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Positive Woman

A Guide for Expecting Mothers



Table of Contents

Introduction	3
Chapter One	5
Prenatal Care in the UK	5
Schedule and Description of Midwife Visits	6
Pain Relief Options for Labor	10
Medical Questionnaire for the First Visit to the Midwifery Clinic:	13
Family Medical History:	14
Chapter Two	15
Pregnancy and Labor Law	15
Chapter Three	19
Maternity Leave and Maternity Allowance	19
Chapter Four	23
Dad at Work	23
Chapter Five	24
Official Matters	24
Chapter Six	27
Useful Contacts.	27



Introduction

Pregnancy is a unique time in every woman's life, bringing joy but also numerous challenges and questions. For women living in a foreign country with different healthcare rules, employment rights, and benefits, these challenges can be even more complicated. Especially when English is not their first language, daily matters related to pregnancy and motherhood can become a source of stress and uncertainty.

This book has been created for all pregnant women living in the United Kingdom who are struggling with language and cultural barriers. NatiCare aims to provide practical information to help Poles on the Islands navigate everyday situations.

Positive Woman: A Guide for Expecting Mothers is a book designed to help you go through pregnancy with greater confidence and knowledge about your rights and available services.

The chapters of this book cover a wide range of topics—from prenatal care and the schedule of midwifery visits to employment rights for pregnant women and maternity benefits, as well as administrative matters related to childbirth. You will also find a lexicon of lactation and pregnancy medications that will help you understand which medications you can safely use during pregnancy and breastfeeding.

I hope this guide helps you navigate your new reality and enjoy this special time in your life, regardless of the challenges you may face. The time of pregnancy and the first moments of motherhood are moments worth experiencing in peace and joy, and our book aims to support you in this.

I warmly invite you to read on.

Natalia Jagodzinska



Prenatal Care in the UK

Hospitals in England offer all pregnant women at least two ultrasound scans, as well as a range of other tests, which I will describe later in this chapter. Some women may undergo more than two ultrasound scans depending on their health and pregnancy.

Pregnancy is managed by a midwife alongside a family doctor. If your pregnancy is healthy, which I wholeheartedly wish for you, you will not need to see a gynecologist.

What to Expect from Your Midwife:

- ◆ Providing a pregnancy record book and care plan,
- ◆ Checking if you may need additional care or support,
- ◆ Scheduling follow-up visits throughout your pregnancy,
- ◆ Identifying potential risks associated with any work you may do,
- ◆ Taking measurements of height and weight to calculate Body Mass Index (BMI),
- ◆ Monitoring blood pressure and conducting urine

tests for the presence of protein,

- ◆ Checking for risks of gestational diabetes or preeclampsia,
- ◆ Offering screening tests for Down syndrome, Edwards syndrome, and Patau syndrome,
- ◆ Referring you for an ultrasound between 8 and 14 weeks of pregnancy to estimate your due date,
- ◆ Referring you for ultrasounds between 18 and 20 weeks to check your baby's physical development and look for signs of 11 rare diseases.

During pregnancy, prescription medications and dental visits are free until your child turns one year old. The child, in turn, receives free medications and dental visits until they finish school.

Schedule and Description of Midwife Visits

6 – 10 weeks Visit with the Midwife

Your first visit with the midwife should take place between the 6th and 10th week of pregnancy. As soon as you find out you are pregnant, contact your clinic to get in touch with midwives to schedule your first visit. The meeting with the midwife can take place at the clinic, at home, at a children's center, or in the hospital.

The first visit will last about an hour. During this time, questions will be asked regarding your health, past illnesses, previous pregnancies and births, as well as family medical history. You will receive a pregnancy book in which all your medical information will be recorded. You must have it at every appointment and take it with you for the birth. Dates of follow-up visits will also be recorded there. The midwife will check your height and weight, blood pressure, take blood tests, and a urine sample. They will ask about your general mood to identify possible depression and

This visit is an opportunity to inform the midwife or doctor if you are in a difficult situation or need additional support. This may be due to domestic violence or sexual abuse.



other mental health issues.

This visit is an opportunity to inform the midwife or doctor if you are in a difficult situation or need additional support. This may be due to domestic violence or sexual abuse.

