Understanding *tokophobia*

When fear of pregnancy and childbirth becomes overwhelming: what tokophobia is, where it comes from, your choices and rights, and ways to cope.

MOTHER GROUND
YOUR VILLAGE

Most people feel some nervousness about giving birth. **Tokophobia** (sometimes spelt tocophobia) is different: it is a severe, persistent fear of pregnancy and childbirth that can dominate thoughts, affect daily life, and even lead people to avoid or delay having a baby they want.

It is more common than many people realise. The first worldwide review of research estimated that around **14%** of pregnant women experience tokophobia, and found that it appears to have increased in recent years. **You are not alone, and you are not being dramatic.**

Tokophobia can feel like…

THOUGHTS

- Constant, intrusive worry about birth
- Images of something going wrong
- "I can't do this"

BODY

- Panic attacks
- Feeling sick at the thought of birth
- Poor sleep, nightmares

BEHAVIOUR

- Avoiding pregnancy or delaying a family
- Avoiding antenatal appointments
- Avoiding birth stories, TV, classes

FEELINGS

- Dread, terror, helplessness
- Shame or guilt
- Feeling different from other expectant parents

FEAR IS UNDERSTANDABLE

Tokophobia is not a weakness or a lack of maternal feeling. It often makes sense in light of a person's history, experiences and what they have seen or heard. It is **recognised in national guidance**, and you deserve to be taken seriously and supported.

TYPES AND CAUSES

Where the fear *comes from*

PRIMARY

before a first birth

- Frightening stories
- Past sexual trauma
- Anxiety or OCD
- Medical fears
- Fear since childhood

SECONDARY

after a previous birth

- A traumatic birth
- Pregnancy or baby loss
- Feeling unheard
- Birth injury
- Postnatal depression

Primary and secondary

Primary tokophobia affects people who have not given birth before. It may have been present since adolescence or earlier.

Secondary tokophobia develops after a previous experience, most often a traumatic birth, but also pregnancy loss, stillbirth, or a difficult pregnancy. It may be closely linked with birth trauma or PTSD.

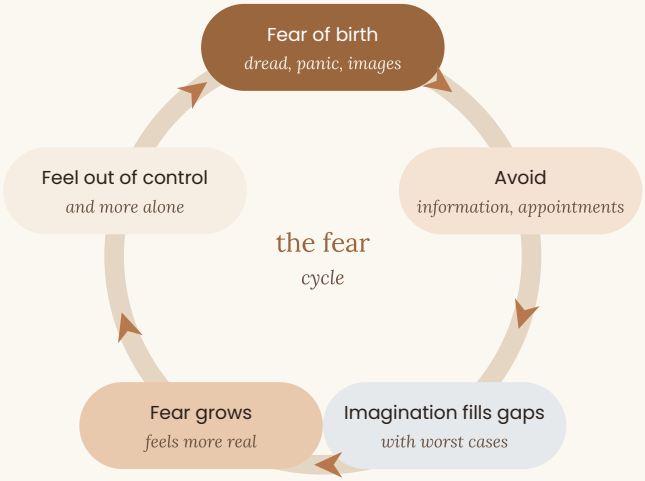
Common fears

NICE notes that fear of vaginal birth can stem from fear of damage to the pelvic floor, harm to the baby, self-doubt about being able to give birth, previous birth experience, or unresolved issues related to the genital area. Other common fears include:

FEAR	WHAT IT MIGHT BE ABOUT
Pain	Unbearable pain, pain relief not working or not given
Loss of control	Being powerless, not listened to, things being done to you
Injury or death	Tearing, damage, or fear of dying yourself
Harm to the baby	The baby being injured or not surviving
Medical procedures	Needles, examinations, hospitals, surgery
Exposure and dignity	Nakedness, being touched, past sexual trauma resurfacing

THE IMPACT

How fear *can take hold*



The fear cycle

It's natural to avoid what frightens us. But when we avoid information and conversations about birth, the mind fills the gaps with worst-case images, and the fear can grow.

Breaking the cycle usually involves approaching the fear gently, in manageable steps, with support and accurate information.

How it can affect life

- Delaying or avoiding pregnancy
- Intense anxiety about contraception
- Distress at scans and appointments
- Difficulty enjoying pregnancy
- Strain on relationships
- Difficulty bonding with the pregnancy
- Higher risk of postnatal depression
- Feeling isolated from other parents

PARTNERS

Tokophobia can affect partners too, who may feel helpless, frightened, or unsure how to help. Partners may also have their own fears, especially after witnessing a difficult birth. Talking openly and planning together can help you both.

