients who shared their experiences are also healthcare professionals themselves. Without exception they described feeling upset with the impact the restrictions had or is having on them.

Several people noted that hospitals have adjusted the flow of people in and out of clinics and hospitals to minimise risk to both staff and people using maternity services.

In this context questions were raised by respondents about the perceived need to exclude partners given the safety measures in place. "The midwives can't do any more. They are doing so much and need support too!! All I wanted was my husband."

"Staffing shouldn't just be available when bad news is anticipated. The compassionate grounds and facilitation for parents to visit Neonatal services was not available. I had my baby at 5:53am and wasn't facilitated by staff to visit him until 5pm that evening due to staffing shortages. His discharge from HDU was delayed due to staff shortages and no time to complete assessments." Greta

"The care I received was phenomenal but I found it very difficult when my partner had to leave half an hour after our baby was born. We hadn't even given our son a name. He went to the car to get my bags and he wasn't allowed back in. The porter returned with my things." Breda

"The midwives were amazing but clearly very much under pressure due to the women in labour having no support with them and needing a lot of help. I don't hold anything against them but my experience has left me struggling with my mental health. I felt alone and scared the whole time all I wanted was a hug from my partner. I don't understand the restrictions either, personally I feel there is no excuse for why women are being made to do this all by themselves." Eileen

# APPROACH TO DECISION MAKING

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A dominant theme is questioning the assumptions and basis for the decision to exclude partners from scan appointments, during the early stages of labour and postpartum visits.

In responding to the HSE Guidelines only a small number of people felt that maternity services put the safety of women, their babies & maternity staff at the centre of all decision making.

It was pointed out that when people attend A&E departments it is often the case that a partner/support person to be allowed to stay with the patient.

Several respondents stated that cohabiting couples are considered to have the same risk as each other of carrying Covid 19 and thus are permitted to be together in a majority of scenarios, except, it seems, when it comes to maternity care.

"I feel like putting women's safety at the core of their decision making cannot be what the maternity services are doing, when hospitals vary in their approach to allowing partners attend appointment, labour and post delivery. Also, it disregards the mental health of women and puts them in such a high state of stress, taking away their ability to labour in a safe way." Tom

"As first time parents, myself and my husband feel he has missed out on a very important part of the process, being the 12 week scan. The first time you get to see your baby move and the reality of parenthood and the life growing inside you starts to sink in.

While we understand and respect the need to keep people safe it does not seem logical that the risk of having 2 cohabiting people significantly increases the risk of spreading covid if 1 of us have it then it's likely we both do.

I was not allowed to video call him for the scan or take a video for staff privacy reasons.

The staff are doing the best they can under the regulations and it is no reflection on them but rather the people who make the rules and take this special time away from parents." Sara

I had applied to give birth at home under the home birth pathway but due to complications in the last 2 weeks of my pregnancy I had to be induced and had my baby 2 weeks ago. I found the lack of partner support very stressful. I had to fight to not be induced earlier and all the decisions I made were evidence-based whereas those of the healthcare professionals seemed to be anecdotal rather than giving me statistics. Without my partner there for support I felt very pressurised into induction and was scaremongered when I wished to go home. The staff were great overall, I just feel the system isn't for women, it's simply to get the baby out and no consideration to me and my baby's good experience of the birth we hoped to have (within reason of course). Tara

# CONCLUSIONS

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Healthcare professionals are valued and respected but are not in a position to respond or provide adequate care due to understaffing and high pressured work situations.

Partners living with pregnant women and people should be considered as a single unit for the purposes of all care provided during pregnancy.

It is a widely held view that decision making in relation to provision of care during Covid19 is not patient centred and excessively cruel.

Systemic problems with the Irish maternity services and the treatment of pregnant women and people has been highlighted and further exposed during Covid19.

The policy of not allowing partners to attend scans is inconsistent and dependent on the leadership of individual maternity hospitals.

It also not seem consistent with other healthcare provisions ie reports that a support person allowed attend with someone attending A&E.

Healthcare professionals are valued and respected but are not in a position to respond or provide adequate care due to understaffing and high pressured work situations.

Mental health breakdown arising from the trauma and experience of using maternity care services is a growing problem that requires urgent attention

It is important to use inclusive language ie women and people who are pregnant, recognising that not all people who give birth are women.

The experience of poverty, racism and other forms of discrimination is compounded by the additional barriers created by Covid19 restrictions