8 – 14 weeks Ultrasound Examination

The first ultrasound will determine a more accurate due date based on the baby's measurements. During this visit, you will be offered a nuchal translucency test, which is part of the combined screening test

for Down syndrome, Edwards syndrome, and Patau syndrome. If the screening test shows that you have a higher chance of having a baby with one of these conditions, you will be referred for further diagnostic tests to determine if your baby has this condition. You will receive two results: one is the likelihood of having a baby with Down syndrome, and the other is the combined likelihood of having a baby with Edwards syndrome or Patau syndrome. If the test result indicates a higher probability of disease, you should be informed within three days. This means that if you do not receive a call within three days, the results are not concerning and will arrive by mail within the next two weeks.

16 weeks Visit with the Midwife

This routine pregnancy check will involve the midwife measuring your blood pressure, checking your urine, among other things, for signs of preeclampsia, and considering iron supplementation in case of anemia. From the 16th week, you will be offered a pertussis vaccine if you wish.

Preeclampsia is a health-threatening, and even life-threatening, condition for the pregnant mother and her child that can occur after the 20th week of pregnancy. Preeclampsia is characterized by elevated blood pressure and protein in the urine. Symptoms include: severe headaches, infrequent urination, visual disturbances, swelling of the limbs, abdominal pain, nausea, and vomiting.

18 – 21 weeks Ultrasound Examination

During this ultrasound, 11 internal organs of the baby will be checked for any abnormalities. The following will be examined: bones, heart, brain, spinal cord, face, abdominal cavity, and kidneys. A link to a detailed description of this and other tests in Polish can be found in the application attached to the guide.

25 weeks Visit with the Midwife

You will have this visit if this is your first pregnancy. This is a check-up during which the midwife or doctor will measure the size of your uterus with a tape

measure, check your blood pressure, and examine your urine for the presence of protein.

28 weeks Visit with the Midwife

At this appointment, the activities from the previous visit will be repeated, and the midwife will offer you more screening tests and initiate treatment if it turns out your baby has Rh+ blood while you have Rh-. This situation is called a serological conflict and is treated with a substance called anti-D.

Serological conflict (Rh disease) can arise when the mother has Rh- blood and the father has Rh+. The future mother's body then perceives her own child as something foreign and attacks it with antibodies.

31 weeks Visit with the Midwife or Family Doctor

You will have this check-up if this is your first pregnancy.

34 weeks Visit with the Midwife

In my opinion, childbirth classes are very helpful; however, if you choose not to attend classes, your midwife or doctor should provide you with information on preparing for labor and postpartum care, including recognizing the phases of labor, pain management techniques, and a birth plan. You should be informed about cesarean sections in case of complications during natural childbirth. As during previous visits, the midwife will check your parameters and ensure everything is proceeding normally.

36 weeks Visit with the Midwife or Family Doctor

Your midwife or doctor should provide you with information about breastfeeding, caring for the newborn, administering vitamin K, and screening tests for your baby. The midwife will check the baby's position, and if the baby is lying transversely, they will suggest an external cephalic version.



Chapter One

External Cephalic Version – a method of changing the baby's transverse position in the uterus to a vertical position, head down. This maneuver is performed by an obstetrician through the mother's abdominal wall. A link to a video can be found in the application.

38 weeks Visit with the Midwife

Your midwife or doctor will discuss options and choices regarding what will happen if the pregnancy lasts longer than 41 weeks. At each visit, you will have your belly size, uterine size, blood pressure, and urine tested for the presence of protein measured.

40 weeks Visit with the Midwife

This follow-up appointment will take place if this is your first pregnancy. The midwife or doctor should provide more information on inducing labor and suggest a cervical massage after the 41st week of pregnancy.

Cervical massage (membrane sweep) – a procedure involving the midwife or doctor performing a vaginal examination and placing a finger in the cer-

You should receive information about breastfeeding, newborn care, administering vitamin K, and screening tests for your baby



vix. The examiner makes sweeping circular motions for about 60 seconds to separate the amniotic sac from the uterine walls. The procedure can be quite uncomfortable, and there may be blood and mucus discharge as well as subsequent pain similar to menstrual cramps.

41 and 42 weeks of pregnancy Visit with the Midwife

You will have these visits if you have not given birth yet. Reasons for inducing labor include:

- ◆ Post-term pregnancy,
- ◆ Ruptured membranes without contractions,
- ◆ Health problems for you or the baby.

