SAFER Birth PROJECT
TRAINING
COMMUNITY
CHANGE

Trauma-Informed Maternity Care

Training Programme Overview.

Creating safer, more responsive maternity care for women and birthing people with experience of sexual trauma.

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CORE PRINCIPLE

Why this training matters.

Sexual trauma is not rare, and many survivors will never disclose. This means trauma-informed care cannot depend on knowing someone's history.

1 in 4	*1 in 6*	*Hidden*
women in England and Wales have experienced sexual assault since age 16	children aged 11 to 17 have reported experiencing sexual abuse	disclosure is not required for trauma to shape care
ONS, year ending March 2025	*Radford et al., NSPCC, 2011*	

Care as if trauma may be present, whether disclosed or not.

The learning pathway.

1	**Webinar** 60 minutes, online. Awareness raising and an entry point.
2	**Foundational Training** Core knowledge, recognition, communication, consent, and safer practice.
3	**Advanced Training** Trigger work, case-based practice, clinical responses, and complex scenarios.

The pathway allows participants to deepen understanding and skills progressively, from awareness to applied clinical practice.

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Foundational Training.

9 hours | online | no specialist prerequisites

- Understand how sexual trauma can affect pregnancy, labour, birth and the postnatal period.
- Recognise common trauma responses and why they may be misread.
- Strengthen consent, communication, body autonomy, privacy, and safer language.
- Identify small changes that reduce the risk of re-traumatisation.

Participant resources include:

Quick-Reference Guide: Labour, Birth and After, Communication Scripts, Small Changes Checklist, Reflection Worksheet, Practice Cards.

Advanced Training.

2 days | online | case-based and interactive

- Move from knowing to doing under pressure, while balancing clinical and emotional safety.
- Work with triggers, trigger cascades, dissociation, panic, freeze, withdrawal and refusal.
- Practise trauma-informed responses for examinations, procedures, medical interventions, and emergencies.
- Develop team communication, documentation, handover and implementation planning.

Participant resources include:

Trigger Checklist, Consent Language Examples, Case Study Worksheets, Cascade Mapping Worksheet, Procedure Planning Template, Documentation and Handover Templates.

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Who is it for.

- Midwives
- Obstetric staff
- Maternity support workers
- Nurses
- Health visitors
- Doulas
- Perinatal mental health professionals
- Family support workers
- Antenatal educators
- Charity-based practitioners
- Social workers
- GPs

Scope and boundaries

This is education in trauma-informed maternity care. It is not trauma therapy, diagnosis, counselling, or a replacement for safeguarding, clinical governance, or local policy. It covers care for women and birthing people, including trans men and non-binary people.

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