

# Briefing from the Baby Loss Awareness Alliance for the General Debate on Baby Loss Monday 13 October 2025, House of Commons

#### Introduction

The annual debate to mark Baby Loss Awareness Week, 9-15 October, has become an important moment in the Parliamentary calendar to raise awareness about pregnancy and baby loss in the UK. This year the debate has been called jointly by the APPGs on Baby Loss, Maternity and Patient Safety.

One in two of us, or somebody we know, has experienced the loss of a pregnancy or death of a baby. Every day in the UK, around 13 babies die shortly before, during or soon after birth. This briefing outlines what must be done to improve maternity safety in the UK.

## **Maternity safety**

We know that the current scale of baby loss is not inevitable. The Sands and Tommy's Joint Policy Unit has calculated that at least 1 in 5 stillbirths and neonatal deaths may have been prevented with better care, equating to over 800 babies' lives in 2022-23. Too often, nationally agreed standards of care are not being followed which is contributing to avoidable deaths.

There have been several high-profile reviews and reports into the safety of maternity and neonatal services across the UK, including Morecambe Bay, East Kent, Shrewsbury and Telford, Swansea Bay, and Cwm Taf. These have consistently identified the same themes.

It is essential that when things go wrong in maternity and neonatal care, bereaved families receive answers about the care they and their baby received and that they know recommendations following reviews and investigations have been implemented. The 10 Year Plan for the NHS stated that there would be reform to the complaints process and improve response times to patient safety incidents and complaints.

We welcome the national investigation into maternity and neonatal services led by Baroness Amos, which will ensure the experiences of bereaved families inform review recommendations. The review must put forward a comprehensive national approach to maternity safety. This must include clear national oversight and implementation of review recommendations.

## **Questions to raise:**

- How will the government ensure that the national maternity and neonatal investigation recommendations are fully implemented by NHS Trusts?
- Will the government commit to providing national oversight of the implementation of the national investigation into maternity and neonatal services review recommendations?

 How will the government ensure that NHS organisations are open and transparent when things go wrong, ensuring that bereaved parents receive answers about their and their babies care?

### Future maternity safety ambitions to save more babies' lives

In 2015, the then government announced national maternity safety ambitions to halve rates of stillbirth and neonatal deaths by 2025 (relative to 2010 rates) in England. In Scotland, Wales and Northern Ireland there are currently no targets. Due to a lack of routine collection of miscarriage data, we do not know the true scale of pregnancy loss. This means it has not been possible to have a target to reduce pregnancy loss.

## The Sands and Tommy's Joint Policy Unit found that:

- By 2022, the stillbirth rate was 23.5% lower than the 2010 rate and the neonatal mortality rate was 25.0% lower.
- Despite this progress, the rates of decline have stagnated more recently and are not on track to meet the ambitions which end this year.
- If the English targets had been met, 2,500 fewer babies would have died since 2018.

The Lullaby Trust reports that rates of SIDS are not declining as quickly as hoped.

<u>The Unit have proposed the following targets</u> be introduced, with a deadline of 2035 to align with the 10 Year Plan for the NHS in England:

- A stillbirth rate of 2.0 stillbirths per 1,000 total births.
- A neonatal mortality rate of 0.5 neonatal deaths per 1,000 live births for babies born at 24 weeks' gestation and over.
- A preterm birth rate of 6.0% by 2035, with disaggregated data for iatrogenic and spontaneous preterm births.
- Eliminate inequalities in these outcomes based on ethnicity and deprivation.
- Establishing routine data collection on miscarriages should be prioritised. Once established, an ambition to reduce the miscarriage rate should be added.

These targets are focused on matching the best performing countries in Europe, with the lowest rates of baby deaths. Governments across the UK must work together to align under these ambitions, to eliminate disparities between the four nations.

#### Questions to raise:

 Will the government commit to renewing the national maternity safety ambitions when they expire this year?

- Will the Minister commit to working with their counterparts in Scotland, Wales and Northern Ireland to align under ambitions to eliminate disparities between the four nations?
- Will the Minister prioritise work to establish routine data collection on miscarriages and, once established, will they commit to a new ambition to reduce miscarriage rates?
- What assessment has the Minister made of stillbirth and neonatal death rates in other European countries and will they commit to matching the countries with the lowest rates?

## Inequalities in pregnancy and baby loss

There are stark and persistent inequalities in stillbirth and neonatal death rates by ethnicity and deprivation.

<u>The latest MBRRACE-UK data from 2023</u>, shows that babies of Black ethnicity remain more than twice as likely to be stillborn than babies of white ethnicity. Neonatal mortality rates among Black and Asian babies are over 50% higher than the rate among white babies.

There are also widening inequalities in neonatal mortality rates by deprivation. Babies born to mothers living in the most deprived areas of the UK are twice as likely to die in the first month as babies born to mothers in the least deprived.

<u>A recent report</u> from the Sands and Tommys Joint Policy Unit into access to interpreters in maternity care, found that inconsistent practices, fragmented provision, and a lack of clear national guidance can compromise communication and informed consent, particularly during critical points of care.

#### Questions to raise:

- Will the Minister adopt new ambitions to eliminate inequalities in maternal and neonatal outcomes based on ethnicity and deprivation?
- What steps will the government take to ensure that all women, birthing people and families can access interpreting services in maternity and neonatal care?
- How will the government address systemic racism in maternity and neonatal care?

### **About the Baby Loss Awareness Alliance**

The Baby Loss Awareness Alliance is a group of over 100 organisations committed to raising awareness of pregnancy and baby loss, providing support to anyone affected by pregnancy loss and the death of a baby, working with health professionals and services to improve bereavement care, and reducing preventable deaths.

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