Pain Relief Options for Labor

Gas and Air – Entonox

Description:

This is a mixture of oxygen and nitrous oxide gas. Gas and air will not remove all the pain but may reduce it and make it more bearable. Many women use this as it is easy to use, and they control the dosage themselves.

How to Use?

You inhale gas and air through a mask or mouthpiece that you hold. The gas works for about 15–20 seconds, so you should inhale it when a contraction begins. It works best if you breathe slowly and deeply.

Side Effects:

There are no harmful side effects for you or the baby, but it may cause dizziness. Some women report feeling nauseous, drowsy, or unable to concentrate after using it – if this happens, you can stop using it. If gas and air do not provide sufficient pain relief, you may also ask for a pain relief injection.

Pethidine injection

Description:

This is an injection of a drug called pethidine into the thigh or buttock to relieve pain. Pethidine hydrochloride is a painkiller similar to morphine. It belongs to the group of opioids, which are narcotic drugs. It can help you relax. Occasionally (less frequently), a drug called diamorphine is used.



Action:

It starts to work after 20 minutes. Effects last from 2 to 4 hours, so it is not recommended during the pushing phase.

Side Effects:

Some women may feel uncomfortable and suffer from lack of concentration, and may also feel nauseous. If pethidine or diamorphine is administered too close to the last stage of labor, it may affect the baby's breathing – if this happens, another medication will be administered to counteract this effect. These drugs may interfere with your ability to breast-feed your baby within the first few hours after birth. Additionally, they may cause your baby to be more

Anaesthesia may prolong the second stage of labour. If you can't feel the contractions, the midwife will tell you when to push.



lethargic and need more time to adjust after birth. However, after several hours, these effects should wear off.

Epidural Anesthesia

Description:

This is a regional anesthesia that helps relieve pain in the lower part of the body during childbirth. The anesthesia is injected into the lower back to block the pain signals from the uterus and birth canal. It is typically administered in hospitals. It is worth mentioning that a qualified anesthesiologist must be present during this procedure.

Action:

The pain relief can take effect within 10 to 20 minutes. It may cause a loss of feeling or movement in your lower body, and you may be unable to walk during labor. An epidural may allow you to participate in the birthing process if you wish.

Side Effects:

You may experience a headache, low blood pressure, a faster or slower heartbeat, fever, itching, or even back

pain after the procedure. There is also a risk of infection, and very rarely, damage to the nerves.

Epidural anesthesia can cause a feeling of heaviness in the legs, and blood pressure may drop (hypotension), but this is rare because the fluid administered through an IV helps maintain good blood pressure. Epidural anesthesia may prolong the second stage of labor. If you do not feel contractions, the midwife will have to tell you when to push. Sometimes, less anesthesia is given towards the end, so the effect wears off and you may feel as if you are giving birth naturally. During this anesthesia, a catheter is usually placed.

TENS

This stands for Transcutaneous Electrical Nerve Stimulation. Some hospitals have TENS devices. If not, you can rent your own machine or buy one at a pharmacy or online.

The effectiveness of TENS machines during the active phase of labor, when contractions become longer, stronger, and more frequent, has not been proven. It is likely most effective in early stages when many

women experience lower back pain. A TENS unit can also be helpful when you are at home during the early stages of labor or if you plan to give birth at home. If you are interested in the TENS method, learn how to use it in the later months of pregnancy.

How do TENS machines work?

Electrodes are attached to your back and connected by wires to a small battery-operated stimulator. By pressing a button, you release short, safe pulses of electricity through the electrodes. You can move around while using the TENS machine. It is believed that the TENS device works by stimulating the body to produce more of its natural pain relief, called endorphins. It also reduces the number of pain signals sent to the brain by the spinal cord.

Side Effects of TENS Devices

No side effects are known for you or the baby.