You have *options*

You have the right to information, to be listened to, and to make decisions about your body and your birth. National guidance in England (NICE, Caesarean birth NG192) recommends that:

IF…	NICE GUIDANCE RECOMMENDS…
You request a caesarean birth because of tokophobia or severe anxiety about childbirth	You are offered support with your anxiety from a professional with expertise in perinatal mental health
After an informed discussion and offer of support, a vaginal birth is still not acceptable to you	A planned caesarean birth is offered

Birth options to explore

A tailored vaginal birth plan. Agreed pain relief (such as an early epidural), fewer examinations, a named midwife.

A planned caesarean. A known date and process can reduce uncertainty for some people.

Birth options or birth choices clinic. Many maternity units have specialist midwives or clinics to discuss fears and plans.

Debrief from a previous birth. Going through your notes can help make sense of a past experience.

Speaking up in appointments

NAMING IT

"I have a severe fear of giving birth. I need it to be taken seriously and included in my care plan."

ASKING FOR TIME

"I need some time to think about this. Can we talk again next week?"

ASKING FOR SUPPORT

"Is there a specialist midwife or birth options clinic I can be referred to?"

REQUESTING A CAESAREAN

"I'd like to discuss a planned caesarean birth and understand the risks and benefits."

TECHNIQUES

Coping *with the fear*

1 · NAME IT
"This is my fear of birth. It's strong, and it makes sense."

2 · GROUND
Feet on the floor, long out-breaths, notice your surroundings.

3 · GET CURIOUS
"What exactly am I afraid of? What would help with that?"

4 · TAKE A SMALL STEP
One piece of information, one conversation, one plan.

Information in small doses. Choose trusted sources, and decide how much to read at a time. Stop if it's overwhelming.

Write a fear list. Write down every specific fear. Seeing them clearly can make them easier to address one by one.

Plan for control. Agree in advance what will happen, what you consent to, and who will speak up for you.

Plan B and C. Think through what you'd want if plans change. Having a plan for "what if" reduces helplessness.

Relaxation and hypnobirthing. Breathing, visualisation and relaxation practices can help some people feel calmer.

Lean on your partner. Share the plan, your fears and your signals. Agree how they will support you.

VISUALISE COPING, NOT PERFECTION

Rather than imagining a perfect birth, try imagining yourself **coping**, even when things are hard: being supported, asking questions, using pain relief, being cared for. Coping is what matters.

My fears *and my needs*

A SPECIFIC FEAR	WHAT MIGHT HELP	WHO I COULD TALK TO

My birth preferences, at a glance

What I most need my care team to know	
Pain relief I would like	
What helps me feel safe and in control	
If plans change, I would like…	
My partner's role	

Why therapy *can help*

Talking therapy can help you understand where your fear comes from, process any past trauma, and build ways to cope. For some, this means feeling more able to consider a vaginal birth; for others, it means feeling more confident in choosing a caesarean, and less alone with their fear. **The aim isn't to change your mind, but to help you feel safer, more informed and more in control.**

If fear of pregnancy or birth is affecting your life or your plans, you are welcome to get in touch at velvetcouchtherapy.co.uk.

REFLECTION

1. What would help me feel even a little safer about birth?

2. What do I want my care team, and my partner, to understand?

Recommended reading



Why Birth Trauma Matters
Emma Svanberg (2019)
Understanding fear and trauma around birth.



The Caesarean
Milli Hill (2022)
An informed, non-judgemental guide to caesarean birth.



Give Birth Like a Feminist
Milli Hill (2019)
Your body, your baby, your choices.



Your Baby, Your Birth
Hollie de Cruz (2019)
Hypnobirthing techniques for a calmer birth.

Useful websites

Birthrights
birthrights.org.uk
Your rights in maternity care, including requesting a caesarean.

NICE: Caesarean birth (NG192)
nice.org.uk/guidance/ng192
National guidance on caesarean birth.

Birth Trauma Association
birthtraumaassociation.org.uk
Support after a previous traumatic birth.

Make Birth Better
makebirthbetter.org
Resources on birth fear and trauma.

Looking after you

If fear is overwhelming, or you feel very low, please speak to your GP or midwife. If you have thoughts of harming yourself, call 999. Samaritans: **116 123** (free, 24 hours). NHS 111, mental health option. In an emergency, call **999**.

This information sheet offers general support and is **not intended to replace therapy, or medical or professional advice, diagnosis or treatment.** Draws on O'Connell et al. (2017), *Acta Obstetricia et Gynecologica Scandinavica*; NICE guideline NG192, Caesarean birth (2021); Birthrights. © Velvet Couch Therapy. For personal use only.