

PRESS RELEASE: FOR IMMEDIATE RELEASE

Birthrights names Nadine Montgomery as the charity's first Patron

Human rights in childbirth charity, Birthrights, is delighted to announce Nadine Montgomery as our first ever Patron. As a public ambassador for Birthrights, Nadine will continue her work to champion women's autonomy and consent in childbirth, supporting our communications and campaigns, training for healthcare professional and high-level events.

In 2015, the Montgomery v Lanarkshire Health Board case in the UK Supreme Court powerfully affirmed women's right to autonomy in childbirth. Allowing the appeal from the Scottish courts by Nadine Montgomery, whose baby suffered shoulder dystocia in labour, the Supreme Court held that women have a right to information about 'any material risk' in order to make autonomous decisions about how to give birth.

This landmark judgement continues to have a powerful impact on maternity care policy and practice in the UK, re-affirming that women must be the primary decision-maker in decisions about labour and birth. Birthrights has been working to support the implementation of the Montgomery judgement through our advice and resources for women, training for healthcare professionals, and joint work with NHS England to develop and test a decision-making tool to support informed consent during labour.

Amy Gibbs, Chief Executive of Birthrights, said:

"The Board of Trustees and I are delighted that Nadine has agreed to become our first ever Patron. Anyone who has heard Nadine speak will know how inspiring her story is – not only content to fight for herself and her son, Sam, she continues to advocate for informed consent in healthcare and recently completed a law degree, to help others achieve access to justice. Her passion for women's rights and autonomy in childbirth completely chimes with our mission and we know she will be a fantastic ambassador for Birthrights."

Nadine Montgomery said:

"I am absolutely delighted to become part of the fantastic team at Birthrights as their first ever Patron! My journey advocating for patients' rights to informed consent began 20 years ago when my son Sam was born with Cerebral Palsy and left Erbs Palsy following a very traumatic delivery. Despite asking questions more than once throughout my pregnancy about delivering a large baby, at no point were options of delivery, or the risks of delivering a larger than average baby vaginally, discussed with me.

"At the very core of Birthrights' beliefs is the right to autonomy and self-determination, something that I have fought for ever since, to make sure this never happens to any other woman, or patient, ever again."

ENDS

For more information, contact press@birthrights.org.uk or 0300 400 0103.

Notes to editors:

About Birthrights

Birthrights is the UK's only organisation dedicated to improving women's experience of pregnancy and childbirth by promoting respect for human rights. We believe that all women are entitled to respectful maternity care that protects their fundamental rights to dignity, autonomy, privacy and equality. We provide advice and legal information to women, train healthcare professionals to deliver rights-respecting care and campaign to change maternity policy and systems.

See <https://www.birthrights.org.uk> for more information.

About Montgomery vs Lanarkshire Health Board

Mrs Montgomery, a pregnant diabetic woman with a large baby, was not informed by her obstetrician of the chance of shoulder dystocia and the consequent risks to her baby or her own health. Although she had repeatedly expressed concerns about giving birth vaginally, the obstetrician said that she routinely chose not to explain the risk of shoulder dystocia to diabetic women because the risk of serious injury to the baby was very small and that if she did explain it, 'then everyone would ask for a caesarean section'.

The Court made clear that the process of informed consent must include a dialogue between the healthcare professional and the women, including benefits, 'material risks' and reasonable alternatives so she can make an informed decision. 'Material risks' are those to which a reasonable person would attach significance – statistics alone will not determine whether a risk is significant to a particular women, so the discussion must be personalised to her specific situation and needs. Hospitals can not rely on printed information leaflets, nor simply on a completed consent form as evidence that risks have been fully shared.

See <https://www.supremecourt.uk/cases/docs/uksc-2013-0136-judgment.pdf> for more information.