Medical Questionnaire for the First Visit to the Midwifery Clinic:

Have you ever been a patient in an Intensive Care Unit or High Dependency Unit? (Admission to ITU/HDU)

Have you been admitted to the emergency department in the last 12 months? (Admission to A & E in the last 12 months)

Have you had or do you have:

- ◆ Anaesthetic problems
- ◆ Allergies (inc. latex)
- ◆ Autoimmune disease
- ◆ Back problems
- ◆ Blood / Clotting disorder
- ◆ Blood transfusions
- ◆ Cancer
- ◆ Cardiac problems
- ◆ Cervical Smear
- ◆ Chickenpox / Shingles
- ◆ Diabetes
- ◆ Epilepsy / Neurological problems
- ◆ Exposure to toxic substances
- ◆ Fertility problems (that pregnancy)

- ◆ Female circumcision
- ◆ Gastro- intestinal problems (eg. Crohns)
- ◆ Genital infections (eg. Chlamydia, Herpes)
- ◆ Gynae history/ operations (excl. caesarean)
- ◆ Haematological
- ◆ High blood pressure
- ◆ Incontinence (urinary/faecal)
- ◆ Infections (e.g MRSA, GBS)
- ◆ Inherited disorders
- ◆ Liver disease inc. hepatitis
- ◆ Migraine or severe headache
- ◆ Musculo-skeletal problems
- ◆ Operations
- ◆ Pelvic injury
- ◆ Renal disease
- ◆ Respiratory disease
- ◆ TB exposure
- ◆ Thrombosis
- ◆ Thyroid / other endocrine problems

Are you taking or have you taken any medications in the last 6 months?

Have you had vaginal bleeding in this pregnancy?

Family Medical History:

1. Has anyone in your family had:

- ◆ **diabetes, type:**
 - ◆ thrombosis
 - ◆ high blood pressure / eclampsia
 - ◆ hip problems from birth

2. Is your current partner the biological father of the child?

3. Is the baby's father a blood relation?

4. Have you, the father of the child, or a family member had:

- ◆ a disease that runs in families
- ◆ need a genetic counselling
- ◆ stillbirth or multiple miscarriages
- ◆ a sudden infant death
- ◆ learning difficulties
- ◆ hearing loss from childhood
- ◆ heart problems from birth

◆ abnormalities present at birth

◆ MCADD



2

Chapter Two

Pregnancy and Labor Law

Health and Safety During Pregnancy

Once you have informed your employer about your pregnancy, they must assess your work for risks to your health and the health of your child. The risk assessment should consider:

- ◆ the length of working hours,
- ◆ the time spent standing and sitting without appropriate breaks,
- ◆ the time spent lifting or carrying heavy objects,
- ◆ exposure to toxic substances.

While checking and analyzing workplace safety, the employer should discuss your pregnancy and needs with you. If you have received appropriate recommendations from a doctor or midwife, request a certificate for your employer. What if your work does not meet the appropriate conditions? The employer should take the necessary steps to prevent health risks.



1. Change of Working Conditions

Your employer should change your working conditions to eliminate any risks. For example, they could provide you with a more comfortable chair, adjust your working hours to avoid peak times, or allow you to work from home occasionally. The employer cannot make any changes that you do not agree to. (The law guarantees you, as a parent or guardian, the option of flexible working hours).

2. Performing Different Work

If the employer cannot change the working conditions in your current position, they should offer you different work during your pregnancy. For example, you could do office work instead of lifting heavy items. The new position cannot pay less than the work you have been doing.

3. Staying Home

If your employer cannot provide you with different work, you have the right to stay home until the risk is eliminated. You are entitled to full pay, and the employer cannot change the terms of your contract.

You have the right to paid prenatal visits if you qualify for maternity leave or are an agency worker and have worked for the same employer for at least 12 consecutive weeks.

Inform your employer in advance if your appointment is during working hours. (You are legally protected from dismissal during pregnancy and for 6 months after returning to work from maternity leave. If the newborn/preterm infant requires special or intensive medical care, parents are entitled to paid leave for neonatal care for up to 12 weeks).

You are entitled to paid prenatal appointments if you qualify for maternity leave or are an agency worker who has been employed by the same employer for at least 12 consecutive weeks. Inform your employer in advance if your appointment will take place during working hours.



Agency Worker and Pregnancy

If you have been an agency worker for more than 12 weeks, all the above steps also apply to you. This means that if the agency refuses you work due to the inability to place you in a safe position, they should send you home until they find suitable employment for you. You should also receive your full pay during this time.

If you are a casual worker or have a zero-hour contract, and the employer cannot offer you a change of position, and as a result, you cannot continue working, you should look for other options to ensure your financial security. In such a case, you can seek other employment or apply for social assistance. If you are unwell, experiencing vomiting, or have other pregnancy-related ailments, you can ask your doctor for a sick note to receive statutory sick pay. This is paid for a maximum of 28 weeks and is up to £95.85 per week (even up to £123 per week depending on circumstances).

Discrimination During Pregnancy

In the UK, issues of discrimination are taken very seriously. Protection from discrimination during pregnancy lasts from the moment of conception until the end of maternity leave.

When applying for a job, you do not have to tell anyone that you are pregnant. If you are offered a job and the employer changes their mind when they learn you are pregnant, this is considered “maternal discrimination.”

There are actions you can take if your employer does not conduct a risk assessment or fails to take action to eliminate risks to your safety or dismisses you due to your pregnancy. What should you do in such a situation?

- A. Start by talking to your employer – show any documents from your doctor or midwife that indicate what conditions would be safe for you, or if it is a dismissal, tell them that you believe it is an act of discrimination.

- B. If this does not help, write to your employer requesting a change in working conditions due to your health during pregnancy or requesting to be reinstated in your position because you believe you were dismissed due to pregnancy, which means it is discrimination. Sending the letter by email will provide you with proof that you attempted to reach an agreement.
- C. During this time, you can also contact ACAS or Citizen Advice regarding this matter. The employer will likely not pay you for the period in which you decided to stay home due to unsuitable conditions. However, if the appropriate institutions negotiate your rights, they must pay you any back wages. I sincerely doubt you will have to take such steps, as an official letter indicating your intention to seek assistance from such institutions should resolve the issue

If you lack confidence in negotiating with your employer, you can join a trade union. The purpose of trade unions is to defend the interests of employees. If you have a problem and are a member of a union,



its representatives will stand up for you and help you in discussions with your employer. There are many such organizations in the UK. You just need to search for "Trade Union" and the name of your city. Membership is paid, with monthly fees typically ranging from several pounds depending on the organization.

3

Chapter Three

Maternity Leave and Maternity Allowance

Before discussing these two options, I would like to clarify the terms I will be using in the following sections.

MAT B1 – a certificate confirming pregnancy used as proof for the employer or the Department for Work and Pensions to obtain maternity leave or maternity allowance. The MAT B1 is issued by a doctor or midwife no earlier than 20 weeks before the due date. (This year, it is also available to complete online.)

SMPI – a form from the employer explaining why you cannot obtain maternity leave. This document should also be attached to the maternity allowance application. (This year, it is also available to complete online.)

Statutory Maternity Leave (SMP)

Statutory maternity pay is paid for up to 39 weeks (in two rates). You receive:

- ◆ 90% of your average weekly earnings (before



tax) for the first 6 weeks

- ◆ £184.03 or 90% of your average weekly earnings (whichever is lower) for the following 33 weeks.

SMP is paid in the same way as wages (for example, monthly or weekly).

You are entitled to statutory maternity leave if:

- ◆ you are an employee on a contract, not on a zero-hour contract,
- ◆ you earn on average at least £123 gross per week,
- ◆ you have worked for the same employer continuously for at least 26 weeks, continuing into the “qualifying week” – the 15th week before the expected week of childbirth,

- ◆ you notify your employer in good time – at least 15 weeks before your due date, inform your employer when the baby is due and when you want to start your maternity leave. Your employer may request this in writing;
- ◆ you provide the MAT B1 certificate.

The employer must write to you within 28 days, confirming the start and end dates of your maternity leave

Keep in touch days

While on maternity leave, you can take advantage of the “keeping in touch” option, which allows you to return to work for 10 chosen days at your contractual rate without losing your maternity benefits. The days are agreed upon with your employer and do not have to be full days. However, remember that if you work even one hour on a given day, it counts as a full day.

Additional Maternity Leave

After 26 weeks, you can apply for additional unpaid maternity leave. In the case of statutory maternity leave, your return to your position is guaranteed; however, after additional leave, your employer may

assign you a different role within the company.

Fixed Term Contract

After maternity leave, you can request a change in working hours (to flexible working hours) tailored to your and your family’s needs. This is a mutually worked-out compromise, although the employer must consider the interests of their business and weigh all pros and cons, and may not necessarily agree. Nevertheless, I have not yet encountered a case where any of my clients were denied this. Men can also benefit from this, which I will describe in Chapter Four.

Statutory Annual Leave

While on maternity leave, you remain an employee with all rights, just as if you were physically working. You are therefore entitled to annual leave, just like any other employee. When your maternity leave comes to an end, you can apply for the holiday leave that you „accrued” during the 39 weeks of maternity leave, for which you are entitled to your full contractual rate

Maternity Allowance

If you do not qualify for statutory maternity leave:

Your employer must provide you with the SMP1 form (electronically to expedite the process of obtaining the allowance). It should be attached along with the MAT B1 and 13 payslips to the maternity allowance application to the Department for Work and Pensions. Your employer may also submit this application on your behalf (online), depending on the company's policy.

If you are a casual worker or have stopped working:

You are entitled to maternity allowance if you have worked for 26 weeks in the 66 weeks before your due date. You must then apply for maternity allowance along with the MAT B1 certificate and 13 payslips of your choice to the Department for Work and Pensions. Payslips can come from different employers. The only condition is that the dates of issue fall within the time frame (66 weeks before childbirth) and total a minimum of £30 per week.

To put it more simply: check your calendar for when the 66 weeks back from the expected due date ends.



Chapter Three

During that time, you must have worked for 26 weeks, regardless of any breaks or whether with the same employer. From those 26 weeks, you attach your chosen 13 payslips that have the highest amounts.

When you are self-employed:

To receive the full amount of maternity allowance, you must pay Class 2 National Insurance for at least 13 of the 66 weeks before the due date.

You can do this by making early payments of National Insurance. (You can do this online on the HM Revenue and Customs website or by mail, and) HM Revenue and Customs will send you a letter with information on how to do this. However, it is best to consult an accountant before completing your maternity allowance application. Once you have paid Class 2 National Insurance, you must attach invoices you issued to your clients over 13 weeks to your maternity allowance application. If you do not do this electronically, you can purchase an invoice book. Ensure that when submitting the application at Job Centre, the officer stamps each of those invoices.

If you do not qualify for maternity leave, you can apply for Maternity Allowance by submitting the SMP1 form, MAT B1, and 13 payslips. Self-employed individuals must have paid Class 2 National Insurance contributions for at least 13 out of the 66 weeks before the baby is due.



4

Chapter Four

Dad at Work

Your Rights as an Employee:

A man is entitled to 2 weeks (either as a single 2-week period or two separate weeks) of “paternity leave,” which must be taken between the first day of the child’s birth and the 56th day from the date of birth. (This can be taken at any time between the first day and the 52nd week after the child is born.) Just like maternity leave, “paternity leave” is paid at a rate of 90% of earnings or £184.03 per week, whichever is lower.

In the case of women, absences from work related to pregnancy are paid, whereas for men, they are unpaid; however, the employer cannot refuse them. The father of the child has the right to accompany the partner during two appointments that occur during work hours. Such absence cannot exceed six and a half hours. Parents utilize this opportunity to attend antenatal classes, where they have no influence on the scheduling of sessions. Antenatal classes are extremely useful for both women and men, and I know that many English cities offer classes in Polish.

Unpaid Parental Leave

By law, you and your partner are entitled to 4 weeks of unpaid parental leave per year for purposes such as:

- ◆ spending more time with family,
- ◆ looking for a new school,
- ◆ assisting in adapting to life changes or domestic situations,
- ◆ visiting grandparents.

You are eligible for parental leave if you have been employed on a permanent contract for more than a year.



Official Matters

Birth Certificate

In the United Kingdom, two types of birth certificates are issued:

- ◆ a short version, which contains only information about the child,
- ◆ a full version, which includes details about the parents (required in most cases for official matters such as: passport, social security or benefits).

After registering the child at the Civil Registry Office, you can purchase copies of the birth certificate in several copies. I recommend doing this during the registration because:

- ◆ it is much cheaper when issued „on the spot“,
- ◆ it doesn't take extra time to fill out the application,
- ◆ you will need additional copies for the passport, child benefit, and other official matters. (A copy of the birth certificate is also available online at GOV.uk for £11 per copy).

Who can register the child at the office?

Any parent can do so if they are in a marriage or civil partnership. Both parents must be present if they are not in a legal partnership unless they have previously drawn up a notarial agreement allowing one parent to register the birth. (Recently, it has been possible to schedule an appointment online, and some registrations can be conducted preliminarily online.)

If you will be raising the child alone, you do not have to provide the father's name on the birth certificate. You can add it later if you wish. If you are in a relationship that involves any form of aggression, remember that to obtain a passport or travel abroad with the child, the consent of the father listed on the birth certificate is required. (In cases of domestic violence, you can apply to the court for permission to take the child abroad without the father's consent.) I mention this because I have helped women in such situations, and I know it is very difficult to escape this predicament, and sometimes it is completely impossible. If


Chapter Five

a man has threatened you at least once or manipulated you to change your behavior in some matter, this is a form of abuse. Also, remember that there are appropriate institutions where you can report it.

Child benefit

Child benefit is a payment granted for children and paid every four weeks until the child finishes education. Currently, it amounts to £25.60 per week for the first child and £16.95 for each subsequent child. To receive it, you must submit an application, the so-called Child Benefit CH2 form (also available online), attaching the birth certificate of the child born in the UK. If you gave birth abroad, you must attach the child's passport to the birth certificate by sending the documents via the Special Delivery postal service. If your earnings exceed £60,000 per year, you should familiarize yourself with the regulations regarding applying for this benefit, as it may not be worthwhile. The parent applying for this benefit has their pension contributions paid, which means the years on parental leave count towards the pension, as if you had been working. So, make sure the application is submitted in your name.

The parent applying for this allowance has their pension contributions covered, meaning that the years spent on parental leave count towards their pension as if they were working. Therefore, ensure the application is submitted in your name.



Passport

British Passport

To obtain a British passport for the child, one of the parents must prove that they worked in the UK and paid taxes for five years before the child's birth. You will need to present an employment history (payslips, P60/P45). If your child was born on, for example, 23.04.2024, then the employment history must include the date 23.04.2019 inclusive. You can also call HM Revenue and ask for your employment history from the time you arrived in the UK.

Chapter Five

The passport application can be obtained at the post office. In addition to the employment history, you will need:

- ◆ the passport of the parent applying for the child's citizenship,
- ◆ two photographs of the child, signed by someone who has known you for more than two years, holds British citizenship, and works in one of the positions listed in the brochure (attached to the application). This can be your employer, manager, employee from the agency where you rent a house, landlord, or family doctor.

Once you have gathered the required documents, I recommend using the postal service "Passport Check and Send," which costs £16. A postal official will check if the form is correctly filled out and if the appropriate documents are attached. They will also send the package in a secure manner.



Maternity Grant – Sure Start Maternity Grant

You are entitled to a maternity grant of £500 if this is your first child, or if you already have one but are now expecting multiples, and you or your partner are receiving one of the low-income-related benefits. You can apply for the maternity grant from 11 weeks before the due date until 6 months after the birth of the child.

6

Chapter Six

Useful Contacts

In this chapter, you will find essential information and resources on various topics. The NHS website provides guidance on the safe use of medications during pregnancy and breastfeeding, along with additional information on breastfeeding, alcohol, smoking, returning to work, and dietary impact.

Additionally, government resources are available for those facing domestic abuse, homelessness, and legal matters such as insurance, wills, and lasting power of attorney. Below are links to these resources:

For further legal advice on family protection, wills, and insurance, you can contact **Magdalena Kubińska-Halys**:

Email:

Magda.Kubinska-Halys@kalonfinancial.com

Phone:

+44 (0) 782 7017 833

NHS Guide on Medicines and Breastfeeding



<https://www.nhs.uk/conditions/baby/breastfeeding-and-bottle-feeding/breastfeeding-and-lifestyle/medicines/>

Domestic Abuse Resources and Assistance



<https://www.gov.uk/guidance/domestic-abuse-how-to-get-help#translated-guidance>

Assistance for Those Homeless or at Risk of Homelessness



<https://www.gov.uk/if-youre-homeless-at-risk-of-homelessness>

This book isn't a professional guide, and some information may have changed since it was written. While it offers useful and reliable advice, it's good to keep in mind that it might not cover everything.



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